International Drug Policy Study: Trends in the use of psychedelic and dissociative substances with a focuson psilocybin, LSD, MDMA and ketamine

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Introduction: There is renewed interest in the therapeutic applications of psychedelic substances. Australia was the first country to permit authorised psychiatrist-prescribed psilocybin and 3,4-methylenedioxymethamphetamine (MDMA) from 1 July 2023. Canada permits use via a Special Access Program and the United States Food and Drug Administration has permitted use in clinical trial settings since 2017 as "breakthrough therapies". In several other countries, therapeutic applications of psychedelics are being explored by researchers, including clinical trials. This study aims to assess the difference in levels and purpose of use of psychedelic substances, MDMA and ketamine across countries with different policy approaches.

Methods: Data are from the 2023 International Cannabis Policy Study (ICPS). This is a national sample of the population aged 16-65 years from Canada (n = 19,964), the United States (n = 39,653), Australia (n = 3042) and New Zealand (n = 2676). The survey examined the prevalence of past month, year and lifetime use for psychedelic drugs, including use for therapeutic reasons, and asked about perceived benefits.

Results: Despite jurisdictional policy variance, across the four countries 19.3% of respondents reported lifetime use and 6.5% of respondents reportedusing a psychedelic substance (psilocybin and lysergic acid diethylamide [LSD]), ketamine or MDMA in the past 12 months. Self-reported mental health conditions were common in our sample but a smaller proportion reported a mental health diagnosis. Exclusive medical use of a psychedelic was less frequently reported in past year users (14.2% of those who reported any psychedelic use). Most North American participants using psychedelics for therapeutic purposes reported their medical conditions were "a little to a lot better" by taking them. Over half of all Australian and New Zealand respondents who reported psychedelic use for medical reasons had asked their medical provider about psychedelics for medical use. Around half of the Australian sample who asked about prescription reported that the medical provider had refused a prescription for psilocybin, MDMA or ketamine. Adverse or negative health effects were least likely to be reported for psilocybin by North American respondents.

Conclusions: Rates of nonmedical use are similar regardless of regulation and exclusive medical use was uncommon. Respondents reported some benefits from their psychedelic use. Given changing international policies, it will be important to continue tracking how psychedelics are used by individuals for medical and non-medical purposes.

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