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LSD: 1967

By GLIN BENNET

Introduction

It is twenty years since the appearance of Stoll's paper: "Lysergic acid diethylamide, a hallucinatory agent of the ergot group" (23). In this he sought to reproduce in a group of subjects Hofmann's personal experiences of the drug, and so set the LSD snowball on its way. Some 1,500 papers must by now have been gathered to it; they deal with a greater range of uses than has been thought of for any drug, a greater variety of benefits and disasters, and a confusing number of claims. Yet we have little hard information about this curious substance.

It seems appropriate on this anniversary to try to take stock. And an attempt will be made here to unravel some of the issues; some because of their notoriety, others because of their theoretical interest.

Dangers

LSD has its dangers, and a recent classification of these (10) makes alarming reading (as do all the other reports in the medical and public press). Figures of incidence are not possible in such an account, but six years earlier the same author (7), from a postal survey concerning 5,000 people who took LSD on 25,000 occasions, calculated the incidence of psychotic reactions lasting more than 48 hours as 0·08 per cent. in experimental subjects and 0·18 per cent. in patients undergoing therapy. Among the experimental subjects there were no attempted or completed suicides; among the patients the incidence was 0·12 per cent. and 0·4 per cent. respectively.

Those committing homicide or suicide or suffering accidental death after taking the drug become familiar figures to the reader of the LSD literature, and their message loses nothing by repetition. When the original reports of these tragic events are consulted, one finds them virtually all to have been severely disturbed individuals, and the authors have sometimes been reluctant to claim a causal connection between LSD taking and the disaster.

Disasters do occur with LSD, but they are rare. If all the homicides, suicides and accidental deaths associated with alcohol consumption were written up in the same detail as those associated with LSD we might see the problem in a clearer perspective.

When the drug sessions are properly supervised and the subjects are people functioning satisfactorily in the community, the risks appear negligible (1, 8, 19); though more subtle disturbances, such as the recently reported chromosome abnormalities (6), may become decisive in the future.

Now that the drug is banned in Britain and the United States its use must become secretive. Supplies may be less pure (less potent but perhaps more toxic), and there may be an increased tendency to combine LSD with other drugs such as cannabis and amphetamines. Thus casualty officers may suspect LSD intoxication in unexplained toxic states, acute panic (13) or odd psychotic reactions (10). These can generally be relieved by chlorpromazine.

Users and Observers

LSD takers tend to become enthusiastic about the drug and are prone to proselytize. More surprising, and less happy from the research point of view, is the tendency for the observers to become enthusiastic. Ditman *et al.* (11) considering this matter conclude: "Perhaps LSD is unique in that it prompts so many claims, not only from the subjects and patients, but from the investigators themselves."

Sidney Cohen (9), in a different direction, describes: " . . . an affliction, not of the receiver,

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but of the giver of hallucinogens. This peculiar disorder might be called therapist breakdown.... Research personnel seem to be immune ... it is the therapist or quasitherapist who suffers...." He lists: "psychotic breakdown", "megalomaniacal ideas of grandeur", "marked depressions", "one suicide" and "legal difficulties because of antisocial practices" as possible sequelae, and suggests that they are by no means uncommon.

Further, the observer's expectation of effects (as well as the subject's) will to a great extent determine what happens; likewise the setting—laboratory, therapeutic group, private party. In fact the effects can be so varied that from reading different workers' accounts it is not always apparent that they are studying the same substance. Psychotherapists describe regressive responses (18, 22): these are practically never seen in the laboratory.

These difficulties, as well as all the others inherent in studying subjective states, may be responsible for our inability after twenty years of extensive research to predict the psychological effects of LSD—even in a given subject.

Public Attitudes

Here is one area where prediction is more reliable. Establishments have sensitive antennae for possible threats to the *status quo*. Blum (2) has indicated the tendency of regular users to become: "less goal orientated" and to form themselves into exclusive groups which reject some of the precepts of the community.

Substantial numbers of Ditman's group (11) described, amongst other new attitudes: "A sense of relaxation and freedom from anxiety and tension", "a new way of looking at the world", "a greater understanding of the importance and meaning of human relationships", "a new understanding of beauty and art", "a greater awareness of God, or a Higher Power, or Ultimate Reality".

These attitudes are certainly desirable in themselves, but the tendency which goes with them to become less active and less productive may appear as a threat to the integrity of society, particularly where large groups are involved. Indeed, these groups, in California for instance, have grown to such dimensions that the conventional sanctions of public disapproval and attentions from the police no longer have any effect.

Those who identify with the Establishment may feel that they are being asked to accept a habit which seems to undermine the principles by which they have lived—perhaps very effectively—over may years. They understandably react against the drug takers: there is more or less continuous public debate on the subject, condemnation from those in high places, and heavy penalties in the courts. In this deeply felt opposition there is a danger in condemning the person when it is really the habit which is deplored.

If those who represent authority are to retain a positive influence they must try to understand the tensions which find release in drug taking and in joining groups. It is not impossible for those who have succeeded abundantly in our society to learn something from those who have not even begun.

Who Takes LSD and Why

Some people hint that the curiosity to try psychodelic drugs indicates in itself a poor ability to deal with reality: ergo, the drug takers are schizophrenic. Others feel it is reasonable to want to expand one's awareness, to try to understand "what life is about", and they point to examples of philosophers, artists and religious men throughout history.

Blum (3), working in California, compared the life situation of LSD takers with a group which had been offered LSD but had refused it. A significantly greater proportion of LSD takers had found their lives previously "miserable or unsatisfying", there was more "internally generated distress" and feelings of inadequacy. Ten per cent. reported "major psychological distress": none of the refusers reported this latter.

A. Y. Cohen (5), studying a group of American undergraduates, found a four-fold increase in "identity problems" ("finding the meaning of my life", "discovering my inner potentialities") among those who agreed to take LSD over those

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who refused. The refusers, as Blum also found, had on the whole more rigid attitudes to life.

The LSD taker seems to be a well educated person, likely to be Protestant and male, coping reasonably well with his work and interpersonal relationships, but nevertheless "internally" dissatisfied. It is in his search for relief from this dissatisfaction that he takes the drug.

If there is an "escape from reality" in LSD taking, it is more likely to be through the act of joining the LSD subculture (which not all do) than through the drug experience itself.

Is The LSD Experience Valid?

It affronts the Judeo-Christian conscience that something pleasureable should be had for nothing, that years of discipline and mortification should be rendered superfluous by swallowing a sugar cube.

Aldous Huxley (14) and others (20) assert that the drug-induced state is as "valid" a transcendental experience as that attained by the contemplative of the past: other writers (17, 25) have denied this. The question will be debated by philosophers for a long time to come.

The psychiatrist can be more pragmatic. The experience *is*, and that is that. It might happen to yield interesting information about psychic processes or about the individual's personal situation (as might a dream) or it might not. A search for significance in the experience itself is likely to lead the observer away from the real issues. Candidates for canonization will be judged not by the sublimity of their visions but by the accomplishments which followed. So it is the *use* the individual makes of his experience which matters: " . . . their fruits for life", as William James said.

Many people have sensed (with or without the assistance of drugs) "a great light", among them St. Paul (24). For him it was merely the beginning. For the LSD taker so often the experience is the objective—the destination: a practice which in the past would have been called magic.

Why Now?

One of the curiosities of the psychodelic (*dēlos*=manifest, hence "mind-manifesting") drug movement is that it should have broken forth when it did. Many have given credit to (or have blamed) Aldous Huxley's action in publishing *The Doors of Perception* in 1954. This is probably too simple, but the question is one for the social psychologist.

Psychodelic drugs (and this term is preferred to "hallucinogenic" since, despite its cult connotation, it makes it clear that the drug merely releases what is there and does not somehow generate hallucinations within the brain), psychodelic drugs have been known for centuries in the Americas. Their use became widespread among the North American Indians in the late 19th century when these people had their traditional way of life and self-esteem destroyed by the move westwards.

In these practices peyote (in which the principal alkaloid is mescaline) was mainly used, and this caught the interest of such men as William James, Weir Mitchell and Havelock Ellis.

Weir Mitchell (21) and Havelock Ellis (12) each spent some agreeable hallucinated hours under the influence of the "mescal button" and they recognized a promising area for psychological research. Ellis was rebuked for his enthusiasm by the *British Medical Journal* (4) but there does not seem to have been much other comment at the time.

William James is reported to have been made violently sick by mescaline, but with nitrous oxide he had a rewarding experience. He has described it in some detail, and two extracts will now be given because they catch the essentials of the experience, applicable to all drug-induced states, and they are accompanied by philosophical cautions all too infrequent among more recent accounts.

"The mind sees all the logical relations of being with an apparent subtlety and instantaneity to which its normal consciousness offers no parallel; only as sobriety returns, the feeling of insight fades, and one is left staring vacantly at a few disjointed words and phrases, as one stares at a cadaverous-looking snow-peak from which the sunset glow has just fled . . . I have sheet after sheet of phrases dictated or written during the intoxication, which to the sober reader seem meaningless drivel, but which at the moment of transcribing were fused in the fire of infinite rationality. . . . " He goes on to quote 45 lines of these. " . . . Something 'fades', 'escapes'; and the feeling of insight is

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changed into an intense one of bewilderment, puzzle, confusion, astonishment. . . . "

"My conclusion is that the togetherness of things in a common world, the law of sharing . . . may, when perceived, engender a very powerful emotion; . . . [but] that the identification of contradictories, so far from being [a] . . . self-developing process . . . is really a self-consuming process, passing from the less to the more abstract, and terminating either in a laugh at the ultimate nothingness, or in a mood of vertiginous amazement at a meaningless infinity" (15).

Some years later, in *The Varieties of Religious Experience*, he reflects on the same event:

"Looking back on my own experiences, they all converge towards a kind of insight to which I cannot help ascribing some metaphysical significance. The keynote of it is invariably a reconciliation. It is as if the opposites of the world, whose contradictoriness and conflict make all our difficulties and troubles, were melted into unity. Not only do they, as contrasted species, belong to one and the same genus, but *one of the species*, the nobler and better one, *is itself the genus, and so soaks up and absorbs its opposite into itself*. This is a dark saying, I know, when thus expressed in terms of common logic, but I cannot wholly escape from its authority. I feel as if it must mean something, something like the meaning of the hegelian philosophy, if one could only lay hold of it more clearly. Those who have ears to hear, let them hear; to me the living sense of its reality only comes in the artificial mystic state of mind" (16).

Conclusion

Experiences under psychodelic drugs have been recorded which demand serious attention, as also do the risks: this we have learned in the past twenty years. In understanding the essence of the experience we have learned little since William James.

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