Trip advisor

Psychedelic drugs promise excellent treatments for ailments of the psyche, **Robin Carhart-Harris** tells **Graham Lawton**, but doing the research is a high-wire balancing act

PROFILE
Robin Carhart-Harris is head of psychedelic research at Imperial College London's Centre for Neuro-psychopharmacology

Photographed for New Scientist by Liz Hingley

ONE of the last times I saw Robin Carhart-Harris, I was absolutely off my head on MDMA. On a Monday morning. He knew, because he was the one who gave it to me. He scanned my brain, put me through some psychological tests, and talked to me for what felt like hours about how I was feeling. I remember him being calming and patient. Then again, I was on drugs.

Today I'm completely straight, but he is still calming and patient. It's a character trait that must come in handy when you spend hours sitting with people who are having powerful psychoactive experiences. He has probably clocked up as many hours doing this as any scientist since the heyday of psychedelic drug research in the 1950s and 60s.

I tell him I need a checklist of the drugs he has studied. "You've done MDMA. You've done DMT. You've done LSD. You've done psilocybin." "Yes, that's it," he says. I realise I need to clarify: "I don't mean you, personally." He gives me a knowing look.

"Listening to someone on a high dose of psilocybin can be transformative"

Carhart-Harris is rapidly becoming the poster boy for the long-awaited, and often proclaimed, psychedelic renaissance. The story has been told many times – about how, back in the day, scientists started testing LSD and similar drugs as treatments for mental conditions including depression and addiction. About how they got positive results, but were crushed by the establishment. And about how a group of mavericks is on the verge of bringing psychedelics back. The story resurfaces every couple of years, but the renaissance never actually happens. This time it feels different.

One big reason is Carhart-Harris. Psychedelic research often has a slight whiff of patchouli oil about it, but he doesn't. I have just watched him give a presentation about his research on using psilocybin to treat people with major depressive disorder that had not improved with antidepressants. He was every inch the objective, steely scientist, dispassionately describing how he gave a dozen people with treatment-resistant depression large doses of psilocybin, and how this treatment appears to have succeeded for five of them. He talked about serotonin receptors and functional brain imaging; he presented data, and models of how the drug might work. He was, in short, really sciency.

But talking to him afterwards, he admits his performance is carefully calibrated. "It is deliberate; I do it because I believe that's the way to do it. You're walking a fine line, where on one side you have the hippies and on the other side the conservatives. I actually have more sympathy for the hippy perspective, but I've learned that you need to be very vigilant of that coming across in presentations and in papers, because when people see that, they think 'advocate'. You know – biased." He tells me that presenting the data soberly is what makes it most compelling.

For psilocybin, the data is compelling enough to warrant a much larger clinical trial, says Carhart-Harris, but on that front he has hit the same snag as many a psychedelic researcher before him: money. Leaving aside other costs, just synthesising medical-grade psilocybin is staggeringly expensive.

At this point, the usually positive 35-year-old shows signs of exasperation. "It is frustrating. I think funders are risk-averse; they see potential reputational hazards. I often entertain the idea of presenting a slide listing all the funding bodies that I've gone to that have said no, but then I thought I'd just come across like a dick, so I don't do it."

Lack of funding is what halted the psychedelic renaissance in the past, Carhart-Harris says, but he is determined not to let it happen to him. "I can't help but feel that the breakthrough will come, because I just have such conviction in psychedelics." The next stage of the trial will go ahead, he tells me, albeit in a stripped-down form. "My feeling is that psilocybin has major areas of superiority over SSRIs [selective serotonin reuptake inhibitors such as Prozac], and unless there's some curveball, I think it's an inevitability that psilocybin will be licensed as a treatment."

Existential truths

However, there's a deeper question about psychedelics that may fall by the wayside as a result of funding constraints. Curing depression is Carhart-Harris's day job, but what really fires him up is understanding the psychedelic experience and what it tells us about ourselves. "Psychedelics are useful, yes, but I also have conviction in them as tools to fundamentally understand the mind and the brain."

That is one reason why Carhart-Harris and his colleagues sit with the trial participants as they go through psychedelic therapy, and interview them extensively afterwards. Listening to somebody who is on a high dose of psilocybin can itself be a transformative experience, he says. Subjects frequently describe profound feelings of connectedness – within themselves, to others and to nature – as well as blissfulness, insight and disintegration of the self, or ego. Afterwards, they talk of emotional release and catharsis. Even people who have a bad trip feel changed for the better afterwards, Carhart-Harris says.

When people are under high doses, he says, they're not unhinged. "They're very, very lucid. It's like you're in the company of someone who is incredibly wise and seeing things from afar, seeing the bigger picture. I've come to believe that in the vast majority of cases these are insights about fundamental truths. Existential truths. And that's had a profound impact on me."

Oops, was that a glimpse of his inner hippy? He soon bottles it up. "Part of our agenda is to demystify some of the woolliness around the psychedelic experience and the tendency to characterise it in mystical or metaphysical terms. There's nothing metaphysical about it. It's very real. And very human."

Exactly how these experiences can lift people out of depression is not clear. "The mechanism... we don't know. We have ideas," he says. But the benefits could be broader than just as a specific treatment. Carhart-Harris also has data suggesting that a single dose of psychedelics can make anybody more open to experience, less authoritarian, more politically liberal, and more connected to nature and other people. No wonder the conservatives want to shut this down, I think to myself.

So should a psilocybin trip be on everyone's bucket list, I ask. The steely man of science returns. "No. There's a truth that can be realised by psychedelics, but absolutely you can realise it via other means. The value isn't in the psychedelic, it's in the truth, you know? That's why I would never want to promote psychedelic use. I think it's a useful tool, but it's not a sure deal, and things can go awry."

I'm dying to ask whether he is speaking from personal experience, but I know from previous conversations that he will neither confirm nor deny. And he has places to be, so I let him go.

A few days after our interview, I contact Carhart-Harris's office to talk about a photo shoot, and I discover he's gone to Peru to witness an ayahuasca ceremony in the jungle. That is about as removed from the clinical setting of his research as it is possible to get. But I suspect he will be in his element. ■

Robin Carhart-Harris will be speaking at New Scientist Live in September (live.newscientist.com)