

ELTE, Institute of Psychology

PPK-PSY:64 Psychedelic Psychotherapies

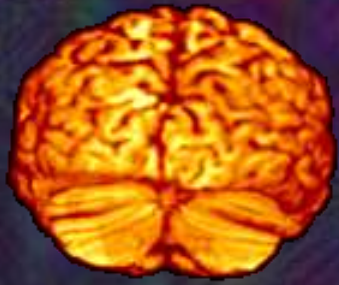
autumn semester 2023



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Dr Levente Móró

PhD / Psychology (cognitive neuroscience / social sciences)

**[MSc / Information Technology ~ scientific
researcher/engineer]**

**consciousness research, altered states of consciousness
(dreaming, hypnosis, hallucinations, psychedelics)**



- **Consciousness Research Group, Centre for Cognitive Neuroscience, University of Turku, Finland**
- **Daath.hu - Hungarian Psychedelic Community**
- **Multidisciplinary Society for Psychedelic Research, Hungary**
- **DÁT2 Psy Help (party/festival harm reduction and crisis intervention)**
- **Hungarian Medical Cannabis Association**

DRLEVE@IKI.FI

Psychedelic Psychotherapies

presentations & seminar (5 x 4 h)

[01] Sep 15

[01.1] Course Introduction and Overview

[01.2] Altered State Assisted Therapies

[01.3] The Broader Context of Psychedelics

[02] Oct 6

[02.1] Psychedelics: Substance Information

[02.2] Psychology of Psychedelic Experience

[02.3] Psychedelics: Research, Experiments, Healing

[03] Oct 27

[03.1] Psychedelic-Assisted Psychotherapies: Theory

[03.2] Psychedelic-Assisted Psychotherapies: Practice

[04] Nov 17

[04] Psychedelic Experience Integration

[05] Dec 8

[05] Summary and Outlook

[01.1] Course Introduction and Overview

TOC

Description.

Topics.

Requirements.

Practical issues.

Overview of presentations.

Description

The course introduces students to the rising field of psychedelic psychotherapies that are expected to have a major impact on mental health care worldwide within a few years. It focuses on the background information, requirements, techniques and protocols that psychologists need to know when working in psychedelics-assisted therapies, or with clients who wish to integrate their previous psychedelic experiences.

Requirements: active participation (allowed absences: 1 out of 5)
 + seminar coursework (compiling information)
 + oral-OR-written examination (optionally online)

Topics

- **altered states of consciousness; psychedelics**
- **transpersonal psychology; trauma processing and regression;**
- **psychedelic research, experiments and healing**
- **psychometric measuring; addictions and dependence; assisted psychotherapies; ethics**
- **psychedelic and psycholytic therapies; therapist training; therapy protocols**
- **MDMA, psilocybin, ketamine, LSD, ibogaine, ayahuasca**
- **psychedelic experience integration**

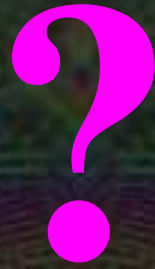
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Practical issues



Overview of presentations

[01.1] Course Introduction and Overview

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[01.3] The Broader Context of Psychedelics

[02.1] Psychedelics: Substance Information

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[03.1] Psychedelic Assisted Psychotherapies: Theory

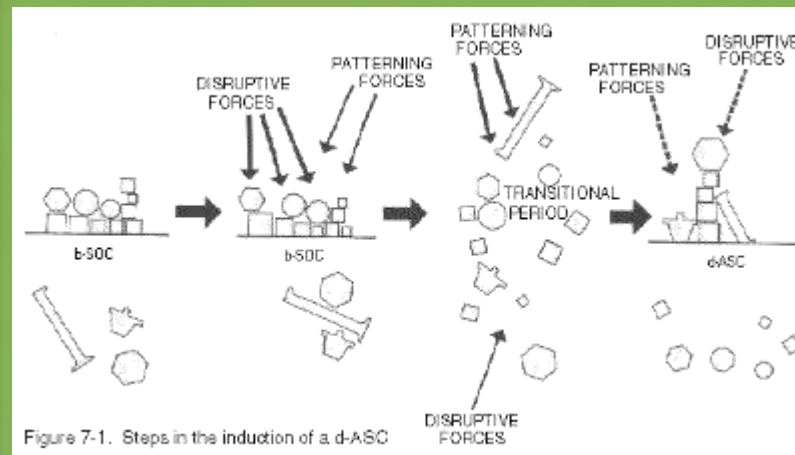
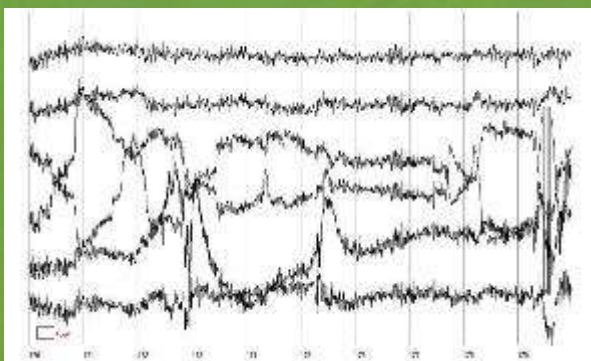
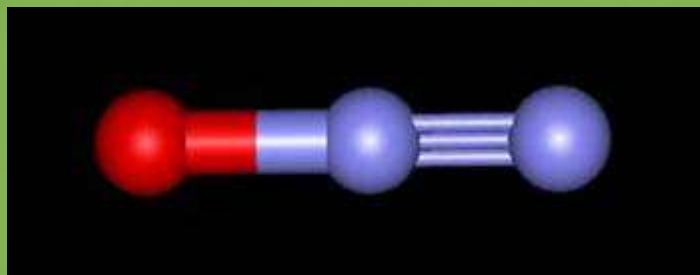
[03.2] Psychedelic Assisted Psychotherapies: Practice

[04] Psychedelic Experience Integration

[05] Summary, Outlook and Resources

[01.2] Altered State Assisted Therapies

Sep 15



[01.2] Altered State Assisted Therapies

Sep 15

Altered states of consciousness (ASC): definitions and phenomena.

Spontaneous, pathological and induced states.

Physiological, pharmacological and psychological inductions.

Altering subsystems of consciousness.

Therapeutic applications of ASC.

[01.3] The Broader Context of Psychedelics

Sep 15

Hallucinations: definitions and phenomena.

Hallucinogens: dissociative, deliriant, psychedelic.

Other related substances.

Purposes of substance use.

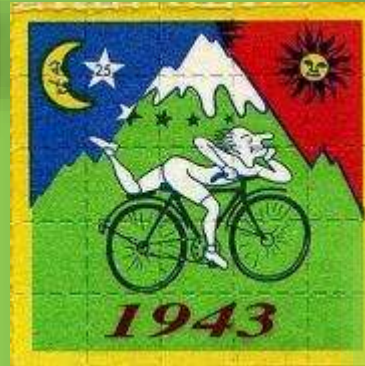
The drug instrumentalisation hypothesis.

Psychonaut subculture.

Biohacking.

[02.1] Psychedelics: Substance Information

Oct 06



[02.1] Psychedelics: Substance Information

Oct 6

**History, physiology, psychology and phenomenology of
psychedelics and related substances:**

ayahuasca

cannabis

DMT

ibogaine

ketamine

LSD

MDMA

muscimol

psilocybin

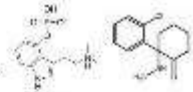
salvinorin A

[02.2] Psychology of Psychedelic Experience

Oct 6



Relative relationship of mystical experience to treatment outcome



Paper	Substance	Treatment	Outcome measure	Mystical exp. correlation size
Bogdanich et al., 2015	psilocybin	Alcohol dependence	Heavy drinking days %	-.85
Garcia-Romeu et al., 2014	psilocybin	Tobacco addiction	Change in craving	-.65
Rothberg et al. 2020	ketamine	Alcohol dependence	Heavy drinking days %	-.62
Griffiths et al., 2016	psilocybin	End of life depression & anxiety	Anxiety (20 6 weeks)	-.59
Ross et al., 2016	psilocybin	End of life depression & anxiety	Depression (20 6 weeks)	-.49
Ross et al., 2016	psilocybin	End of life depression & anxiety	Anxiety (20 6 weeks)	-.42
Davis et al., 2020	psilocybin	Major Depressive Disorder	Depression (20 4 weeks)	-.41
Griffiths et al., 2016	psilocybin	End of life depression & anxiety	Depression (20 5 weeks)	-.36



Stanislav GROF
LSD PSZICHOTERÁPIA

*For the Hungarian
 Psychedelic Community
 Stan Grof*

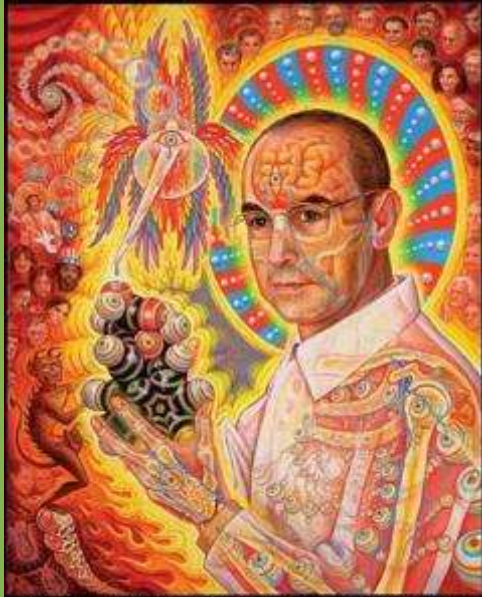
[02.2] Psychology of Psychedelic Experience

Oct 06

**Psychoeducation.
Set and setting.
Intention and integration.
Deconditioning agents.
Transpersonality and spirituality.
Entheogens.
Trauma processing and regression.
Stanislav Grof and the perinatal matrix.
Metaphysical considerations.**

[02.3] Psychedelics: Research, Experiments, Healing

Oct 6



St. Albert and the LSD Revelation Revolution, by Alex Gray, 2006, 24 x 30 in. oil on wood panel. alexgray.com



BECKLEY
FOUNDATION



MAPS
MULTIDISCIPLINARY ASSOCIATION
FOR PSYCHEDELIC STUDIES

Albert Hofmann



1906-2008

[02.3] Psychedelics: Research, Experiments, Healing

Oct 6

The dawn, golden age, pause and renaissance of psychedelic research.

Early results.

Current research directions.

Psychometric measuring instruments.

Treatments of addictions and dependence.

Hospice use: end-life anxiety.

[03.1] Psychedelic Assisted Psychotherapies: Theory

Oct 27

Ethical principles.

Psychedelic and psycholytic therapies.

Lay and underground therapies.

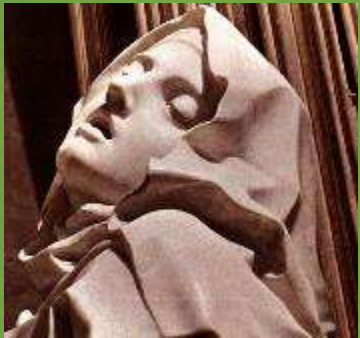
Therapist training process.

Therapy protocols: MAPS, Johns Hopkins, Kenézy hospital.

[03.2] Psychedelic Assisted Psychotherapies: Practice I

Oct 27

MDMA



[03.2] Psychedelic Assisted Psychotherapies: Practice II

Oct 27

Psilocybin
Ketamine



[03.2] Psychedelic Assisted Psychotherapies: Practice III

Oct 27



LSD
Ibogaine
Ayahuasca



[04] Psychedelic Experience Integration

Nov 17

Client groups.

Conditions and environment of client-work.

Search for meaning, apprehension.

The lived body experience.

Psychedelic 'bypass' and ego inflation.

Non-pathologising language use.

Transference and counter-transference.

Data protection.

[05] Summary, Outlook and Resources

Dec 8

Summary of the course.

Near and far future perspectives.

Notable research institutions and organisations.

Top researchers and advocates.

Local and global psychedelic societies.

Conferences and meetings.

Professional journals.

Funding and academic career.

Media and online resources.

QUESTIONS



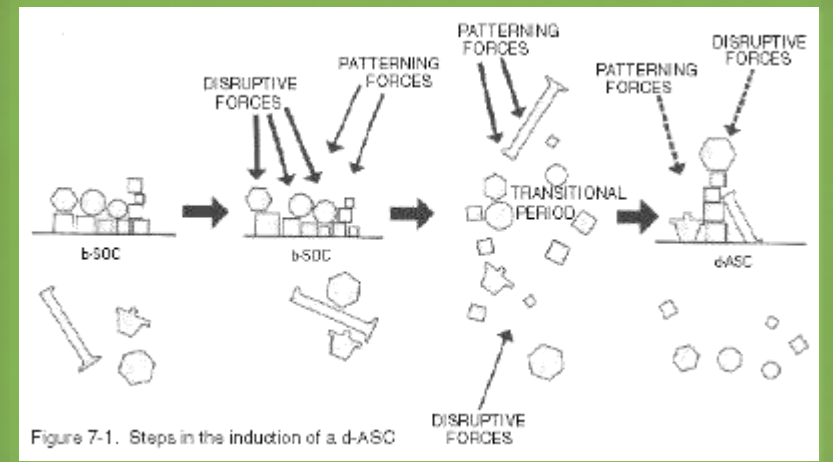
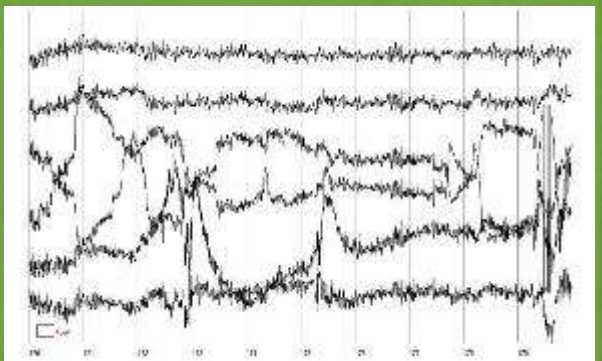
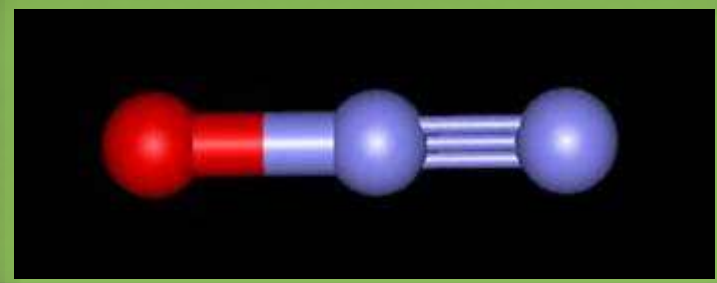
Psychedelic Psychotherapies presentations & seminar (5 x 4 h)

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Course Topics

- **altered states of consciousness**; psychedelics
- transpersonal psychology; trauma processing and regression;
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[01.2] Altered State Assisted Therapies



[01.2] Altered State Assisted Therapies

TOC

**Altered states of consciousness (ASC): definitions and phenomena.
Spontaneous, pathological and induced states.
Physiological, pharmacological and psychological inductions.
Altering subsystems of consciousness.
Therapeutic applications of ASC.**

Altered states of consciousness: definitions

“A temporary change in the overall pattern of subjective experience, such that the individual believes that his/her mental functioning is distinctly different from certain general norms for his/her normal waking state of consciousness.”

Altered states of consciousness: phenomena

Dreaming	- spontaneously occurring	
Hypnosis	- physiologically induced	
Meditation	- psychologically induced	
Hallucinations	- pharmacologically induced	
Trance states	- pathologically induced	
Hypnagogic state	- natural	- sensory deprivation
Lucid dreaming	- spontaneous	- overstimulating
Out-of-body exp.	- pathologic	- repetition
Religious exp.	- deliberate	- body modifications
Near-death exp.	- reversible	- breathing
		- psychoactive agents

William James (1842-1910)



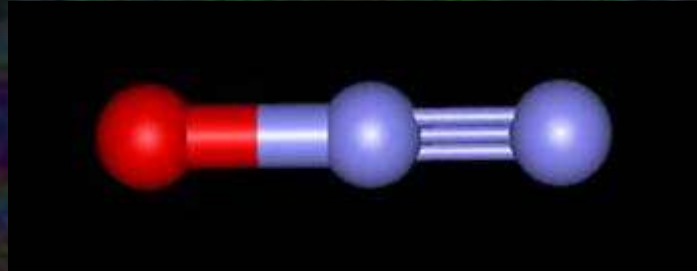
"[...] our normal waking consciousness, rational consciousness as we call it, is but one special type of consciousness, whilst all about it, parted from it by the filmiest of screens, there lie potential forms of consciousness entirely different."

"We may go through life without suspecting their existence; but apply the requisite stimulus, and at a touch they are there in all their completeness, definite types of mentality which probably somewhere have their field of application and adaptation."

"No account of the universe in its totality can be final which leaves these other forms of consciousness quite disregarded."

James W (1902) "The Varieties of Religious Experience"

William James and N₂O



“The mind sees all the logical relations of being with an apparent subtlety and instantaneity to which its normal consciousness offers no parallel.”

“There are no differences but differences of degree between different degrees of difference and no difference.”

James W (1882) "Subjective Effects of Nitrous Oxide"

Spontaneous, pathologic and induced states

somnolence

sleepiness

hypnagogic state

napping

deep sleep

dreaming REM/NREM

hypnopompic stage

sleepwalking

sleeptalking

narcolepsy

high fever

delirium

hysteria/tantrum

deep depression

agitation

shock state

catatonia

rage fit

fit of crying

gelasmus

jealousy

brain fog

paranoia

psychosis

"runner's high"

"contact high"

hyperventillation

anoxia

depersonalisation

derealisation

high velocity

nociception

orgasm

post-orgasmic chill

stimulatedness

drowsiness

hallucinating

fasting

coma

DRUG STATES

Physiological, pharmacological and psychological inductions

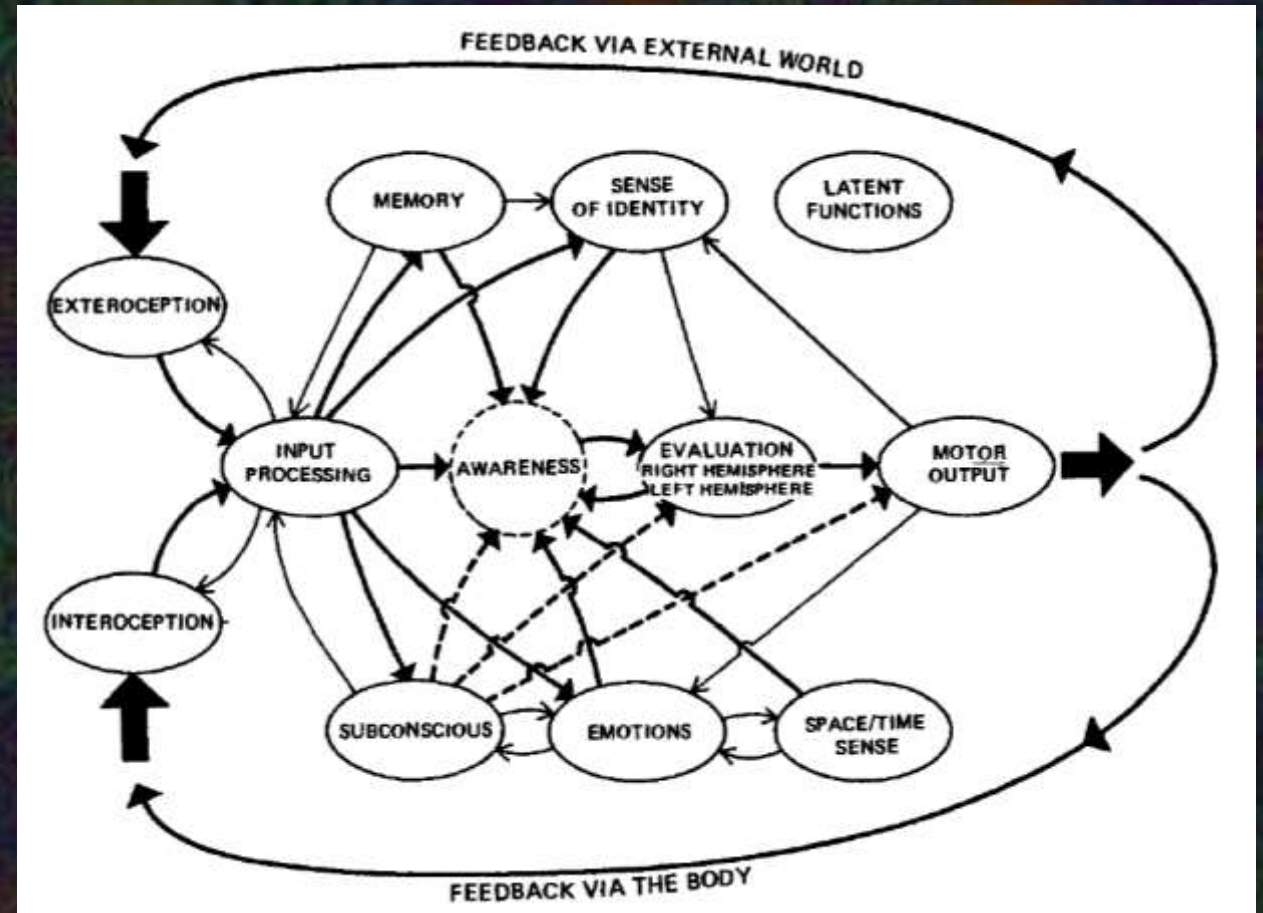
breathing
movement
diet
pain
posture
sleeping
perception
sexuality
space perception

stimulants
depressants
hallucinogens
'smart drugs'
performance enhancers

alertness
emotions
cognition
memory
phantasy
motivation
concentration
attention
social relations
roles

Altering subsystems of consciousness

- (1) exteroception
- (2) interoception
- (3) input-processing
- (4) memory
- (5) sense of identity
- (6) emotions
- (7) evaluation / decision making
- (8) subconscious
- (9) motor output
- (10) space/time sense



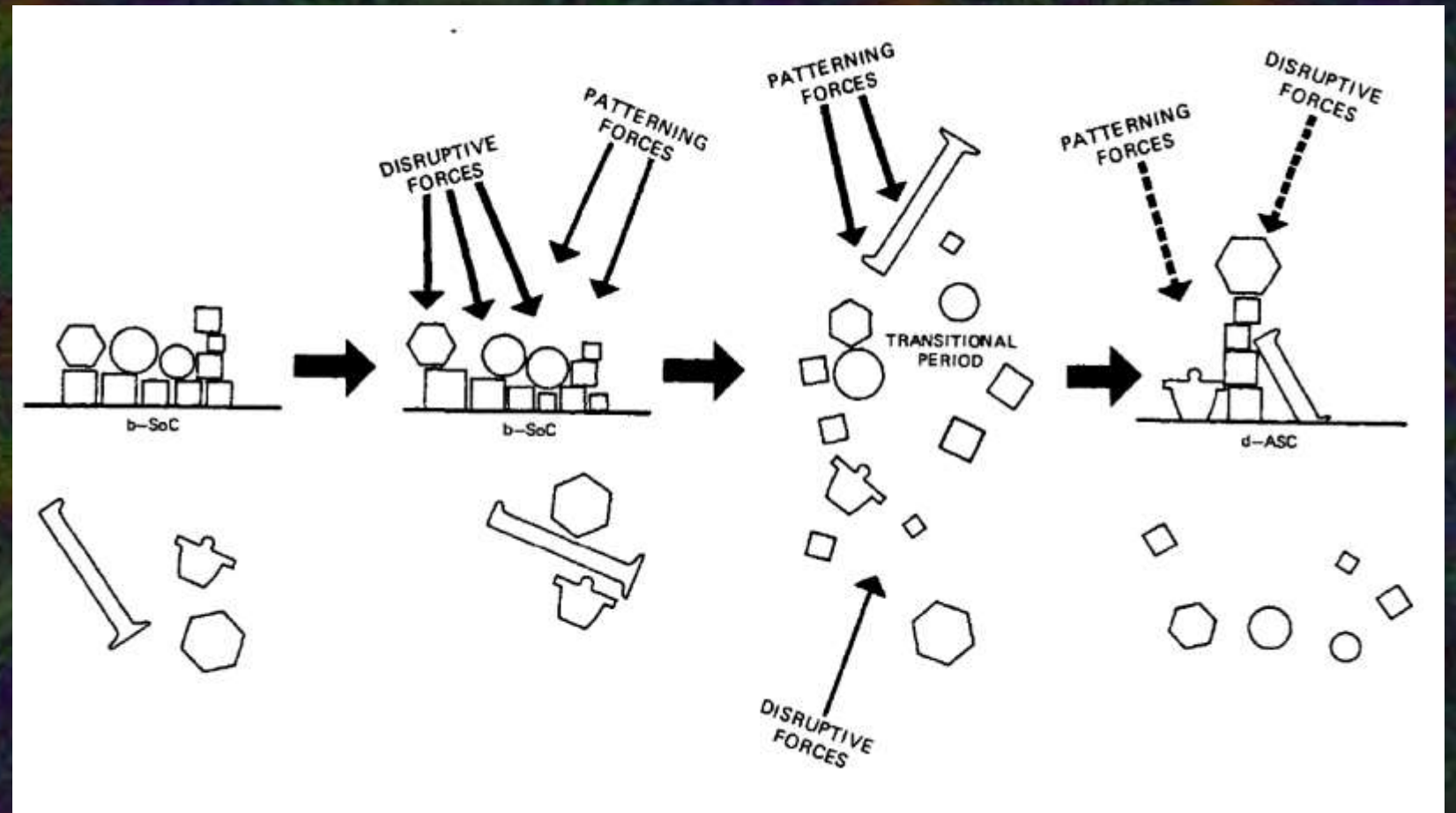
Alteration process of the state of consciousness

(meta)stable b-SoC

+ disruptive forces
+ patterning forces

-> temporary d-ASC

(+ time) -> b-SoC



Tart CT (1975) "States of Consciousness"

Therapeutic applications of ASC

Lucid dreaming: nightmare therapy

Hypnosis: anesthesia, psychotherapy

Meditation: stress relief

Psilocybin: depression, obsessive-compulsive disorder, nicotine addiction

Psilocybin, LSD, LSA: cluster headache

MDMA, LSD: psychotherapy

MDMA: post-traumatic stress disorder (PTSD) + ...

LSD, psilocybin: cancer patients' end-of-life anxiety (hospice)

Ayahuasca: depression, PTSD, drug abuse

Ketamine: depression

Ibogaine: opiate addiction

LSD: chronic alcohol disorder

[01.2] Altered State Assisted Therapies Summary

**Altered states of consciousness (ASC): definitions and phenomena.
Spontaneous, pathological and induced states.
Physiological, pharmacological and psychological inductions.
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Therapeutic applications of ASC.**

QUESTIONS



Psychedelic Psychotherapies

presentations & seminar (5 x 4 h)

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[01.3] The Broader Context of Psychedelics

TOC

Hallucinations: definitions and phenomena.

Hallucinogens: dissociative, deliriant, psychedelic.

Other related substances.

Purposes of substance use.

The drug instrumentalisation hypothesis.

Psychonaut subculture.

Biohacking.

Hallucinations: definitions

Esquirol (1845): *“A man... who has the inward conviction of a presently perceived sensation at a moment when no external capable of arousing this sensation is within the field of his sense, is in a state of hallucination.”*

Horowitz (1975): *“Hallucinations are images based on immediately internal sources of information which are appraised as if they came from immediately external sources of information.”*

David (2004): *“A sensory experience which occurs in the absence of corresponding external stimulation of the relevant sensory organ, has a sufficient sense of reality to resemble a veridical perception, over which the subject does not feel s/he has direct and voluntary control, and which occurs in the awake state.”*

Hallucinations: characteristics

Sensory organs: auditory, visual, touch, olfactory etc.
(+ emotions, focused attention, perceptual expectations)

Dispute:

”a sign of mental illness!” (medical)

”a normal phenomenon!” (psychological)

-> with or without neuro/psychiatric disorders

- **spontaneous: related to sleeping/dreaming**
- **pathologic: related to illnesses**
- **induced: related to hallucinogens**

Hallucinations: phenomena

- Spontaneous: related to sleeping/dreaming

- *hypnagogic* hallucinations (before falling asleep)
- dreaming
- *hypnopompic* hallucinations (before waking up)
- sleep deprivation

- Pathologic: related to illnesses

- alcohol deprivation (*delirium tremens*)
- schizophrenia
- Parkinson's disease
- Charles Bonnet syndrome
- Lhermitte peduncular hallucinosis
- focal epilepsy

- Induced: related to hallucinogens

-> (*see next page*)

Hallucinogens: categories

Deliriant (*acetylcholine*)

- hyosciamine, scopolamine, atropine
(jimson weed, belladonna, angel's trumpet, henbane etc.)

Dissociatives (*GABA, NMDA*)

- ketamine, phencyclidine, ibogaine, N2O

Psychedelics (*serotonin*)

- LSD, mescaline, psilocybin, DMT, LSA
(magic mushrooms, ayahuasca, yopo, morning glory)



Other related substances

Depressants	Alcohol		
	Inhalants		
	Sleep medication, tranquilizers, anxiolytics (<i>without a diagnosis or prescription</i>)		
	Medical drugs and alcohol combined		
	Heroin and other opiates		
	GHB, GBL		
Stimulants	Tobacco		
	Ecstasy (MDMA)		
	Amphetamine and other stimulants		
	Cocaine		
Hallucinogens	Deliriant		
	Jimson weed, angel's trumpet, henbane etc.		
	Dissociative		
	Ketamine		
	Nitrous oxide (N ₂ O)		
	PCP		
	Psychedelic	Minor	Marijuana, hashish
			New synthetic drugs (2C-B, 5-MeO-AMT etc.)
			Ibogaine
		Major	LSD
Psilocybe mushrooms			
Mescaline cacti			
Salvia divinorum			
DMT (ayahuasca, yopo etc.)			
LSA (morning glory, HBWR etc.)			
(fictive drug)	Relevine		

Purposes of substance use

RELSPI	Religious or spiritual practices	SENS	Increasing sensation and pleasure
S-KNOW	Self-knowledge and self-inspection	ART	Stimulating artistic creativity/performance
S-MEDI	Self-medication	PHYS	Enhancing physical power
MOOD	Enhancing mood	REBEL	Rebellion or alternative lifestyle
BORED	Avoiding boredom and hopelessness	IDENT	Building personal identity and drawing attention
DEFIC	Offsetting a deficiency	MEMBER	Expressing membership in a group
SOCIAL	Increasing social contact	CURIO	Out of curiosity

Purposes of substance use

	R E L S P I	S- K N O W	S- M E D I	M O O D	B O R E D	D E F I C	S O C I A L	S E N S	A R T	P H Y S	R E B E L	M E M B E R
Alcohol				4			6	2			2	3
Tobacco					2	7	2				2	3
Depressant medication			2									
Ecstasy (MDMA)				2				2		2		
Amphetamine, stimulants				2						7		
Nitrous oxide (N ₂ O)				2								
Marijuana, hashish		2		2				2	3			
LSD	3	3										
Psilocybe mushrooms	3	3										
Salvia divinorum	2	2										

Drug instrumentalisation hypothesis

- Most people who are regular consumers of psychoactive drugs are not drug addicts, nor will they ever become addicts.
- Drug instrumentalisation as a two-step behavioral process:
 - (1) the seeking and consumption of a psychoactive drug in order to change the present mental state into a previously learned mental state, which then allows for
 - (2) better performance of other, previously established behaviors and better goal achievement.

Drug instrumentalisation hypothesis

- 1. Improved social interaction.**
- 2. Facilitated sexual behavior.**
- 3. Improved cognitive performance and counteracting fatigue.**
- 4. Facilitated recovery from and coping with psychological stress.**
- 5. Self-medication for mental problems.**
- 6. Sensory curiosity – Expanded perception horizon.**
- 7. Euphoria, hedonia, and high.**
- 8. Improved physical appearance and attractiveness.**
- + 9. Facilitating spiritual and religious activities.**

Human needs and psychedelics

Transcendence
Self-actualisation
(Esthetic)
Cognitive
Esteem
Love
Safety
Physiological

≈

Spiritual

Socio

Psycho

Bio

Mystical
experiences

?

Self-
transcendence

Entheogenic
churches

Noesis

Creativity

Psycho-
therapy

Consciousness
research

Altered
states

Autognosis

Cluster
headaches

Addiction
therapy

Self-
medication

...

Psychonaut subculture

Psychonaut: An explorer of the mind, who journeys into his/her psyche by using hallucinogenic drugs or other consciousness altering techniques.

PSZICHONAUTÁK

Psychonauts believe that these spiritual experiences, when properly processed, lead to long-term and positive benefits in their everyday lives.

Autognostic psychonauts

autognosis = “self-knowledge”

psychonaut = “sailor of the mind”

- historical and anecdotic evidence
- occasional seeking of consciousness-altering experiences
- personal investigations -> descriptive introspection
- drug self-experiments: roots of Western psychology
 - William James: nitrous oxide
 - Aldous Huxley: mescaline, LSD
 - Albert Hofmann: LSD, psilocybin
 - Alexander Shulgin: hundreds of self-synthetised psychoactive drugs
- rarely studied underground subculture



Psychedelics in the 21st century

- Culture

- Science

- Research

- Survey: *general, recreational, subcultural, spiritual populations*
- Experimental: *cell-level, animal, human experiments (healthy, non-naïve subjects, MD)*

- Applications

- Medicine/therapy
 - addictology (*alcohol, opiates, stimulants*)
 - psychotherapy
- Hospice

- Religion



Biohacking

Deliberate modification of the mind/body complex by various (biological, psychological, pharmacological, technological) agents, devices and techniques, for a conscious realisation of the potentials of human existence, aiming to enhance individual and social/societal life quality.



[01.3] The Broader Context of Psychedelics

Summary

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QUESTIONS



Thank you for your attention!



Next lecture:

[02.1] Psychedelics: Substance Information

[02.2] Psychology of Psychedelic Experience

[02.3] Psychedelics: Research, Experiments, Healing

Oct 6 Friday 13:15