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1. Introduction

Over the past two decades there has been a resurgence in research into the potential utility of psychedelic therapy (PT) [1]. PT is the combination of psychedelic compounds with psychological support. The primary pharmacological target appears to be activation of 5-HT_{2A} receptors particularly in cortical layer 5 pyramidal cells [2]. Psychedelics promote neural plasticity and lead to glutamate release in the medial prefrontal cortex. Preliminary studies have shown that PT may play a role in the treatment of major depressive disorder, treatment-resistant depression and addiction disorder [3-4]. Psychedelics are however contraindicated in psychosis spectrum disorders and mania. Clear communication between researchers, clinicians, service users, and the public is required for the shared scientific understanding of the risks and potential benefits of psychedelic therapy.

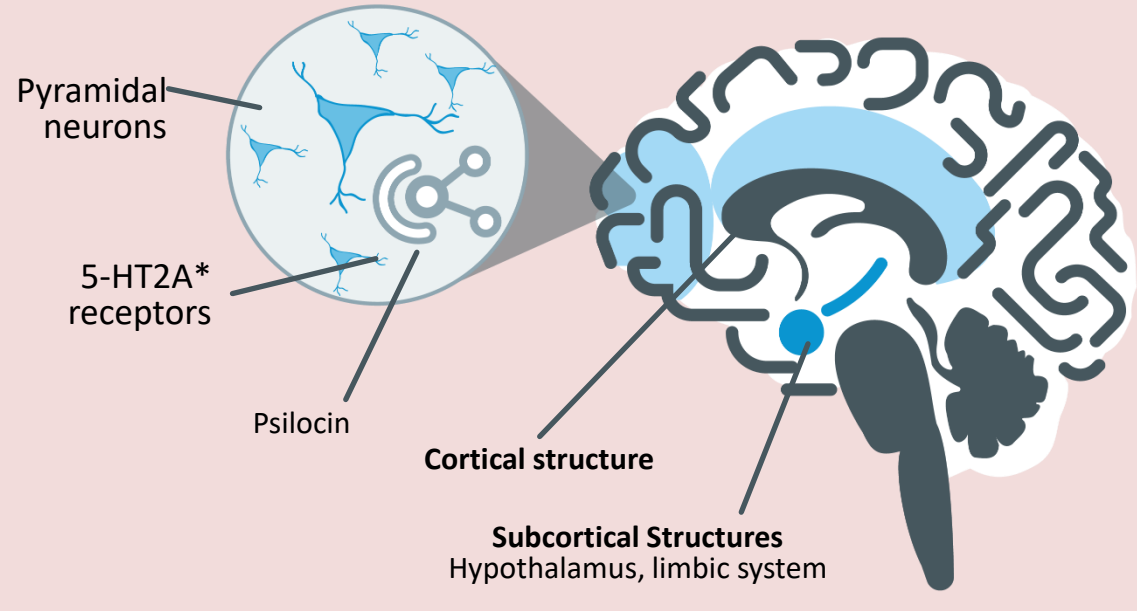


Figure 1: Mechanism of action of Psychedelics

2. Aims

1. Investigating mental health service user knowledge and attitudes to psychedelics and PT
2. Exploring the factors that may influence these attitudes

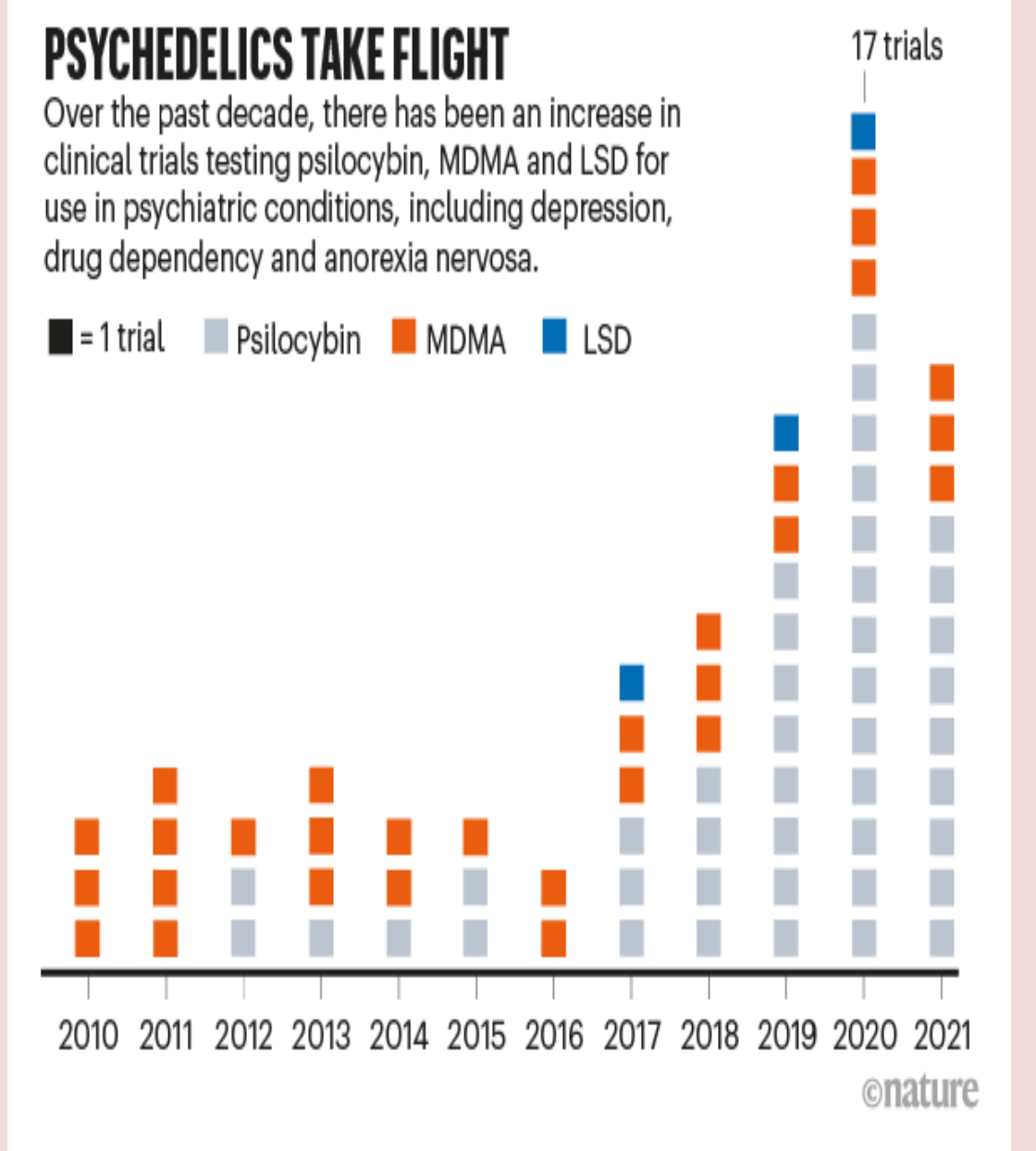


Figure 2: Psychedelic Resurgence

3. Methods

Ethical approval

Tallaght University Hospital/St. James's Hospital Joint Research Ethics Committee and St. Patrick's University Hospital (SPUH) approved this study.

The Survey

Written questionnaire

A Likert scale was utilised to capture attitudes to psychedelics and psilocybin therapy

Recruitment

Participants were recruited from both Tallaght Community Mental Health Service and SPUH.

Data analysis

Two-tailed chi-square tests in SPSS 26 were used to determine statistical significance

SPSS Text Analytics for Surveys V 4.0.1 was used to analyse the free text

4. Sample Characteristics

| Total (n=99) | |
|------------------------|----------------------|
| Age (mean (SD), range) | 41.68 (13.98), 19-73 |
| Sex (% female) | 51.5 |
| Nationality (% Irish) | 92.6 |
| Education (%) | |
| less than 16 | 13.1 |
| junior cert | 15.2 |
| leaving cert | 26.3 |
| some university | 16.2 |
| bachelors | 19.2 |
| postgrad | 10.1 |
| Employment (%) | |
| student | 6.1 |
| unemployed | 31.3 |
| part time | 10.1 |
| full time | 38.4 |
| retired | 14.1 |
| Religion (%) | |
| none | 28.6 |
| Christian | 66.3 |
| other | 5.1 |
| Diagnosis (%) | |
| Depression/Anxiety | 36.4 |
| Bipolar | 12.1 |
| Psychotic disorders | 17.2 |
| Personality disorders | 14.1 |
| Addiction | 19.2 |
| Eating disorders | 1.0 |

5. Results

Total Sample Attitudes

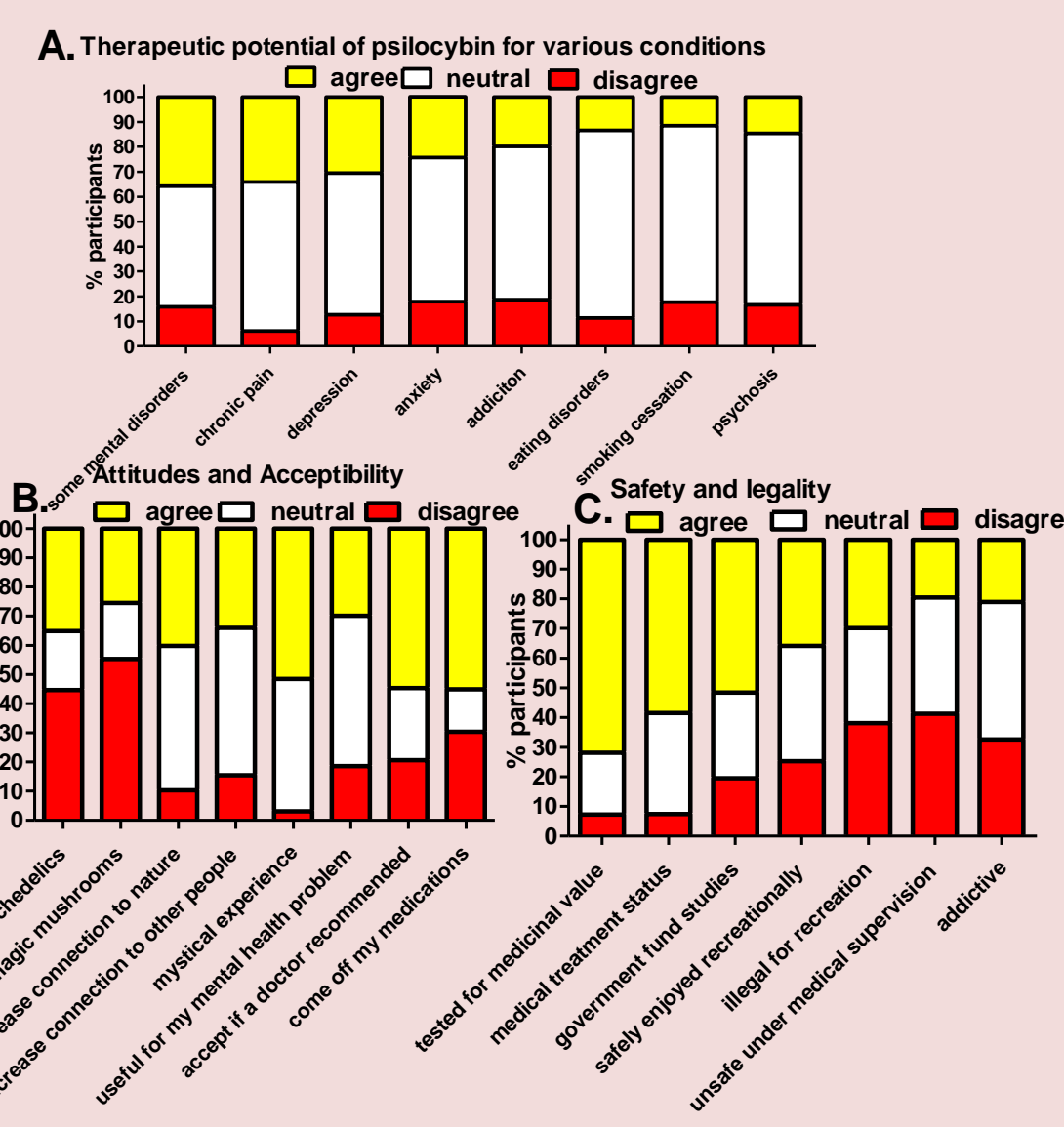


Figure 3: 72% supported further research 27% previously used recreational psilocybin with a male preponderance 55% would accept as a treatment if doctor recommended, 20% would not.

Previous Substance Use by Sex

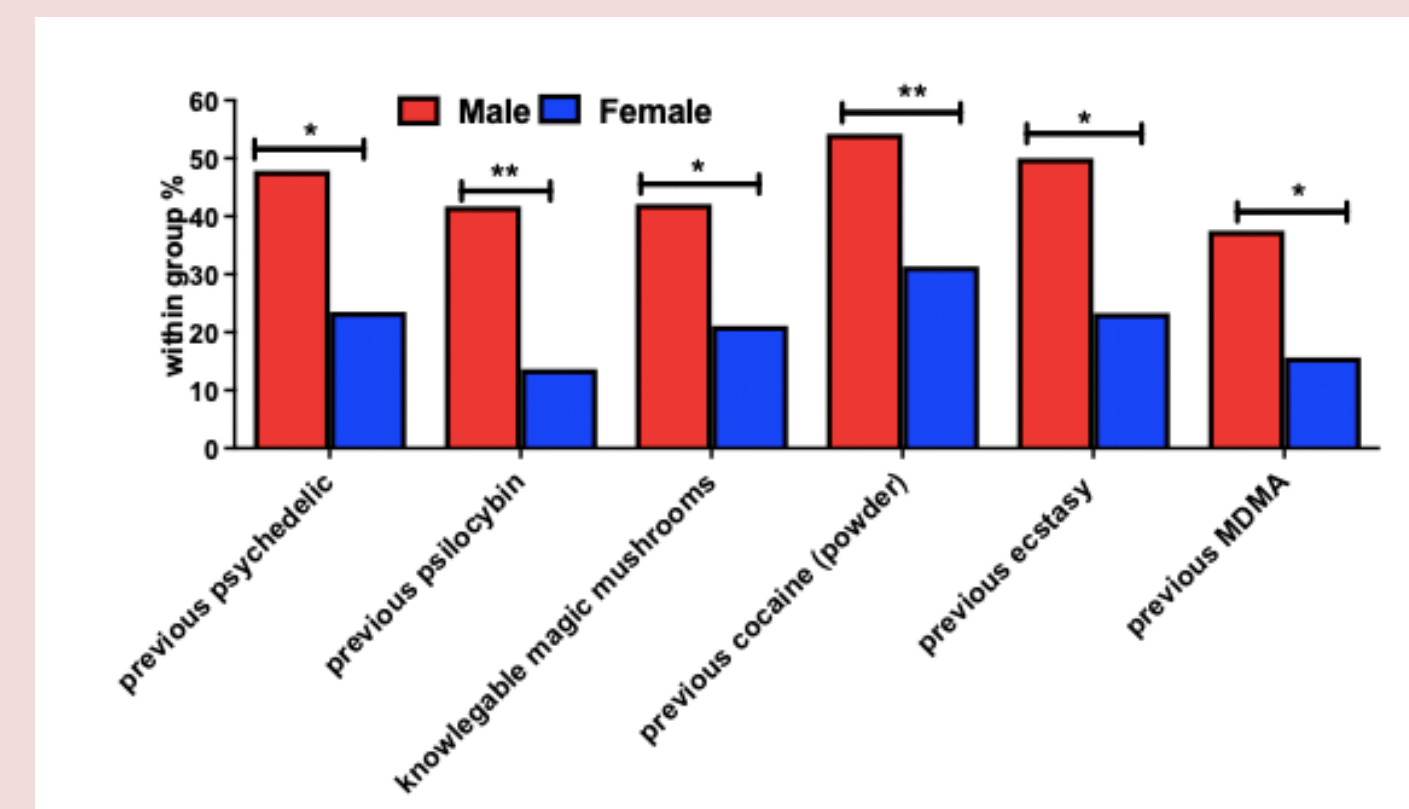


Figure 4: Males self-reported higher lifetime use of psychedelics (p = 0.01) and magic mushrooms (p = 0.002) compared to females.

Influence of previous psychedelic use on attitudes

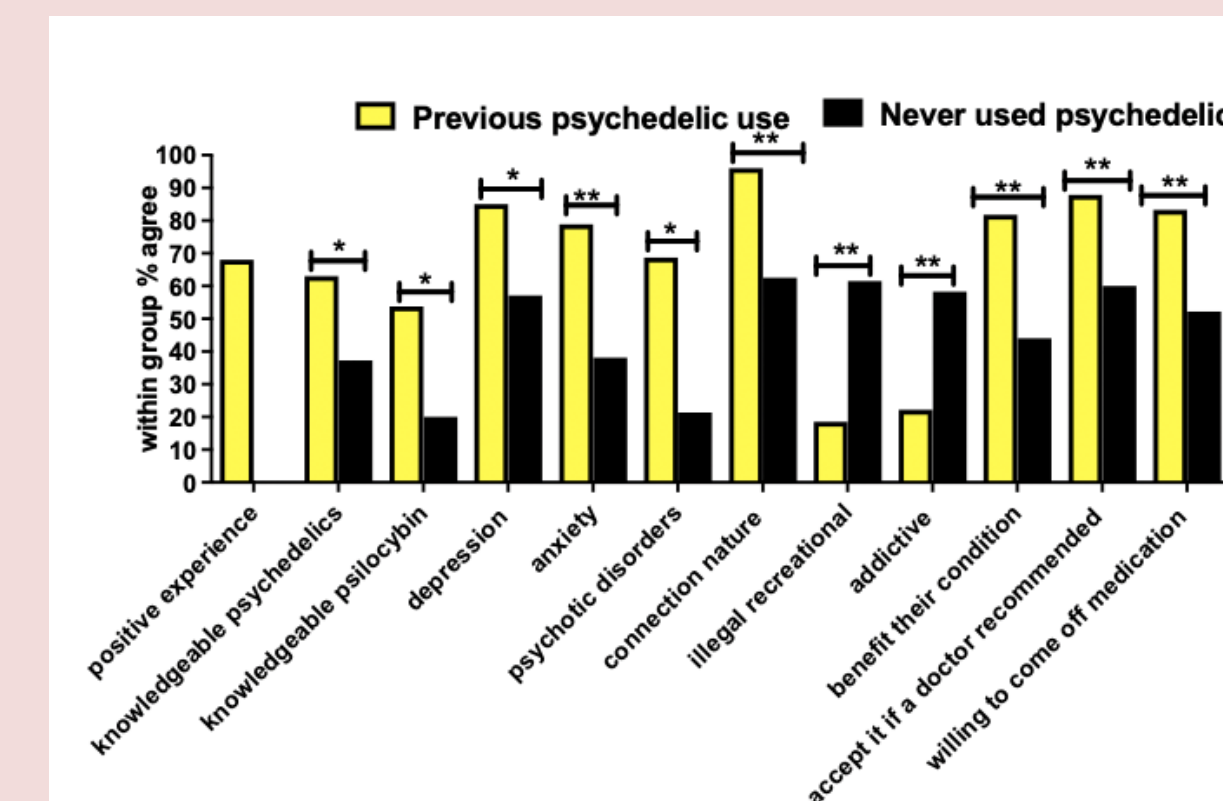


Figure 5: Participants that had previously used psychedelics were more likely to self-report being knowledgeable about psychedelics (p = 0.01) and magic mushrooms (p = 0.003) agree that psilocybin could be a therapeutic tool for depression (p = 0.050), anxiety (p = 0.009), and psychotic disorders (p = 0.01) and would benefit their own mental health condition (p = 0.008). They were more like to accept psilocybin if a doctor recommended it (p = 0.008) and to come off medications (p = 0.006).

Influence of age on attitudes

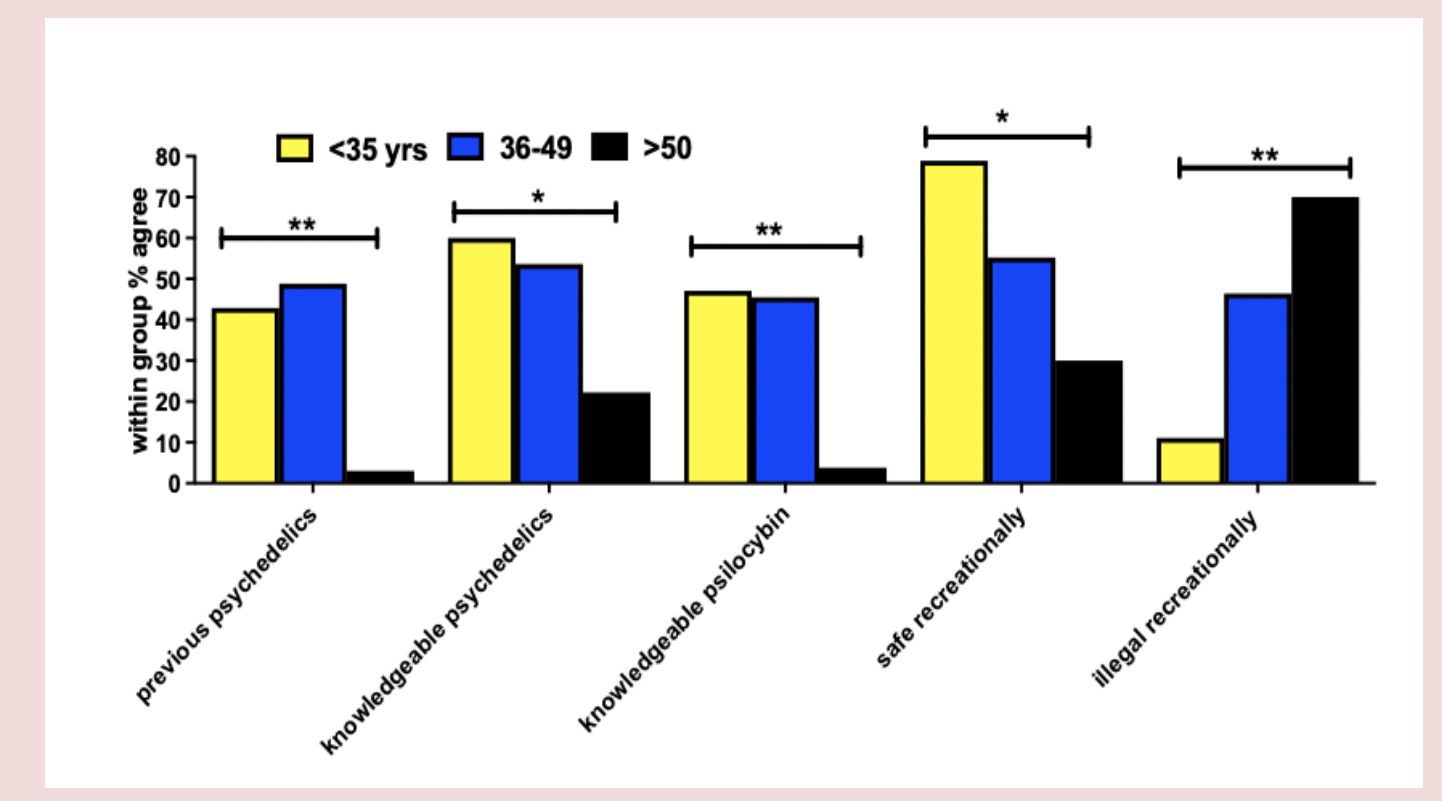


Figure 6: The younger age groups reported higher levels of previous psychedelic use, felt they were more knowledgeable about psychedelics and had what might be considered as more liberal views - more likely to view psilocybin safe for recreational use (p = 0.034), and the youngest age group was less likely to agree that psilocybin should be illegal (p = 0.001)

Influence of Diagnosis on Attitudes

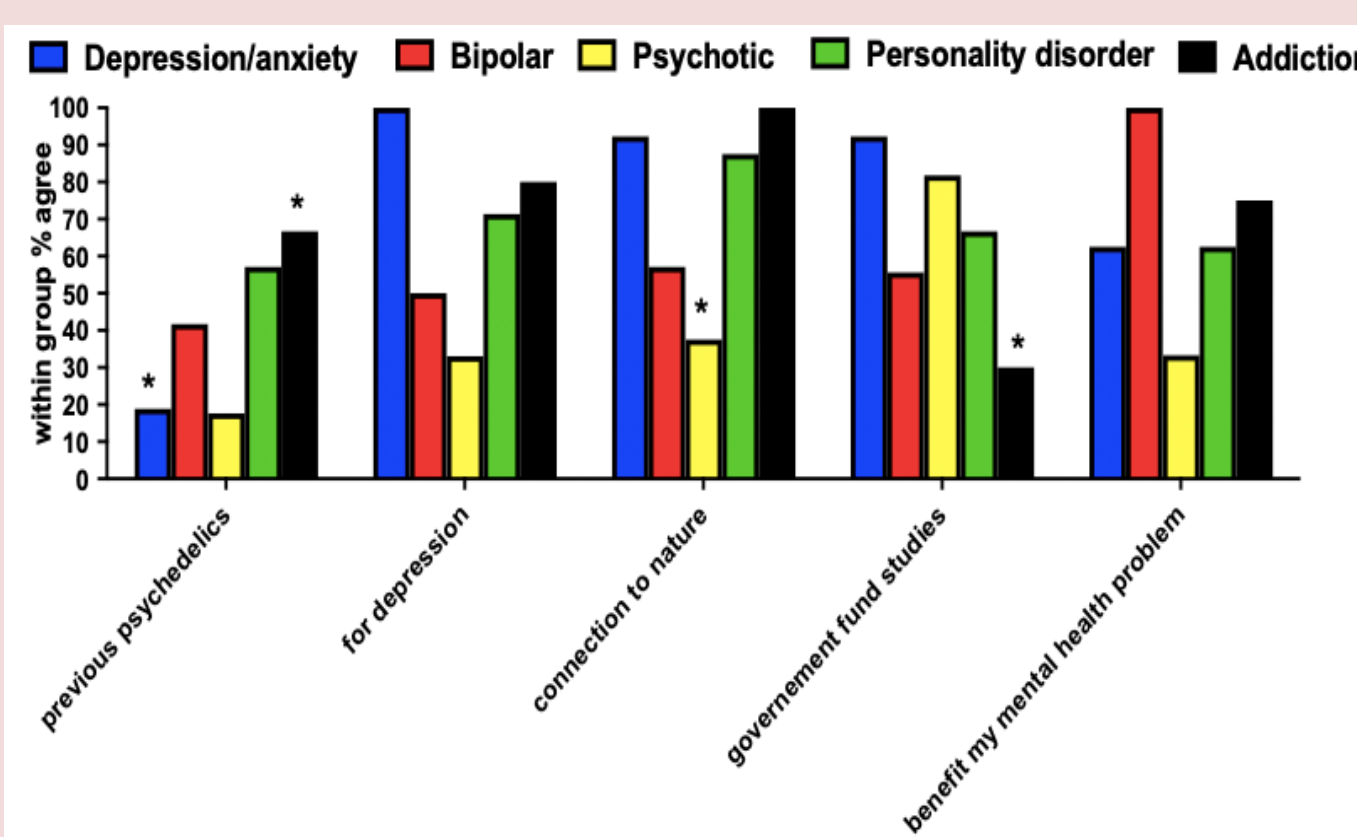


Figure 7: Fewer people with depression/anxiety previously used psychedelics (p = 0.03) yet were more likely to agree that the government should fund studies (p = 0.02). More people with addiction disorders previously used psychedelics (p = 0.01), and this group was less likely to agree that the government should fund studies (p = 0.01). Participants with psychotic disorders disagreed that psychedelics increase connection to nature (p = 0.01).

Concerns about discontinuing medication to accept psilocybin therapy

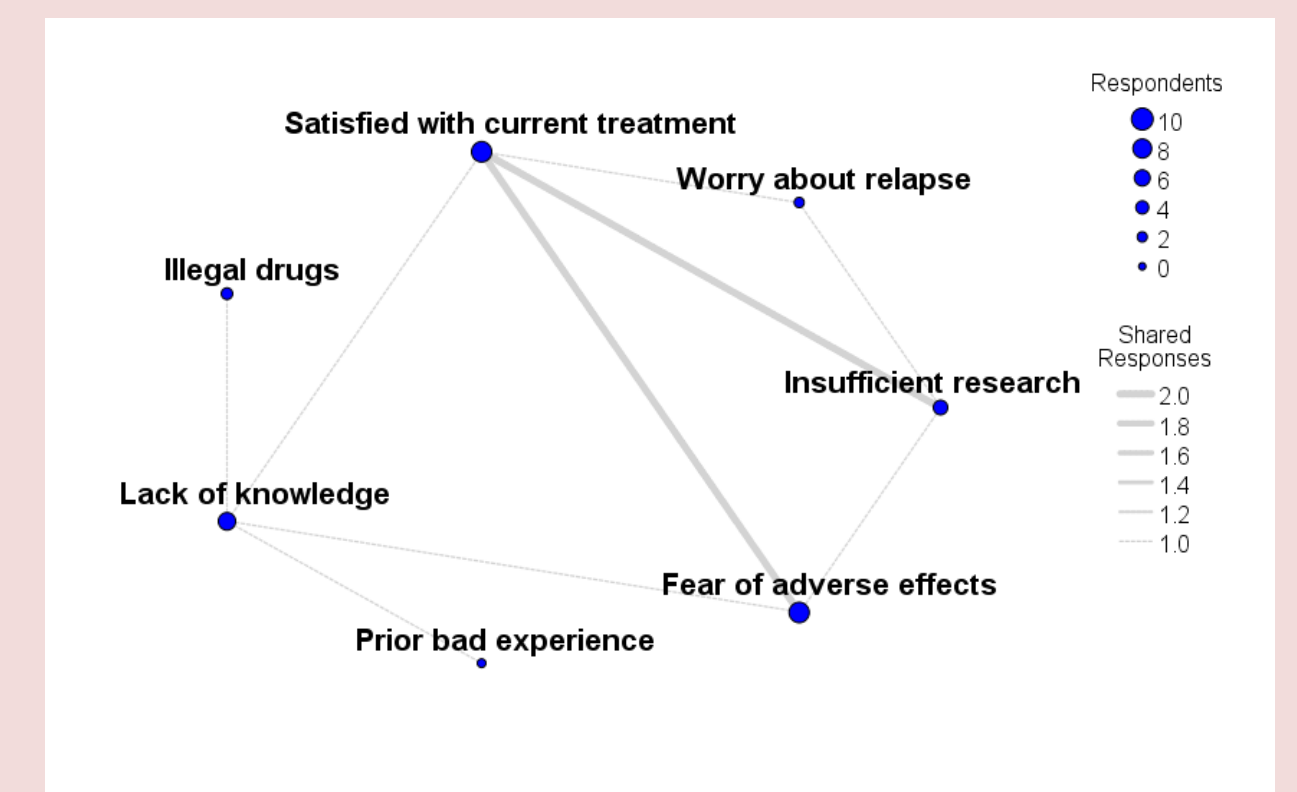


Figure 8: The most frequent answer cited was a fear of adverse effects (n = 10). Other reasons cited were satisfaction with their current treatment regime (n = 9), lack of knowledge (n = 7), insufficient available research (n = 5), illegal status of psychedelics (n = 3), worries about relapse of mental illness (n = 2), prior history of addiction (n = 1), and prior negative experience (n = 1).

6. Conclusions

- Psychedelic science is evolving rapidly and large scale trials will soon determine if this translates into the psychiatric clinic.
- The majority of service users supported further research into psilocybin therapy.
- Younger people, those with previous psychedelic experience, and those with non-religious beliefs were more likely to have favourable attitudes towards psilocybin therapy.

Limitations

- Our study had a high level of Do not know/Neutral responses.
- This survey relied on self-reported drug history.
- The large number of Chi square tests was not corrected for multiple comparisons.
- Our diagnoses data did not differentiate BPAD I from II, nor phase of current episode.
- Small sample size.

References

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