

therapy induced.¹²⁹ As a result, the group began to focus more on the analysis and processing of psychedelic experience. In particular, they no longer considered negatively experienced events as failures but gave them the attention Grof felt they warranted due to their potential for transformation. In further studies, the team systematically investigated psychedelic therapy's prospects for successful treatment of various psychopathologies, for training psychiatric personnel, for use in the care of terminally ill cancer patients, and for treatment during withdrawal of heroin and alcohol addicts.

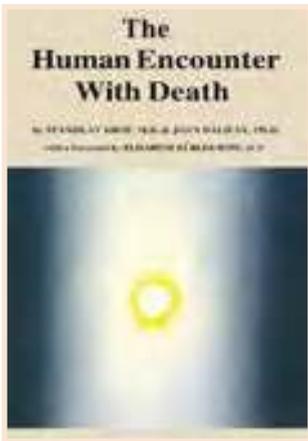
Encouraged by earlier promising results with treating addictions, the research group at the Maryland Psychiatric Research Center randomly divided one hundred and thirty-five alcoholics into two groups. One received a high, one-time dose of 450 micrograms of LSD with the intent of freeing them from their deadlocked addictive patterns through an overwhelming experience; the other group received moderate, one-time doses of 50 micrograms. Six months later, an evaluation team independently ranked 53 percent of the higher dosage group as "essentially rehabilitated" as compared with 33 percent of the lower dosage group. Eighteen months later, the differences between the two groups had nearly vanished. The results from this study were all the more remarkable since all the patients had only undergone a single LSD session combined with a few hours of psychotherapy before and after the trial. Most surprising for the therapists were the dramatic improvements in many patients in the control group who had only received 50 micrograms of LSD, as the low dosage was considered to be an "active placebo" without noticeable therapeutic effect.¹³⁰

Encounter With Death

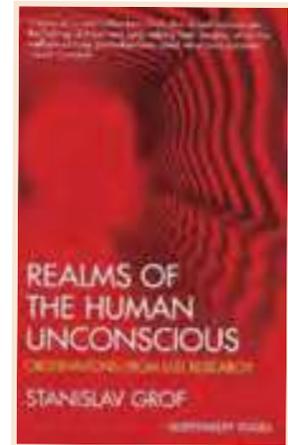
A further indication for LSD-assisted psychotherapy came from the treatment of seriously ill and dying persons. Independently of each other, author Aldous Huxley and pediatrician Valentina Wasson, wife of mushroom researcher Gordon Wasson, were the first to suggest administering psychedelics in conjunction with therapeutic accompaniment to terminally ill patients. A pioneer in LSD treatment for terminal cancer patients, Eric Kast investigated the use of LSD as an analgesic, in studies which he carried out in the early 1960s at the Chicago Medical School.

At Maryland Psychiatric Research Center, Walter Pahnke systematically explored the effects of psychedelic therapy on cancer patients. Following Pahnke's early death in 1971, Grof took charge of medical treatment. The study investigated the changes in mental states and in the physical pain of patients but also how the patient's attitude towards dying was affected. Over a number of years, more than one hundred cancer patients were given LSD or DPT—dipropyltryptamine—a similar but significantly shorter-acting substance.

Many patients reported a distinct reduction in negative emotions, such as anxiety, despondency, tenseness, and insomnia, as well as diminished avoidance of social situations. Furthermore, LSD therapy had a marked though unreliable influence on acute physical pain. Many patients who did not respond to conventional analgesics reported that a single LSD session reduced their pain for weeks, some for even months, and others were completely relieved. The most spectacular changes came in attitude



Joan Halifax



towards death and belief about a life after death. Nearly all patients with spiritual sensibility found they feared death less and tended to a stronger belief that the soul or consciousness survives biological death. Successful therapy also had a positive influence on relatives of these patients, allowing them to bear more readily their mourning and ineluctable loss. For some thirty percent of cancer patients, an LSD session brought dramatic improvement on the parameters measured and moderately positive change for another forty percent. The remaining thirty percent showed no significant change after treatment.

Grof considered the treatment of the terminally ill to be the most interesting and least controversial indication for LSD psychotherapy. He believed that the possibility of quickly reducing psychic and physical suffering for dying persons met with less resistance than other areas of application. Although this treatment was tried almost exclusively with cancer patients, his opinion is that it is appropriate to use it for people with other life-threatening illnesses. His observations showed that for some patients, LSD psychotherapy could

not only aid in preparing for death but might prolong life or even bring recovery.

With his first wife, anthropologist Joan Halifax, who assisted in these studies, Grof presented their results in *The Human Encounter with Death*. (Grof, Halifax 1977) Along with an extensive description of their analyses, they elucidated the phenomena of dying and death from comparative cultural, philosophical and spiritual perspectives. They came to the conclusion that "Death and life, usually considered to be irreconcilable opposites, appear to actually be dialectically interrelated. Living fully and with maximum awareness every moment of one's life leads to an accepting and reconciled attitude toward death. Conversely, such an approach to human existence requires that we come to terms with our mortality and the impermanence of existence. This seems to be the innermost significance of ancient mysteries, various spiritual practices, and

Which states of consciousness do we want to show present to our children, those shown on RTL television or the one found with meditation? The one found with alcohol or the one found with LSD?

Thomas Metzinger

rites of passage." A rabbi, who, on his own initiative, had participated in an LSD training program at the Research Center, sought words that did justice to his harrowing encounter with death and subsequent spiritual rebirth. What came to his mind were words spoken by Leonardo da Vinci as he was dying: "While I thought that I was learning how to live, I have been learning how to die," and he turned them around and said: "I thought I was dying, but I was only preparing to live."

The Cartographer

In our everyday consciousness, we experience our identity as firmly delimited. In altered states of consciousness, such as dreams, ecstasy, trance or intoxication, boundaries between the self and the external world shift in many ways. At the start of the twentieth century, American psychologist William James pointed out that "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 flimsiest 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." LSD apparently provided that stimulus. In his first book, *Realms of the Human Unconscious: Observations from LSD Research*, (1975)

Grof provided a systematic survey of states and contents of consciousness that appeared in his patients during LSD therapy

and illustrated them with striking protocols from his therapeutic practice.

The initial sessions usually resulted in the recall of long-buried experiences from early childhood. These were not merely remembered but literally re-lived. Birth and death are undoubtedly the two most important constants in human life. The experiences of death and rebirth are thus central to psychedelic sessions. Grof concluded that psychedelic therapy is a new version of that which "since time immemorial, powerful procedures have existed... that appear to facilitate such experiences in individuals as well as groups... either on special occasions, such as rites of passage and initiation rites, or as a matter of everyday practice in ecstatic cults." In the course of the many therapeutic LSD sessions he guided, Grof observed how frequently memories of the period surrounding birth came up, always corresponding to a particular phenomenology and fixed pattern. He discerned four phases in the psychological experience of time before and after birth, that corresponded with psychopathological syndromes and correlated with specific memories from postnatal life. During the first phase of a normal pregnancy, the fetus experiences *oneness* with the mother. After onset of labor and first contractions, this experience changes to *hell*. During contractions which lead to expulsion, the experience is one of *struggle*. And, finally, the fetus emerges newly born into the light. In Grof's experience, these phases shape one's psyche for the rest of one's life depending on which of these phases was decisive and how they were experienced. Grof called them "perinatal matrices" or behavior and thought patterns from the period surrounding birth. Grof

Lose your mind and come
to your senses.

Fritz Perls