Interoceptive Insights: A New Model for Psychedelic Therapy in Addiction Recovery

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Introduction
Addiction can be understood in part as a disorder of interoception—the sensing and interpretation of internal bodily signals. Signals such as cravings are misinterpreted as survival-relevant, driving behaviour that conflicts with long-term health and goals. This produces a misalignment between bodily signals, conscious awareness, and decision-making.

Psychedelic therapies have shown promising results across multiple substance use disorders. While proposed mechanisms emphasize mystical experience or psychological insight, these accounts do not fully explain how such insights translate into behavioural change. Across studies, participants consistently report increased awareness of the harms of substance use, reduced identification with the "addict self," and a shift in the perceived salience of craving.

Approach
This presentation proposes that psychedelic therapy acts in part by temporarily resetting interoceptive processing. During the acute experience, altered precision and salience of bodily signals may allow individuals to more accurately interpret craving, emotional distress, and physiological dysregulation. Outcomes include reduced alexithymia, improved differentiation of internal states, and more accurate appraisal of bodily harm.

On this model, reported psychological insights are grounded in changes to embodied cognition. These effects may be stabilized through a post-acute window of increased neuroplasticity.

Conclusion
Clinically, this framework suggests that targeting interoceptive awareness—through therapeutic prompts, integration therapy, mindfulness training, and somatic interventions—may enhance and prolong treatment effects. It generates testable predictions, including improved interoceptive awareness, reduced alexithymia, earlier detection of craving states, and reduced relapse risk.

Implications on communities, practice, policy and/or First Nations communities
The framework supports further empirical investigation into interoceptive mechanisms in addiction. It provides a rationale for developing outcome measures focused on interoceptive function and for preparing clinical frameworks that could be applied if and when regulatory conditions evolve.

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