

Commentary

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“Psychedelic Medicine” – The Next Frontier in Drug Legalization

There is a subtext, or perhaps better stated, a hidden agenda, in the ongoing discussion about marijuana that is central to drug policy. While the use of “medical” marijuana or the legalization of marijuana may be the topic of a conversation, the subtext is whether the use of other substances, or of all substances, now categorized as illegal drugs, should continue to be illegal. The hidden agenda is also about the conflict over the role of the criminal justice system in drug prevention and treatment. Using a term loaded with emotional and political meaning from a by-gone era, the hidden agenda is about “prohibition.”

The pro-drug lobby has recently expanded its ambitious agenda from simply legalizing marijuana to legalizing psychedelic drugs. The template for this campaign has been taken from its successful promotion of state marijuana initiatives over the past two decades, starting with legal medical use and, once that was successful, pivoting quickly to full legalization. Marijuana is the world's most abused drug. Now the model is being used on a lesser set of illegal drugs that are of little interest to the general public. The game plan is very familiar.

The first stage of this agenda has already been revealed. Psychedelic drugs are being promoted for their medicinal value, and the pro-drug lobby is advocating for their legalization. “Psychedelic medicine” was the focus of an April 2013 conference entitled, “Psychedelic Science 2013”, sponsored by the Multidisciplinary Association for Psychedelic Studies (MAPS). The mission of MAPS is to develop “medical, legal, and cultural contexts for people to benefit from the careful uses of psychedelics and marijuana.” More than 1,800 people attended the psychedelics conference to hear research presentations about the medical use of LSD, MDMA (Ecstasy), psilocybin (magic mushrooms), ketamine, ayahuasca, ibogaine, 2C-B, and marijuana, among others.¹

Efforts to legalize marijuana began with successful efforts to legalize its use for medical purposes. By May 2013, 18 states and the District of Columbia permitted “medical” marijuana. Despite the fact that physicians were not authorized to prescribe marijuana, as it had never been subject to the rigorous research required by the U.S. Food and Drug Administration (FDA) before a new medication can be prescribed, they could “recommend” its use to patients. Such recommendation did not include the common specifics of medical prescribing: a specific FDA-approved standardized compound, and the associated dose, quantity, directions for administration, and length of time to be used. These physician recommendations were essentially for the purchase and use, usually smoking, of plant material of unknown content, purity, amount and for an unspecified but generally long duration. The use of marijuana was legalized in many states for essentially any condition. This pattern of medical use bears no relationship to the use of modern medicines in the United States or anywhere in the world. In some states, the new laws permitted the rapid development of a robust medical marijuana

industry. In November 2012, two of these states, Colorado and Washington, passed ballot initiatives to completely legalize the use, sale and production of marijuana for adults age 21 and older. Across more states, new legislation and ballot initiatives were developed to legalize marijuana for medical use and also for personal use and commercial production. These efforts were massive and well-financed. They attracted support from mainstream media and from across the entire political spectrum. Today psychedelic drugs are tracing the same path towards legalization as did marijuana.

The recent trajectory of marijuana legislation provides insight to the direction that will be taken with psychedelic drugs. Like marijuana, psychedelic drugs first are being promoted for “medical” use and then no doubt will be promoted for personal use.

The normalization and spread of “medical” marijuana initiatives has contributed to changing public opinion regarding federal control of drugs of abuse, with half of Americans supporting the full legalization of marijuana. It is likely that following the advocacy of legal marijuana and legal psychedelics, a movement to legalize other federally controlled drugs such as amphetamines and cocaine will not be far behind. Of some relevance is the fact that all of these drugs, while carrying with them serious public health and social consequences – the most obvious of which is their addictive properties – do not commonly cause death as a result of overdose.

It is ironic that the modern drug epidemic began in the early 1960s with a focus on psychedelic drugs, including LSD and others. Only later did marijuana emerge as the dominant drug. Today the drug policy mantra is that “prohibition” has failed and thus, like alcohol in 1933, the solution is legalization. This policy “reform” is ultimately the legal recreational or personal use of any and all drugs. The ultimate objective of this radical policy is the elimination of the illegal drug market, and the associated criminal sanctions against illegal drug use, distribution and sales. The illegal drug market cannot be eliminated unless all drugs are legalized for all consumers. The consequences in terms of public consumption of these substances will be profound. Drug use will be open and common, in schools, the workplace, and in social and recreational settings. The impact on mental health, on productivity, and on safety will be staggering.

The federal control over drugs under the well-established and rigorous regulatory approval process of the U.S. Food and Drug Administration establishes the efficacy, safety and purity of medicines. Only products that pass structured scientific testing are approved for prescription to the public. Now, by ballot initiatives this secure federal protection of the public’s health and safety is being undermined and dismantled. It is our belief that illegal drugs need to stay both regulated and illegal. In support of that objective, the criminal justice system can be used more effectively to reduce incarceration and recidivism, to promote abstinence from drug use and to be an effective engine of recovery.

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¹ Psychedelic Science 2013. Program & Events. April 18-23, 2013, Oakland Marriott City Center, CA. Available: <http://www.maps.org/conference/>