

Good afternoon. My name is [C.J. Spotswood](#) and I have practiced as a mental health nurse for over 20 yrs. I am currently a psychiatric nurse practitioner practicing in Winthrop, specializing in

For almost five years I have researched, written, and presented both nationally and internationally on psychedelic medicine including,

- Presenting at the American Psychiatric Nurses Association's national conference twice
- Teaching 2 master classes for Psychedelics Today's "Navigating Psychedelics for Clinicians and Therapists" program - one, "Exploring Psilocybin" throughout which, I cover the management of adverse reactions from psilocybin use.
- I co-authored Psychedelic.Support's 9hr Psilocybin Module for healthcare professionals; and,
- I am the author of "The Microdosing Guidebook", a handbook due to be released next month for patients and medical professionals looking to learn more about microdosing psychedelic medicines including psilocybin.

While many may consider psychedelic-assisted therapy to be a relatively new idea, it is not. During the 1950s and 60s. Psychedelics were used by more than 40,000 patients, several books were published, 6 international conferences were held, and over 1,000 clinical papers were published on the topic. This all occurred prior to the 1970 passage of Nixon's Controlled Substance Act, which effectively halted all psychedelic research and started the costly and ineffective war on drugs. Further, it has restricted access to a natural substance that has the ability to impart positive change upon suffering individuals.

In no way am I claiming that psilocybin is a panacea for all of Maine's problems; however, I am strongly in support of Maine's Psilocybin Care Act and encourage its passage for a multitude of reasons.

Unfortunately, the most widespread current approach regarding the treatment of mental illness is merely an attempt to mitigate suffering, while not actually "curing" anything. These conventional approaches often include antidepressant medications. While antidepressants often have their place in treatment of mental illness, there are downfalls to reliance upon them as a cure, including the fact that it often takes a long time before effects are seen (if they are seen at all). Further, patients often experience unpleasant or intolerable side effects, leaving many questioning if the treatment is even worth the effort.

Those who do find relief are in the minority - approximately only 30% of individuals with major depression find relief from symptoms as a result of conventional medications. The tragic reality is, these limited treatment options leave too many to continue suffering and too many end up choosing to end their lives.

There are many studies that have been conducted evaluating psilocybin therapies, but to date there has only been one head-to-head clinical trial that compares psilocybin therapy to a common Selective Serotonin Reuptake Inhibitor (SSRI) medication, escitalopram. This was published last year in the NEJM. The authors concluded that the results are comparable, but when reading the results I feel psilocybin recipients had significantly greater positive effects than escitalopram:

- 70% found improvements with psilocybin compared to 48% with escitalopram
- 57% of psilocybin users saw improvements in their depression 6 weeks later (compared to 28% in escitalopram).

These rapid improvements can mean the difference between life and death for many who battle crippling depression and consider suicide as their only option to relieve their suffering. I see individuals fighting this battle on a daily basis and understand the massive impact that improvements in treatment options like this can have for the long-term prospects of health and well-being, and quite frankly between the choice to end a life or continue fighting to live a happy and fruitful life.

Those receiving psilocybin also reported improvements in the following categories, all of which are linked to positive mental health and emotional responses including:

- Ability to cry
- Feeling compassion
- Feeling emotions
- Feeling pleasure
- Experiencing less drowsiness
- Feeling not just “less depressed, but feeling actual emotions”

Further, the “side effects” of psilocybin were reported to be much more tolerable than the following common side effects of SSRI which many report to be the reason that they stop taking their antidepressants:

- Increased anxiety
- Dry mouth
- Sexual side effects
- Blunted emotional responses

Not only is psilocybin better tolerated, it is also medically quite safe. In fact, a 2016 Global Drug Survey found that psilocybin was reported to be the safest recreational drug found; safer than alcohol, tobacco and all illicit drugs. Your vote for passage of this bill would help to provide the opportunity for individuals to obtain life-changing treatment in a safe setting while minimizing untoward effects.

The safety of psilocybin is well-documented. A survey of all studies exploring psilocybin as a medicine shows that there have not been any life threatening or severe adverse reactions reported from psilocybin use in a clinical setting.

Further, this bill includes safety guardrails - LD 1582's screening process should restrict those who may medically or psychiatrically not benefit from psilocybin treatments.

While many may view psilocybin as a niche or offbeat treatment, there is significant support within the medical community. In a November survey of physicians, the following results were found:

- 66% of doctors surveyed believe that psilocybin therapy has the potential to benefit patients with treatment resistant depression
- 50% would prescribe psilocybin therapy if it was approved
- The greatest potential advantages to psilocybin treatment are believed to be:
  - Improved efficacy in treatment-resistant conditions
  - Rapid onset of action
  - Different mechanism of action from existing therapies

Failure to pass this legislation would cause Maine to fall behind other locations that are currently attempting to improve access to psychedelic therapies. Significant efforts are already underway, including the following:

- The global initiative to reschedule psilocybin internationally
- Canada's Special Access Program, which eases restrictions and allows access to psychedelic therapies
- Mass General is actively setting up one of the world's foremost treatment centers for the use of psychedelics, including psilocybin. We shouldn't continue to fall behind the rest of the US and restrict access to these treatments to Maine residents. Not only will this lead people to seek treatment in Massachusetts, but it also has the potential to drive people to underground facilitators, where quality and safety is impossible to regulate or discern.

Bills to decriminalize psychedelics have been introduced in 11 states in addition to the 4 states and 11 cities that have already enacted decriminalization legislation. In California, Senator Wiener's legislation to decriminalize possession of psychedelics passed the Senate last year and passed through all of the necessary Assembly committees. Advocates are now pushing for a vote on the bill in the Assembly. Texas has convened a workgroup tasked with exploring treatment and has provided the group with a \$1.4 million budget for trials using psilocybin to treat PTSD in vets. Pennsylvania has since followed suit with their legislation. Connecticut previously convened a workgroup to explore use of psilocybin. The results were due Jan 1st of this year but have not yet been made public.

In closing, it is my professional and personal opinion that the Maine legislature has a significant opportunity to make our great state a leader in the treatment of mental illness.

With many states actively exploring options and sponsoring workgroups tasked with researching the use of psilocybin, we have a unique opportunity in Maine to follow suit and to become a leader in allowing for the use of a safe and effective, natural healing substance that has been used for millennia. Mainers are known for our forward and free thinking and it is incumbent upon you as a legislative body to allow us to join this social experiment allowing individuals to pursue their personal liberties in making healthcare decisions.

I offer myself as a resource to you as you consider this matter and look forward to continued discussions. Thank you.