

# LSD Overview

## Benefits

Here is a bullet point list of therapeutic effects that have been explored

- Improvement in mood disorders and depression.
- Enhanced emotional empathy.
- Relief of anxiety and pain
- Recovery from drug & alcohol dependency
- Treatment of last resort for cluster headaches and migraines
- Boosted creativity
- Improve the negative effects of autism
- Ability to catalyze spiritual or mystical experiences and facilitate feelings of interconnection
- Ego enhancement or dissolution
- A lessening of unconscious regressive fixations

## History/Background

LSD is a synthetic derivative of a compound produced by a grain fungus called ergot.

Dr. Albert Hofmann of Basel, Switzerland, first discovered LSD and its effects in 1943. LSD quickly became recognized for its possible therapeutic uses. Hofmann later on in life noted the similarities between psilocybin and LSD, suggesting it may have use in a more sacred context.

The first phase of the drug's history lasted until the early 1960s. During this period it was supplied to medical researchers in Europe and America as an investigatory drug. The idea of a family of hallucinogenic, psychotomimetic or psychedelic drugs was conceived. Throughout the 1950s and early 1960s psychedelic drugs, mainly LSD and mescaline, were rather freely available to physicians and psychiatrists in Europe and the United States.

The prohibitionist era that we are only now starting to come out of has set back the field of psychedelic therapy for decades. In many places LSD is outlawed & categorized as a controlled substance but this is now changing as highly controlled human studies have been permitted for their potential use in medical and psychiatric settings at leading institutions. There is now great interest in the therapeutic uses of LSD for various disorders.

## **How To/Dosing**

One of the most important guidelines is to space out experiences at least 3 days apart and preferably more. This is because tolerance shows up quickly and strongly but also dissipates quite reliably.

A typical LSD microdose would be in the range of 8-20 micrograms

A standard tab of acid contains between 60 and 100 micrograms each depending on the purity and potency. Acid will degrade if stored incorrectly or for long periods of time.

In general, a microdose is about 1/8th of a tab — so the easiest way to prepare microdoses is to cut a single tab into 8 pieces.

It's good to consider timing: Setting a Microdosing Schedule

Microdosing works best when done consistently over several weeks or months. When first starting out, there are three aspects of timing to consider:

- What time of the day should you take your dose?

You may want to avoid microdoses late at night in order to make the most of the day for example.

- How many days should you microdose per week?

Example- Dr. Fadiman Standard Schedule — Dose on day 1, no dose day 2 & 3, repeat

- How long should you continue to microdose?

There is no hard and fast rule here as they will be unique to your situation. Journaling and goal-setting can be helpful guideposts to help you along.

## **General Effects**

Dilated pupils are perhaps the most common effect.

LSD, like other psychedelics, is known for profound changes in consciousness and perception. The effects last approximately 6-12 hours, with peak effects occurring 3-5 hours after consuming. These effects include sensory enhancement, change in the perception of time, objects (real or imaginary) that appear to be moving (flowing

patterns and shapes, usually with higher doses), improved mood, unusual thoughts and speech, personal insight and reflection, dream-like states, alertness, heightened emotional responses, ego dissolution, and excited mood. While some people become more focused, others will find it more difficult to focus.

Individual reactions can be attributed to set and setting. Set (or “mindset”) refers to the psychological state and experience of the person taking the drug. Setting is the external circumstances they’re in, the people around them and their environmental surroundings. Because set and setting vary so widely from person to person, and even from experience to experience, each LSD experience can produce vastly different outcomes, from frightening to deeply meaningful and positive life-changing experiences.

Personality plays a role in this unique expression. Sometimes prudish people may lose inhibitions and become more sexual. Extremely submissive people can become aggressive. There are a myriad of possibilities but overall a vast majority of people are able to find benefits if they have prepared themselves appropriately.

The personality of the therapist (if using one) is another factor to consider in terms of assisted psychotherapy.

## **Contraindications/Interactions**

One of the few physical risks that can occur are seizures, therefore epileptics would risk having severe episodes. Those who are in fragile and unstable states of mind, who are extremely nervous and/or depressed, including those on prescription drugs should not be taking LSD. Those who are prone to paranoia and trust issues should be very cautious. LSD is contraindicated in people with a family history of schizophrenia or early-onset health problems, those prone to seizures, in developing children, and in pregnant & lactating women.

Repressed emotions can sometimes come to the surface and be challenging to deal with.

LSD is not a magic bullet for resolving all of your deep seated trauma and negative patterns. It is however a tool that can be wisely used to make significant breakthroughs in personal development, and can lower inhibition towards getting towards the root of certain spiritual or emotional problems.

The war on drugs mindset and the associated propaganda campaigns would sometimes point towards irreversible brain damage or psychosis being common, but these hyperbolic statements have been more based in fear and agendas of control rather than real science.

**Note:** Obsessive compulsive neurotic psychiatric patients have been shown to have extremely high resistance to this substance. They would be contraindicated in most cases anyways. It's also worth noting that people who have their mind set on resisting the effects often do so. This mental resistance to the effects can be a barrier to therapeutic benefits.

## **References**

<https://maps.org/research/psilo-ldd>

<http://www.drugpolicy.org/drug-facts/what-is-LSD>

[https://en.wikipedia.org/wiki/History\\_of\\_lysergic\\_acid\\_diethylamide](https://en.wikipedia.org/wiki/History_of_lysergic_acid_diethylamide)

<https://selfhacked.com/blog/lsd-lysergic-acid-diethylamide/>

<https://tripsitter.com/microdosing/>

- *LSD Psychotherapy by Stanislov Grof MD (1979)*
- *The Use of LSD in Psychotherapy and Alcoholism- Edited by Harold A. Abramson, M. D. (1967)*
- *Psychedelic Reflections edited by Lester Grinspoon MD(1983)*