



## Commentary

## Psilocybin-assisted group therapy: A new hope for demoralization

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Anderson et al.'s [1] open-label pilot study of psilocybin-assisted group therapy for demoralization among older long-term AIDS survivor (OLTAS) men is innovative and courageous. It is innovative in applying a group therapy paradigm not previously used in contemporary clinical studies of classic psychedelics. This is important because psilocybin- and other classic psychedelic-assisted treatments are typically time-intensive, involving several lengthy individual pre-drug preparatory sessions and post-drug integration sessions, raising concerns about scalability in real-world settings. The use of group therapy with classic psychedelics, though uncommon, is consistent with the anthropology of these compounds [2], and may well increase the likelihood of implementing such interventions in clinical practice should they continue to prove safe and effective. Furthermore, considering the unique and ineffable nature of transcendent experiences occasioned by classic psychedelics [3,4], group therapy may provide an optimal outlet for making meaning of such experiences, and critically, translating them to adaptive changes in behavior. Though comparing the effectiveness of group vs. individual therapy in this context is an objective for future research, it is nonetheless made possible by Anderson et al.'s [1] trailblazing work.

Anderson et al.'s [1] study is courageous in its focus on OLTAS men, a marginalized population diagnosed with HIV/AIDS at a time when HIV/AIDS was considered a terminal diagnosis. OLTAS men endured unprecedented and devastating loss of loved ones, and consequently, demoralization—a sense of helplessness, hopelessness, and a loss of meaning in life—is a pervasive clinical concern. Anderson et al. [1] thus targeted a significant and difficult-to-treat problem with current demoralization-focused psychotherapies demonstrating limited effectiveness. Moreover, 50% of their sample met criteria for a comorbid mental health condition including generalized anxiety disorder, panic disorder, and borderline personality disorder. As psilocybin can produce acute anxiety/fear/panic, dysphoria, and confusion

[4], the administration of psilocybin to a group of individuals predisposed to these difficult experiences undoubtedly presented many challenges. These challenges were unquestionably amplified by the Schedule I status of psilocybin and the heightened political lens surrounding its clinical application. Still, despite these challenges, Anderson et al. [1] demonstrated the feasibility, safety, and potential efficacy of psilocybin-assisted group therapy for an underserved and vulnerable population.

Of course, as with any open-label pilot study, Anderson et al.'s [1] findings are not conclusive. Future randomized placebo-controlled trials with larger samples are required to more definitively inform the safety and effectiveness of psilocybin-assisted group therapy for OLTAS men. Nevertheless, Anderson et al.'s [1] findings open the door to future investigations testing psilocybin-assisted group therapy in other populations confronted with demoralization, including those with chronic pain, obesity, substance use disorders, and the elderly, among others [5–7].

## Declaration of Competing Interest

PSH is on the scientific advisory board of Bright Minds Biosciences Ltd. and Silo Pharma Inc.

## References

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