

# Turn On, Tune In, Step Back: Historical Insights on the Psychedelic Renaissance

Erika Dyck, PhD

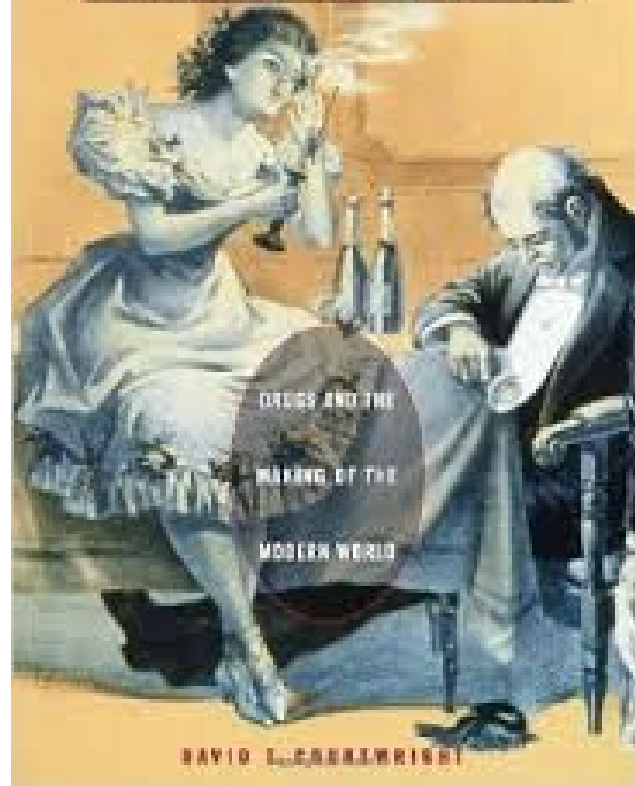
Professor & Canada Research Chair

# **SCIENTIFIC AMERICAN™**

**End the Ban on Psychoactive Drug Research  
It's time to let scientists study whether LSD,  
marijuana and ecstasy can ease psychiatric  
disorders**

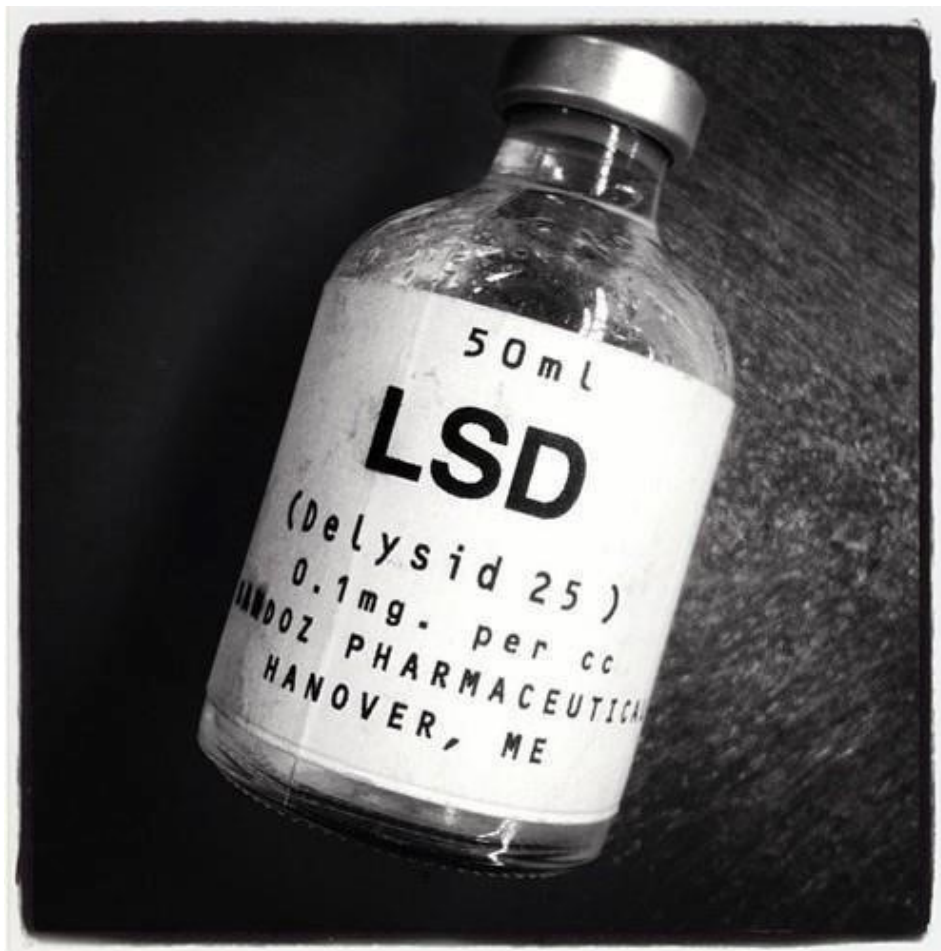
**By The Editors | Feb 1, 2014**

# FORCES OF HABIT



DRUGS AND THE  
MAKING OF THE  
MODERN WORLD

DAVID L. COLLIER-RINK



50 ml

**LSD**

(Delysid 25)

0.1 mg. per cc

HAWDOZ PHARMACEUTICAL

HANOVER, ME

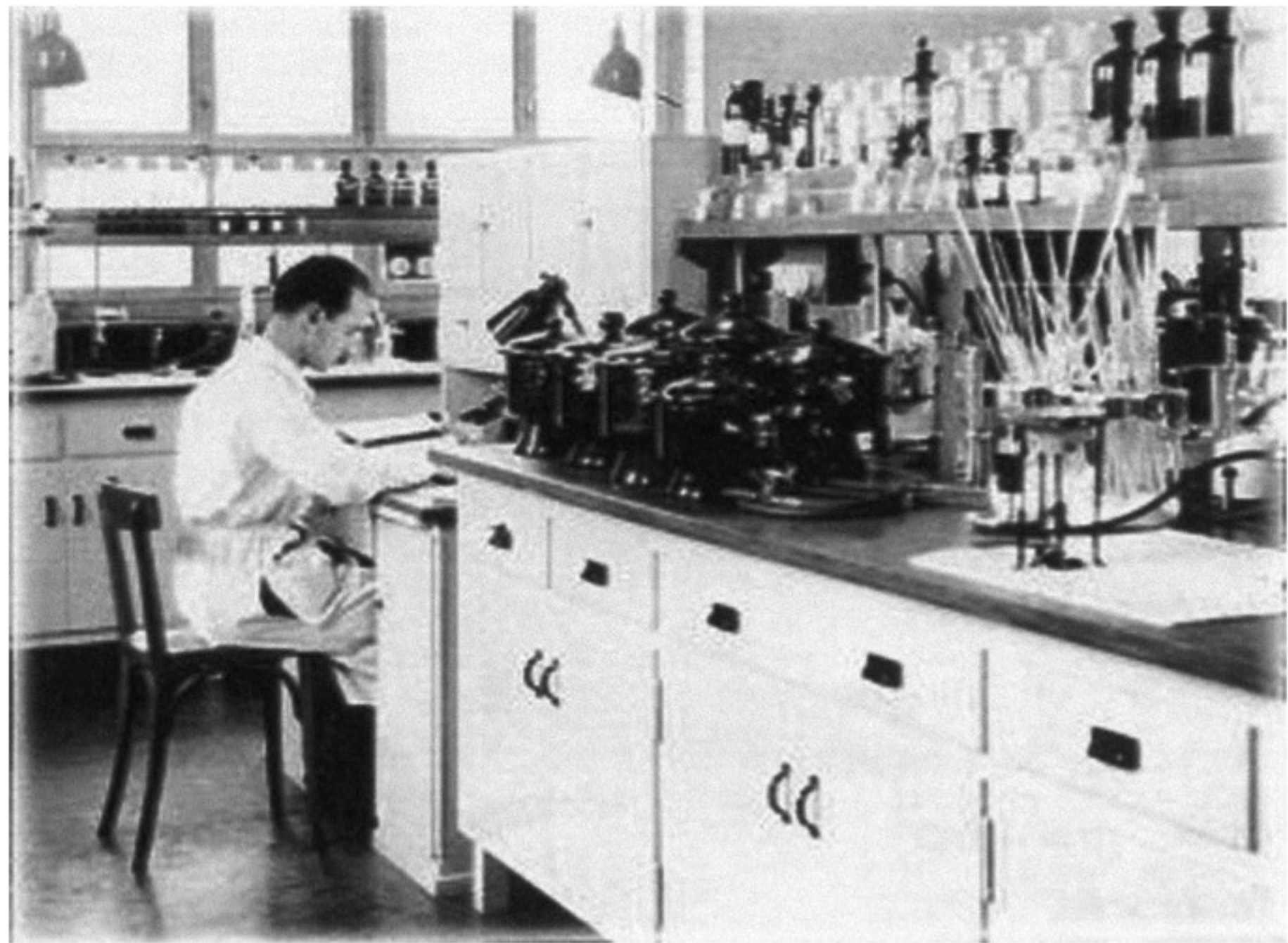




Mark Geyer, University of California,  
San Diego

425 peer reviewed papers

Behavioural psychology and  
psychedelics

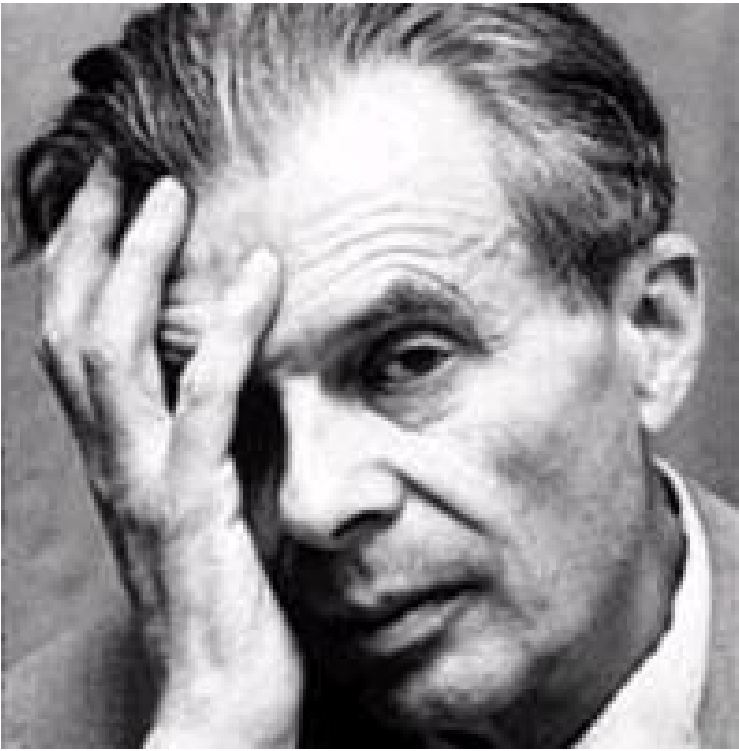








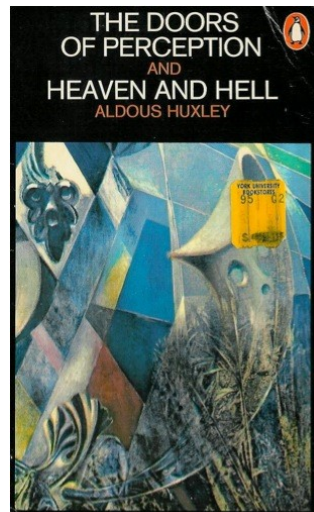




Aldous Huxley



Humphry Osmond





For anxiety, tension and muscle spasm in everyday practice.

- well suited for prolonged therapy
- well tolerated, relatively nontoxic
- no blood dyscrasias, liver toxicity, Parkinson-like syndrome or nasal stuffiness

RELAXES BOTH MIND AND MUSCLE  
WITHOUT IMPAIRING MENTAL OR PHYSICAL EFFICIENCY



## Miltown

tranquilizer with muscle-relaxant action

© 1967 Wallace Laboratories, Inc., Cincinnati, Ohio  
Manufactured by L. S. Polakoff, 2794 29th

Supplied: 400 mg. scored tablets  
200 mg. sugar-coated tablets

Usual dosage: One or two  
400 mg. tablets t.i.d.

Literature and samples available on request

WALLACE LABORATORIES, New Brunswick, N. J.



Your  
**medication**  
is called

**chlorpromazine**  
or Largactil



Pregnancy  
can be made  
a happier  
experience...



Miltown therapy resulted in complete relief from symptoms in 88% of 164 pregnant women complaining of insomnia, anxiety and emotional upset.<sup>1</sup>

MILTOWN RELIEVES BOTH MENTAL AND MUSCULAR TENSION

- causes no adverse effects on circulatory system, G. I. tract, respiration, or other autonomic function
- does not impair mental faculties, motor control or normal behavior
- well tolerated throughout pregnancy<sup>2</sup>

**Miltown**  
tranquilizer with muscle-relaxant action

Available in one 100 mg. tablet and one 200 mg. sugar-coated tablet, both of 90. Also available in Miltown<sup>®</sup> 400 mg. scored tablets without scoring. <sup>1</sup> Belfrage, M. A., Berman, A. and Margolis, J. E. Reproduction in pregnancy Obst. & Gynec. 4:79, June 1962.

WALLACE LABORATORIES, New Brunswick, N. J.



for  
depression



**'Deprol'**<sup>1</sup> Clinically confirmed  
in over 1,200  
documented  
case histories<sup>2</sup>

### CONFIRMED EFFICACY

- Deprol ▶ acts promptly to control depression without stimulation
- ▶ restores natural sleep
  - ▶ reduces depressive rumination and crying

### DOCUMENTED SAFETY

- Deprol is unlike amine-oxidase inhibitors
- ▶ does not adversely affect blood pressure or sexual function
  - ▶ causes no excessive elation
  - ▶ produces no liver toxicity
  - ▶ does not interfere with other drug therapies
- Deprol is unlike central nervous stimulants
- ▶ does not cause insomnia
  - ▶ produces no amphetamine-like jitteriness
  - ▶ does not depress appetite
  - ▶ has no depression-producing aftereffects
  - ▶ can be used freely in hypertension and in unstable personalities

**Dosage:** Usual starting dose is 1 tablet b.i.d. When necessary, this dose may be gradually increased to the 3 tablet q.i.d.

**Contraindications:** Each tablet contains 400 mg. propylthiouracil and 1 mg. 2-diethylthioethyl benzothiazolothione hydrochloride (benzocaine BCI).

**Regulation:** Bottle of 30 scored tablets.

1. Deprol<sup>®</sup>, Chlorpromazine Hydrochloride, is a registered trademark and name of the manufacturer. <sup>2</sup> Documented histories. <sup>3</sup> Deprol<sup>®</sup> is a trademark of Wallace Laboratories, Inc., New Brunswick, N. J.

Literature and samples on request. WALLACE LABORATORIES, New Brunswick, N. J.



**MACLEAN'S**

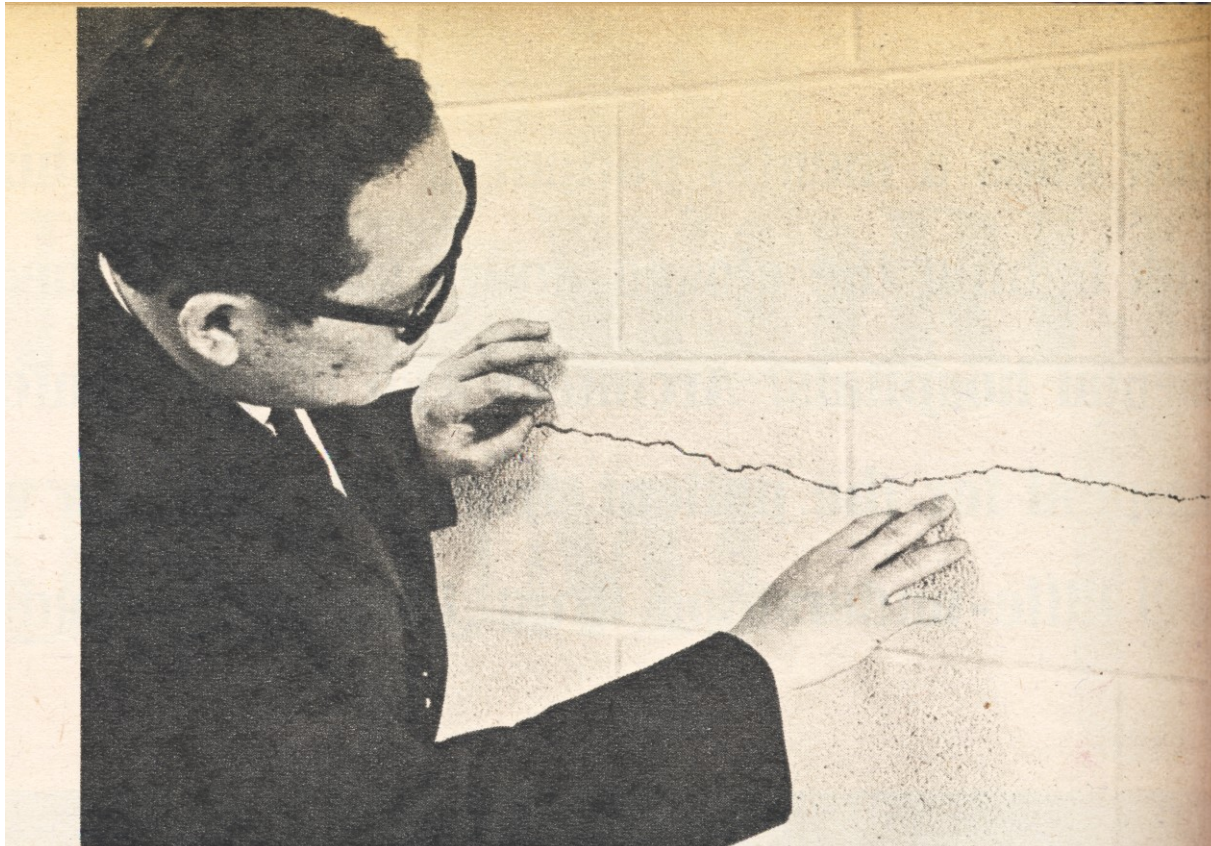
CANADA'S NATIONAL MAGAZINE



**10.45 a.m.**

**THE ORDEAL BEGINS:** Sidney Katz swallows a dose of drug LSD, closely supervised by Saskatchewan mental health research scientists Charles Jillings, Humphry Osmond, Ben Stefaniuk and Elaine Cumming.





*"I saw a crack in the wall and it frightened me. I imagined it was a huge crevice," says Izumi. This is typical of fear suffered by schizophrenics.*







HOLLYWOOD HOSPITAL

L. S. D. AUTOBIOGRAPHY

NAME \_\_\_\_\_

DATE \_\_\_\_\_

I have already expressed my philosophy of life on a previous page, however I can summarize it here very briefly - Live & let live.

I believe my capacity for self-deception is well illustrated by the fact it took me all this time to admit I was an alcoholic.

My role to other people is that of a wise old counsellor, by job & by heart. My role to my family is that of a devoted husband & loving father (again I will add - when I am not drinking).

Honesty & sincerity must prevail in every aspect of a persons life if they wish to attain complete happiness.

My idea of rejection is well illustrated in the section on family history where my father rejects his family for self justification.

If I were to select a personality as my ideal it would be that of Sir Winston Churchill.

The only way I could become this ideal would be to have a successful L.S.D. treatment & another war.

17. - I believe other people generally see me as a friendly well-mannered person who is well informed with respect to his job & quite capable of handling same.

18. - When I was 10 or 11 yph old, I nearly drowned in an old creek the kids used as a swimming hole. This probably has some bearing on my fear of water.

END OF FIRST EDITION.

2nd edition - Fri July 16/65. - Inner Sanctum ???



HOLLYWOOD HOSPITAL

Page \_\_\_\_\_

L. S. D. PSYCHIATRIC ~~EXAMINATION~~

NAME \_\_\_\_\_

DATE July 7, 1965

This is a 33 year old housewife from North Vancouver, a candidate for a psychedelic treatment experience. Her chief problem is a compulsion to seduce men into extra marital relationships. She had a previous (LSD) experience directed by Dr. N. Chwelos of Calgary, and at that time experienced an intense hostility to her father. This hostility has apparently not been resolved as she feels much of it is carried over to her husband. The father whom she disliked is presently suffering, at age 55, from multiple sclerosis.

She had many arguments with her mother, described as a possessive self-effacing woman of 58. All in all there appears to be no close family tie with either her parents or her older or younger brother, the only siblings. In her earlier days she appears to have allied herself with three unmarried maternal aunts who were constantly antagonistic to the patient's father. As the patient went on in her education, including a B.A. Arts course, she began to look with disdain and shame at her poorly educated parents. Intellectually she excelled, yet she was never fond of study. She developed a fear of authority, e.g. teachers. She was always interested in extra curricular activities. She developed no goals other than getting married.

Her marriage is maladjusted, as briefly suggested above. Regarding herself she describes herself as a person devoid of humility, compassion and the ability to love, full of fears. She shows prejudices against the church and formal religious practices. There is no actual alcoholic problem, but she probably drinks more now than 2-3 years ago. She is not addicted to drugs or smoking.

Her autobiography would indicate that she resents motherhood and the role of being a wife. She has mothered a child, a boy, not her husband's. In her attempt to sever relations with this third party she underwent an LSD experience. Since then her sexual adjustment (at home) has improved but she is unable to achieve an orgasm. Her sexual compulsions have lessened since the LSD experience. The LSD experience has stirred up interest (sexually) re men in general.

Examination re her mental status shows a woman of superior IQ, friendly. She wants a psychedelic experience but fears she may become very aggressive to the therapist and especially any lady co-therapist or sitter. \*Note that she has strong desires to hurt her mother sexually and to make her suffer. Also note that a lesbian tendency occurred in her first experience. There is no evidence of psychosis. I'd say this patient is full of fears and hostility, yet on the other hand I feel she is a suitable case for a treatment experience. I would diagnose her as passive-aggressive personality with neurotic trends obsessive-compulsive in respect to her sexual adjustment. She has presumably a deflated feeling of self-worth. The ultimate prognosis is open to question.

*I haven't received any  
MMPI done on this patient*

*D. C. MacDonald*  
D. C. MacDonald, M.D.  
Psychiatrist

/ml





HOLLYWOOD HOSPITAL

PATIENTS DESCRIPTION OF EXPERIENCE

Page 1.

NAME \_\_\_\_\_

DATE July 29, 1965

Perhaps what I have gained the most from my experience with LSD is that my feelings should be trusted instead of feared, especially the feelings of sex. Most of my life I have tried to let my mind govern my actions instead of my feelings, and have thought that sexual desires were something to be denied because they would get me in trouble. Now I realize that it has been my denial of these normal desires for sex which has made trouble for me, which has made me deprive myself of many of the joys of living. I thought that I should do the things that were expected of me, rather than the things I wanted to do. One of the things I felt to be expected of me was to be a virgin until I got married. This appears to me now to have been a mistake, for it increased my fear of intercourse. This was far from being a help to me in making a good marriage.


Another thing related to this is the fact that I needn't and shouldn't think that I owe it to a man to do something to me that I don't want, just because I think he expects it or I owe it to him. A really satisfying sexual relationship is arrived at only when the feeling is mutual.

Probably the greatest mistake of my life was to marry Jim because I did not feel strongly attracted to him sexually. Instead, I thought he was unusually high in intelligence and would provide well for me financially. These latter things are still true, but by discontinuing and denying my sexual feelings about him, I denied both him and me of the much more important part of living, love. The kind of love that makes everything else unimportant. Denial of sex is a denial of life and its denial can be a thwarting influence on everything else in life. But the recognition of sex as a universal need, and its fulfillment, can be a thing of beauty and a source of strength in all other activities.

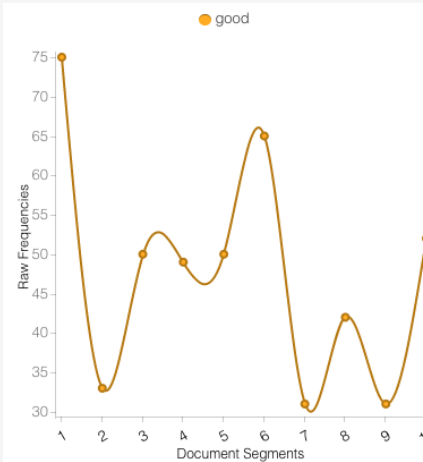
Hallelujah for the unlocking of the gate. May someone open it for me some day.

# Voyant

Cirrus Terms Links Reader Trends Document Terms



(12) (A) Tobacco 2 pounds monthly  
 Started age 15 &#8211; no problem that I know  
 (B) Alcohol. Started at about 20 years but very infrequent.  
 Problem started at age  
 33. When it became a problem for my wife and children.  
 Alcohol makes me grandiose and happy. All my troubles  
 leave me  
 (C) I have never experienced drugs in any form or sort  
 [page 4]  
 (13) Sexually the young females appeal to me - seldom any  
 of my age. I do not go  
 out with women. I do not consider them **good** companions.  
 First sexual experience was with my wife at the age of 19  
 Masturbation for relief &#8211; yes  
 Homosexuality impossible for me  
 (14) No illness of importance that I can remember  
 My ego could have some effect on my present despondent  
 Condition [sic]  
 (15) No hereditary illnesses in family except alcohol which  
 afflicted my father, one  
 sister and myself. Mother is insanity due to some condition  
 at my birth.



Summary Documents Phrases Contexts Bubblelines

This corpus has 1 document with 219,621 total words and 12,836 unique word forms. Created 49 seconds ago.

lost frequent words in the corpus: **years** (727); **time** (702); **mother** (644); **father** (551); **crossed** (506)

Document	Left	Term	Right
1) *trans...	I do not consider them	good	companions. First sexual experience was
1) *trans...	teachers &#8211; as a whole	good	e [line over letter] [sic
1) *trans...	worked hard in medicine &#8211;	good	except where outside problems upset
1) *trans...	when I have done something	good	. When I take lig. [sic
1) *trans...	self deception [sic] &#8211; extremely	good	Philosophies &#8211; Have read some
1) *trans...	self ed. Honesty &#8211; generally	good	except When [sic] impaired o
1) *trans...	as I have had a	good	in t [sic] one for
1) *trans...	8211; age 19 &#8211; relationship	good	+ bad. IT is good when
1) *trans...	relationship good + bad. IT is	good	when she wants money &#8211;

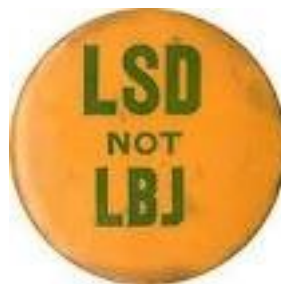
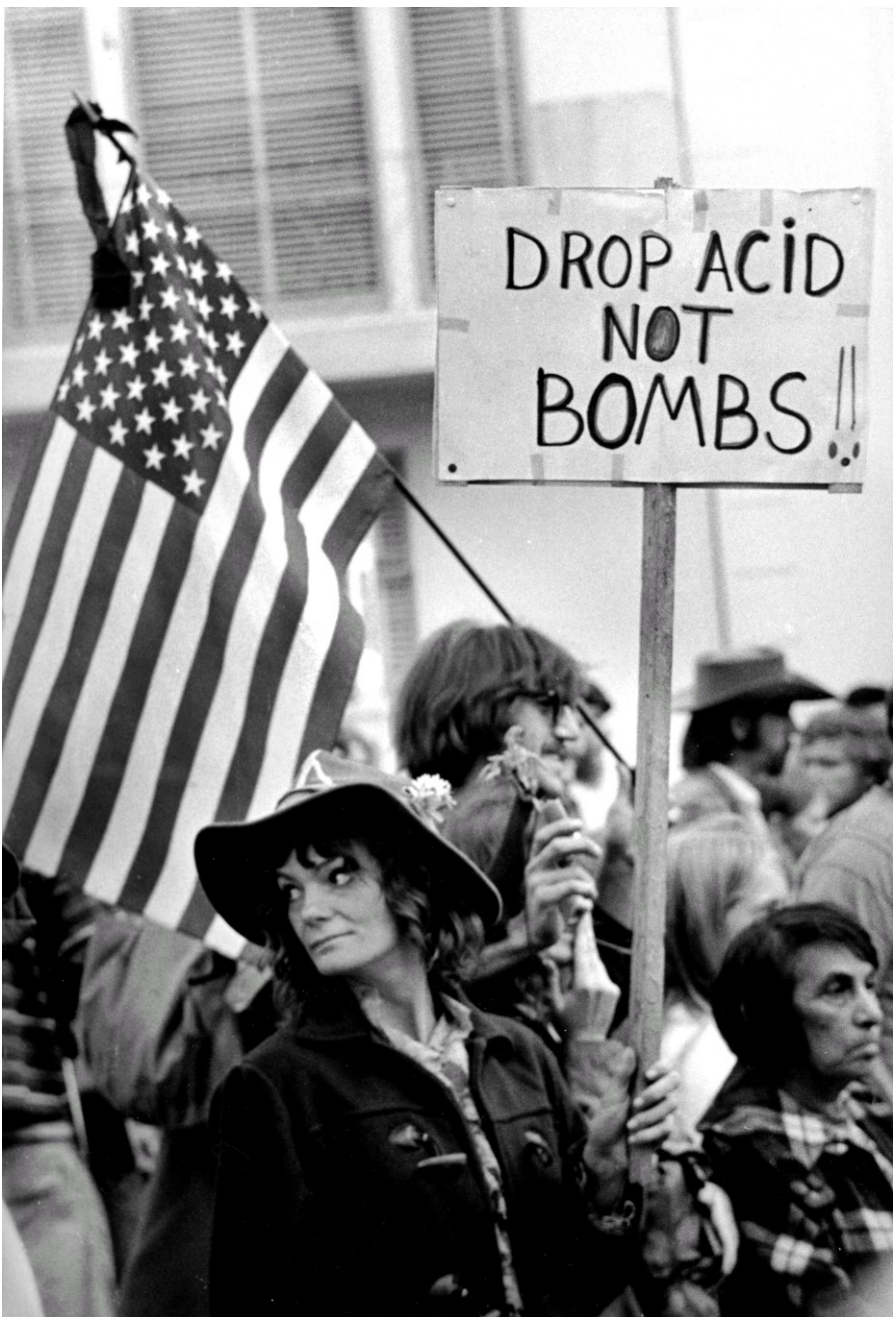
478 context expand

Voyant Tools - Stéfan Sinclair & Geoffrey Rockwell (© 2016) Privacy v. 2.2 (M1)











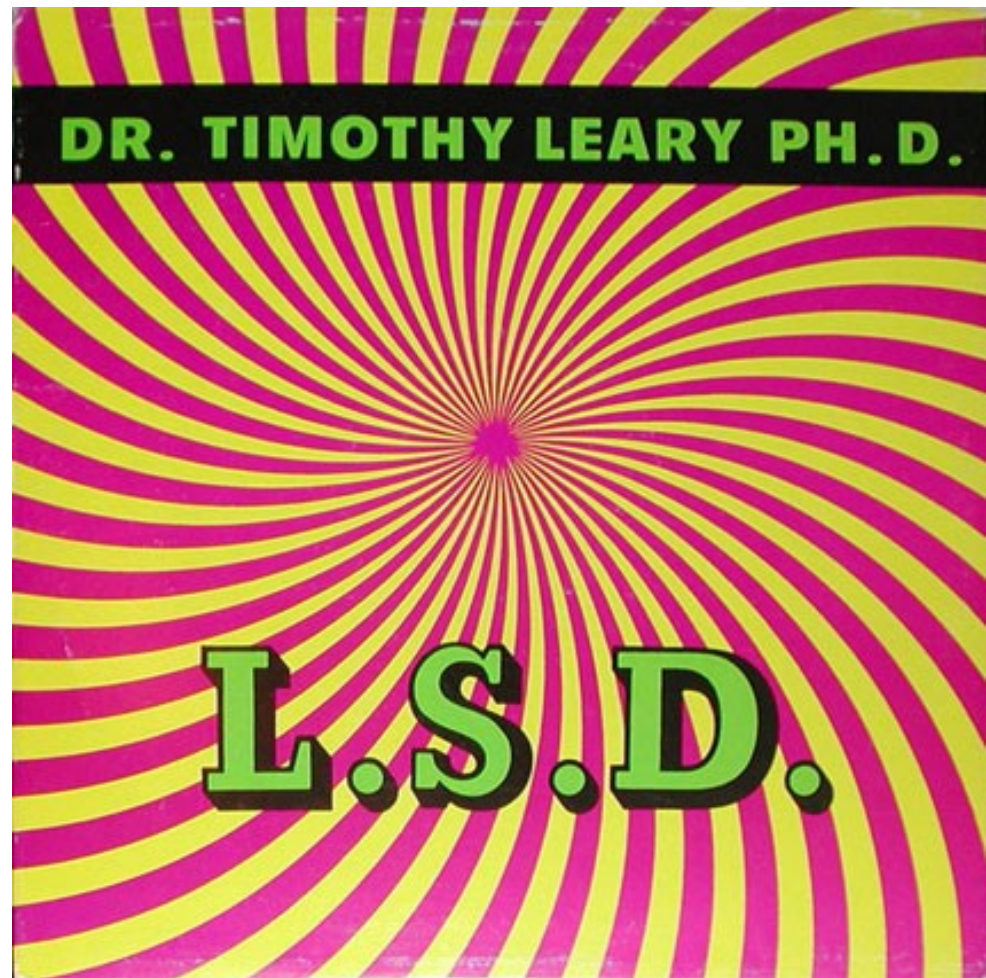
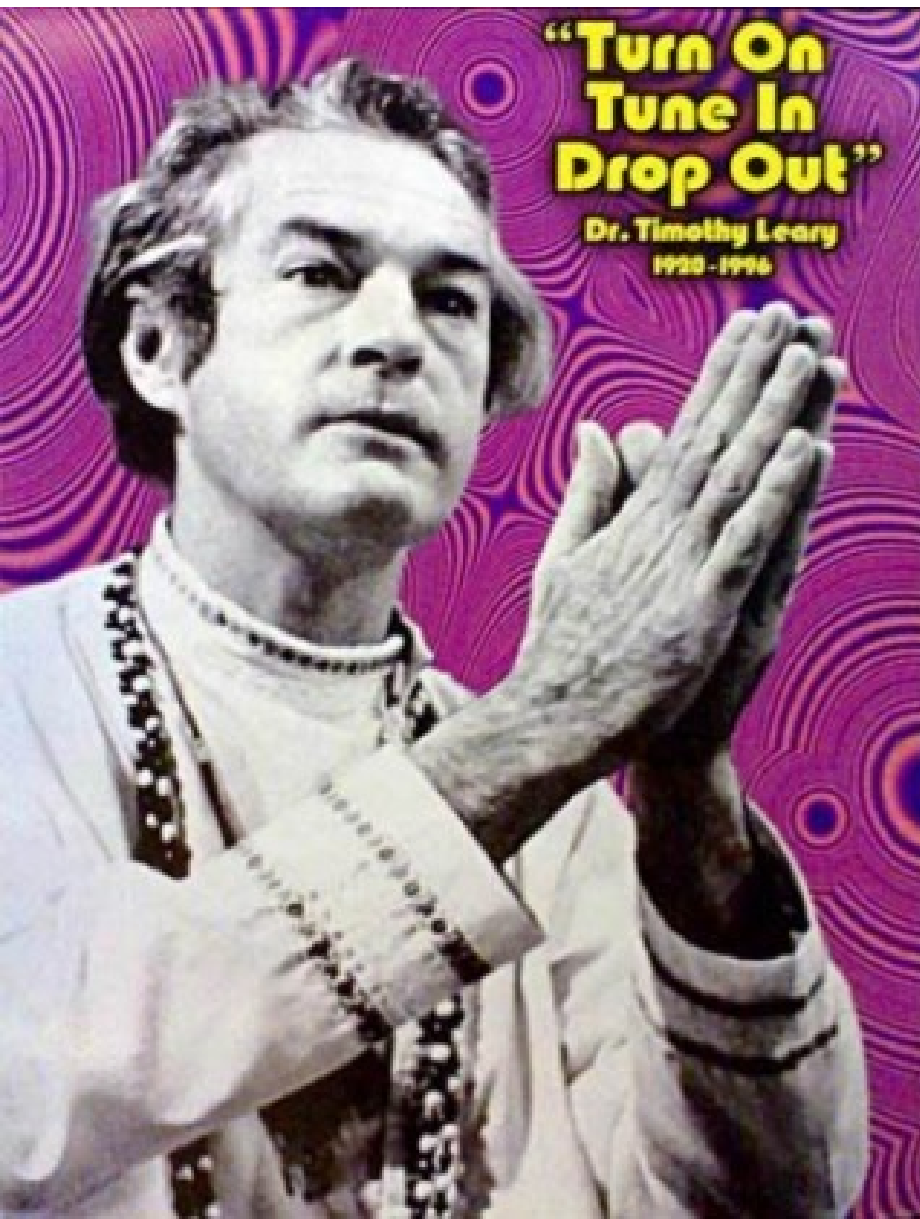
# **RUSSIA PUTS THE FIRST MAN INTO SPACE**

**STAR WEEKLY**

APRIL 29, 1961 **15** CENTS



**LSD:**  
miracle drug  
or menace?



“it would not be proper to remove a drug from medical availability except in the most extraordinary circumstances...we wish to have the advice of the most competent authorities.”

- December 1962, J.W. Monteith, Minister of Health & Welfare. House of Commons.



The Royal College of Physicians  
and Surgeons of Canada



Canadian Psychiatric Association

*Dedicated to quality care*

Association des psychiatres du Canada

*Dévouée aux soins de qualité*



FEATURES



Stephen Ross holding a chalice with a psilocybin capsule.

Downloaded from [www.sciencemag.org](http://www.sciencemag.org) on August 26, 2014

# High hopes

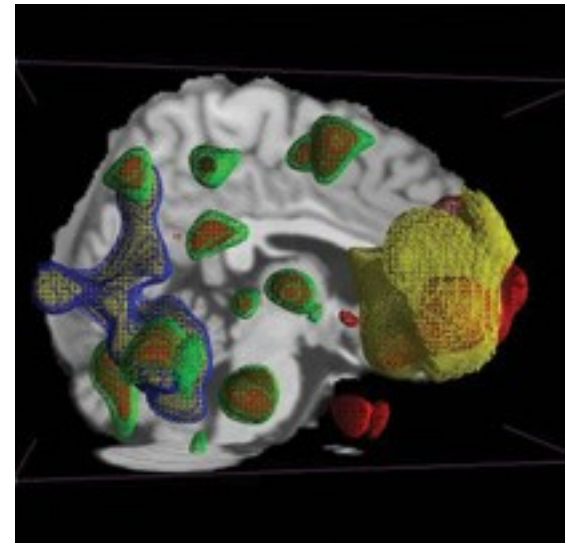
Psychedelic drugs fell from grace in the 1960s. Now, scientists are rediscovering them as potential treatments for a range of illnesses

By Kai Kupferschmidt

PHOTO: BREW GUSTMAN



## JOHNS HOPKINS UNIVERSITY PSILOCYBIN & CANCER



Alexander Shulgin,  
Chemist – MDMA  
“Dr. Ecstasy”

conference • workshops • cruise • dinner • marketplace

*Mind & Medicine*  
**PSYCHEDELIC  
SCIENCE 2013**  
april 18-23, 2013, oakland, california • [psychedelicsscience.org](http://psychedelicsscience.org)

Researchers are finding that psychedelic medicines may heal post-traumatic stress disorder, depression, anxiety, and addiction, and may play an important role in spiritual practice.

Next April, over 70 of the world's leading researchers from more than 12 countries will present recent findings on the benefits and risks of LSD, psilocybin, MDMA, ayahuasca, ibogaine, 2C-B, ketamine, marijuana, and more.

There will be numerous opportunities to network and learn informally from one another. Expect conversations and lectures from a variety of disciplines and cultures in an atmosphere of critical thinking and respect for all ideas.

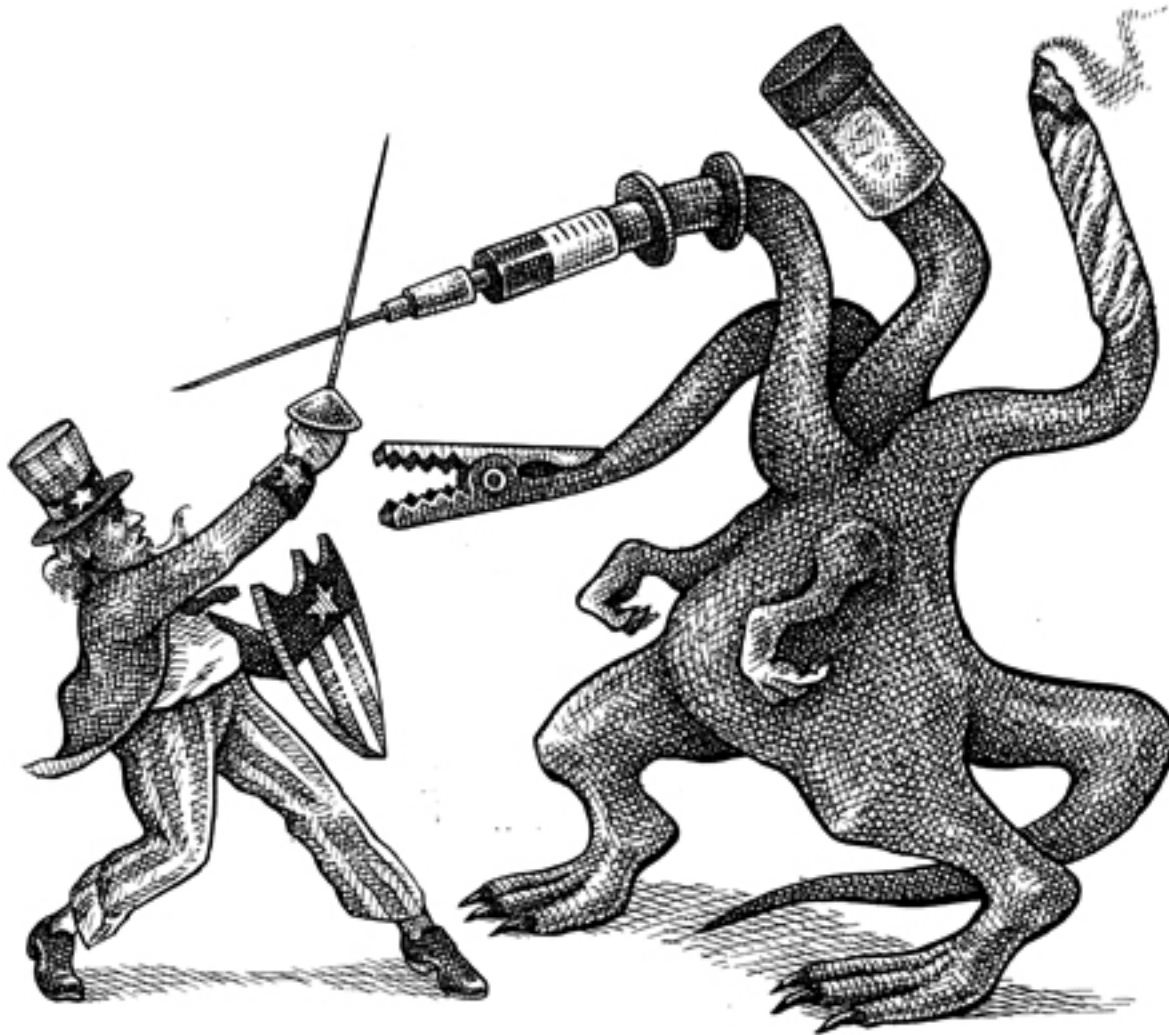
PRESENTED BY  
Beckley Foundation  
Council on Spiritual Practices  
Heffter Research Institute  
Multidisciplinary Association for Psychedelic Studies (MAPS)

Don't wait to buy tickets! Psychedelic Science 2010 sold out.  
Early Bird Discounts End December 21, 2012  
Call 831.429.6362 • [psychedelicsscience.org](http://psychedelicsscience.org)

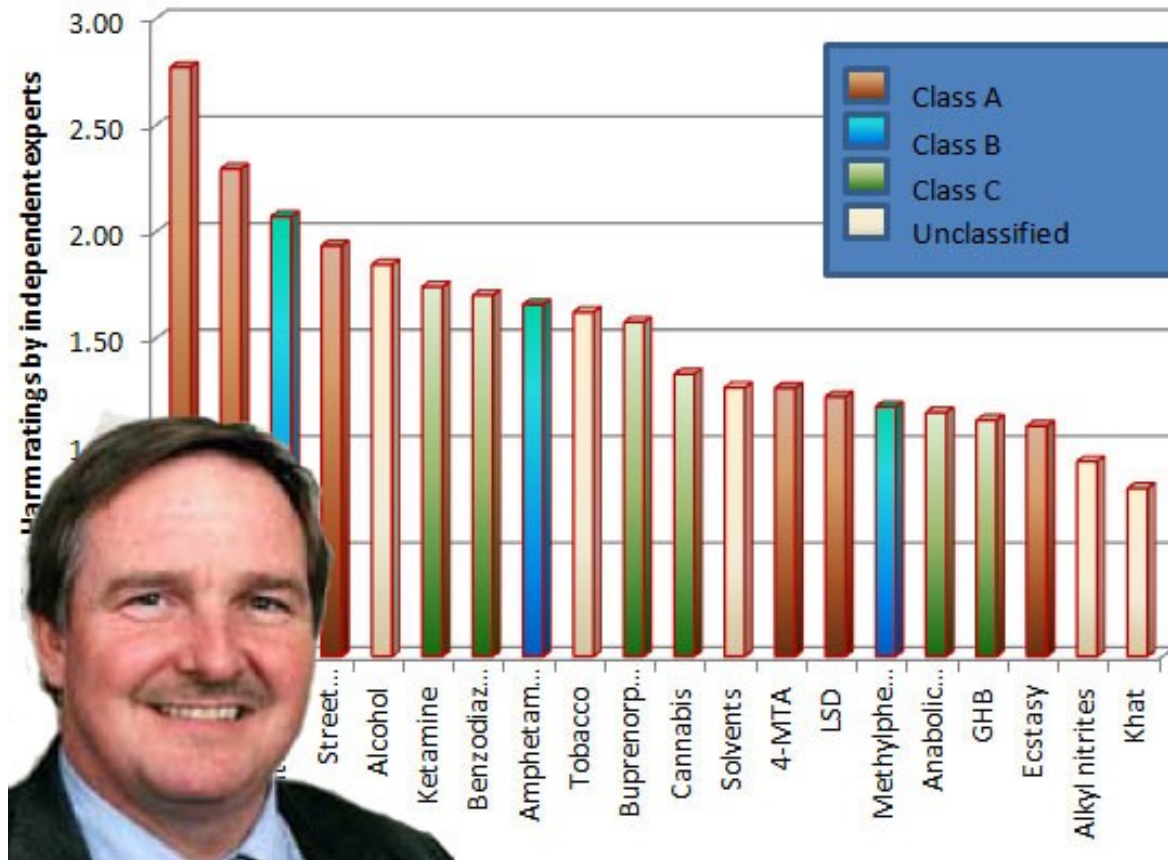
David Nichols  
University of  
North Carolina  
- cancer,  
palliative care



# Just Say Know?



## Ranking of drugs by harm





ANNALS OF MEDICINE FEBRUARY 9, 2015 ISSUE

# THE TRIP TREATMENT

*Research into psychedelics, shut down for decades, is now yielding exciting results.*

By Michael Pollan



On an April Monday in 2010, Patrick Mettes, a fifty-four-year-old television news director being treated for a cancer of the bile ducts, read an article on the front page of the *Times* that would change his death. His diagnosis had come three years earlier, shortly after his wife, Lisa, noticed that the whites of his eyes had turned yellow. By 2010, the



The deepest sin against the  
human mind is to believe  
things without evidence.

— *Aldous Huxley*

