

Senator Claxton, Representative Meyer, and dedicated members of the Committee on Health and Human Services. My name is Steffany Tribou, and I am from Owls Head.

I am writing to you in favor of LD 1582. I read through the proposed language as well as the recent story published in the Portland Press Herald on January 30th drawing attention to this bill. I am in favor because this bill starts a process of not only legalizing the use of psilocybin for medical purposes but also *destigmatizing* its use through future treatments of mental illnesses. While some argue that this step is premature since a large breadth of documented research on its effectiveness and use are not available yet, particularly for its use for bipolar depression, this bill will allow Maine to be better poised as the research develops and in addition, potentially allow our medical professionals and medical students an opportunity to undertake important cutting-edge studies in the use of psilocybin for treatment. It is important to recognize that few treatments are risk free, and I would argue that current tools available to treat major depression and bipolar depression are higher risk than psilocybin as I'll further explain. The more the medical field is afforded research opportunities with this drug, the greater the potential for breakthrough findings and treatments.

There are great voids in the treatment of some mental illnesses, and current "gold standard" treatments are far from sufficient for many who suffer with life-long illnesses that greatly affect the quality of life. Imagine a loved one with bipolar disorder. While there are some proven mood stabilizers available as treatment, a frustrating hallmark of bipolar disorder is that the loved one stops the use of medications, particularly when the individual begins to feel well. It is still unclear to medical professionals exactly what initiates a swing in moods for someone suffering from bipolar, but as soon as a loved one starts on the path of bipolar depression, there are few tools available that make a difference. Bipolar depression can be so stubborn that even high doses of name brand pharmaceuticals cannot dislodge feelings of absolute despair. Even for those with some level of success, it can take months for the drug to build up in one's system over time in order to even begin reaping its benefits, and many such pharmaceuticals can exacerbate suicidal thoughts and feelings.

It is a helpless moment for families when they have to make a decision about how to help a loved one when there are limited tools available. One tool is to stick with the pharmaceuticals prescribed, hope they work, and just wait for time to pass, praying each day that your loved one will hold on long enough. Imagine this daily for months on end. Keep in mind too that there can be a cost to any benefits from the use of currently available pharmaceuticals in the treatment of bipolar and/or depression even if they are successful. For instance, while they may dull the feelings of despair with time, they can also dull the feelings of joy, which is what a patient is truly longing for in recovery.

Another tool, which is perhaps even more frustrating than the first, is to admit the suffering loved one to a hospital. Hospitals are often not equipped with the tools or time to treat these individuals and can

only keep them safe for a few days in many instances before releasing them to again deal with the despair on their own, and that's if there is even a bed available. I read testimony on your hearing for tomorrow as well for LD 1792, An Act to Support Employees of the Riverview Psychiatric Center. While I am not commenting specifically on that bill, I think the conditions expressed by employees in some of that testimony certainly helps to paint the broader picture in which our bipolar patient fits and of which we are already seeing a strain on current employees to treat a growing number of individuals experiencing mental health challenges only exacerbated by the current pandemic. Therefore, it is not uncommon for families to avoid seeking an overly strained hospital or facility that is unlikely to yield impactful results due to the nature of the illness if the family is fortunate enough to have a support system in place to attempt to help the loved one maintain basic function of daily life.

A final tool is to desperately research and experiment. As you may have seen by some of the stories in the Portland Press Herald, there are already individuals in Maine who are experimenting with psilocybin, which poses much higher legal ramifications than the medical risks associated with its use. Even riskier is obtaining the materials, but again, this is a risk that Mainers and others across the country are already taking as a result of the ineffectiveness of the first two tools. This drug is giving desperate families hope. Most recently, the University of California San Francisco's Translational Psychedelic Research Program (TrPR) under the direction of Dr. Josh Woolley put out a nation-wide survey asking about the use of psilocybin, receiving hundreds of similar results and stories as the ones you may have read in the Portland Press Herald. They are one of the first programs to do a formal study of psilocybin use among adults with bipolar affective disorder. That study should yield published results in early 2022. Let's ensure Maine is poised to begin taking advantage of these medical advances that will benefit our residents so that families do not need to make guesses in the dark or face legal consequences for the ethical conundrum of trying to save a life by breaking a law.

I want to add here that I disagree with the counterargument of this bill calling this approach "medicine by politics." Suffering families need options, and it is lawmakers such as yourselves who can help eliminate barriers that may be costing some families the ultimate price. Psilocybin has the potential to provide immediate, impactful, and long-term results to suffering loved ones.

Please ensure that there is a framework that lays the necessary foundation to provide more options for those suffering from mental illnesses as well as their families. For this reason, I strongly urge the Committee to vote unanimously ought to pass.