Physician Information

ATMA
JOURNEY CENTERS

An introduction to the basics of

Psychedelic-Assisted Therapy &
the **Special Access Program**

Introduction

Psychedelic therapy has entered a period of renaissance marked by resurging interest, scientific vigor, and newfound potential in assisting individuals who remain unresponsive to conventional treatment standards. Ongoing research and clinical investigations into psychedelic medicines and therapeutic approaches are compelling, reaffirming their safety, efficacy, and profound healing potential. When properly administered, these substances exhibit promising results in addressing a diverse range of physical and mental health conditions.

However, to fully comprehend the concept of "psychedelic therapy," and to gain insight into the experiences involved, it is crucial to explore the precise methods according to current scientific knowledge and the collective understanding of this field. Given the myriad of experiences, practitioners, and modes of administration, the landscape of psychedelic therapy is intricate and multifaceted. Understanding these intricacies is paramount in facilitating medical professionals and the broader community to unlock the therapeutic potential offered by these psychedelic compounds in conjunction with effective therapy and delivery methods.

The complexity is compounded by the need to understand administrative and regulatory guidelines in diverse jurisdictions in the early days as clinical trials are near reaching regulatory approval for these treatments. Even though this medical therapy space remains in an exploratory stage, the need to increase physicians' awareness, participation, and knowledge cannot be understated for the preparation of the coming legalization.

Path to Psychedelic-Assisted Therapy for Canada

Clinical Trials

- Phase I: Safety
- Phase II: Proof of Concept
- Phase III: Regulatory Proof

With the successful completion of a phase 3 clinical trial, an application can be made to Health Canada for a Drug Identification Number making it available to be prescribed by physicians and prescribers.

Compass Pathway is preparing to begin its phase 3 psilocybin clinical trial in the US for treating major depressive disorder (MDD).

MAPS has successfully completed its Phase 3b MDMA clinical trial to treat post-traumatic stress disorder (PTSD) in the US with highly favourable results and is preparing a New Drug Application (NDA) to submit to the US FDA.

The International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use (ICH) Guidelines aligns Guideline for Good Clinical Practice (GCP) globally so clinical trial results for drugs do not have to be duplicated in both the US and Canada.

Drug Identification Number (DIN)

Health Canada regulates the drug approval process under the Food and Drugs Act (FDA) and within the Food and Drugs Regulations (FDR), its related policies and guidance. Before a drug can be distributed and sold in Canada, its manufacturer must receive a Notice of Compliance (NOC) from Health Canada, and the drug must be assigned a Drug Identification Number (DIN), uniquely identifying all drug products sold in a dosage form in Canada.

The successful completion of phase 3 clinical trials by MAPS for MDMA means those results could be used by an MDMA manufacturer in Canada in an application for an NOC and a DIN as early as this year. The approved drug labeling would be to treat PTSD.

Compass Pathway's phase 3 clinical trial results, if proven successful, could result in the same pathway for an application for an NOC and DIN for psilocybin in late next year. The approved drug labeling would be to treat MDD and could come as early as 2025.

Several other companies, including a couple of Canadian companies, are at the phase 2 stage for different indications for psilocybin treatment, such as general anxiety and substance abuse disorder.

In Canada, psilocybin and MDMA are considered Schedule I drugs; an additional step to remove it from under the Canadian Controlled Substance Act (CDSA) would be required prior to an NOC and DIN approval.

Prescribing PaT Therapy

Once a DIN is assigned to MDMA and psilocybin, and an NOC assigned to Canadian manufacturers, it is then available to Canadian physicians and prescribers to recommend to patients for the approved drug label.

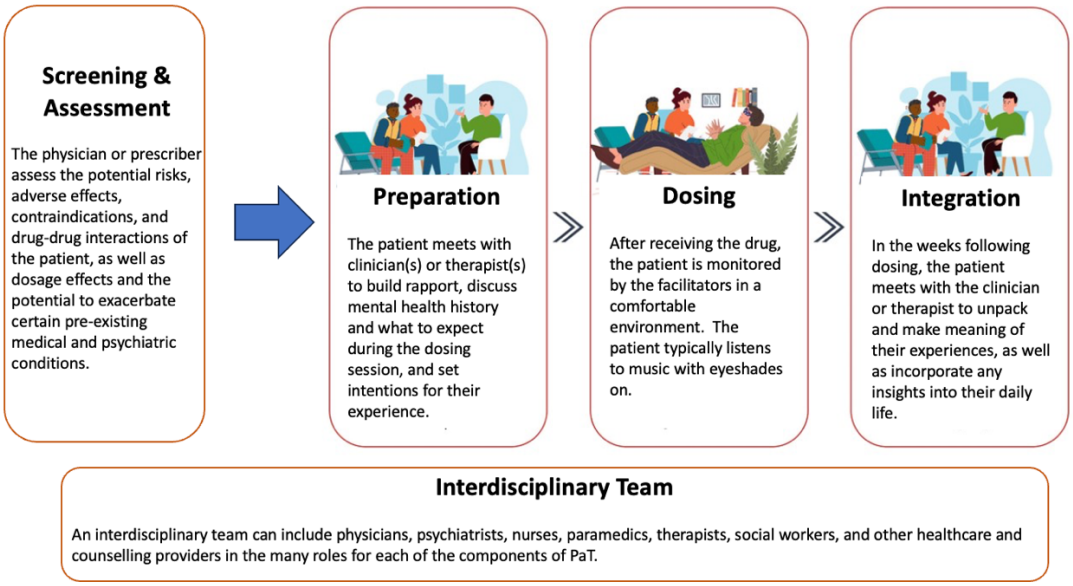
However, psychedelic-assisted therapy (PaT) is a new field combining both medication and therapy. Prescribing psychedelic therapy is not the same process as prescribing other drugs like SSRIs or SNRIs.

As healthcare delivery falls under provincial jurisdiction, each province will likely provide their own rules and regulations for the administration of PaT.

Alberta is currently developing its regulatory framework for PaT. The College of Physicians and Surgeons of Alberta, as well as the College of Alberta Psychologists is preparing accreditation and practice standards for delivering PaT.

Alberta has set a very high bar for safety standard of care for the delivery of PaT as this is a new field of practice. It is likely that most Canadian provinces will closely follow these standards, with minor differences from province to province. British Columbia may likely roll out a much higher accessibility model for PaT compared to the rest of Canada.

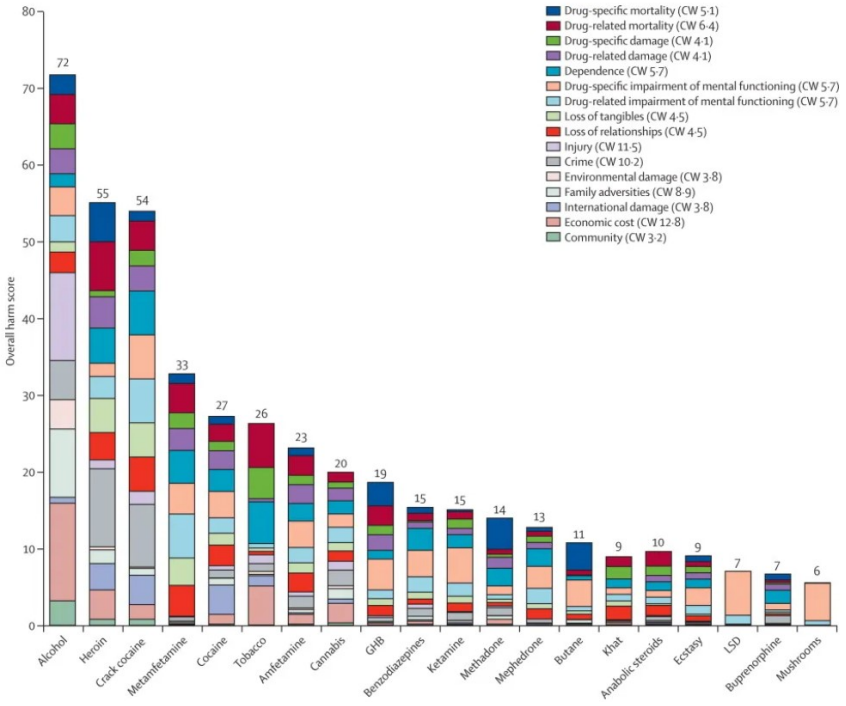
Psychedelic-Assisted Therapy Simplified



Safety Profile

Published in the Lancet, a pioneering UK journal, MDMA and psilocybin are among the lowest risk endogenous compounds commonly consumed today. Compared to tobacco/nicotine, alcohol, and caffeine, classic psychedelics have an exceptional safety profile for users.

However, they are not panaceas and require careful handling due to their potent impact on the body and psyche. To ensure safety in psychedelic therapy, practitioners, especially physicians, must be mindful of contraindications, which are physical or mental indicators that may render specific medicines unsuitable for certain individuals.



Safety and Efficacy of Psilocybin for MDD

Psilocybin, a naturally occurring psychedelic compound found in certain species of mushrooms, has garnered increasing attention in the medical field as a potential treatment for numerous mental health issues. Clinical studies published in reputable medical journals, including the New England Journal of Medicine, Lancet, the Journal of the American Medical Association, and Nature Medicine that assess the efficacy of psilocybin in treating mental health conditions have shown significant promise (Carhart-Harris et al., 2016; Carhart-Harris et al., 2021; Davis et al., 2021; Daws et al., 2022; Goodwin et al., 2022). Particularly in the context of mood disorders like treatment-resistant depression, psilocybin-assisted therapy has shown the potential to provide substantial and sustained relief superior to current standard of care (Carhart-Harris et al., 2016; Carhart-Harris et al., 2021; Davis et al., 2021; Goodwin et al., 2022). Furthermore, psilocybin has demonstrated potential in alleviating symptoms of anxiety disorders, post-traumatic stress disorder (PTSD), and even substance abuse behaviors (Carhart-Harris et al., 2016). As a treatment approach, psilocybin therapy aims to address the root causes of mental health issues rather than merely masking symptoms, making it an innovative and promising avenue for mental health care.

In addition to demonstrating efficacy in the treatment of mental health issues, psilocybin has a favourable safety profile. Indeed, the outcomes of clinical trials have demonstrated that when administered under controlled conditions and with appropriate medical supervision, psilocybin is generally well-tolerated by patients (van Amsterdam et al., 2011; Lowe et al., 2021). Adverse effects, if present, are typically mild and short-lived, including transient anxiety, nausea, and dizziness (Johnson, Richards, & Griffiths, 2008). Importantly, there is a low risk of physical dependence or addiction associated with psilocybin use, making it a potentially safer alternative to some conventional psychiatric medications (van Amsterdam et al., 2011).

The mechanism of action of psilocybin is exerted through its metabolite psilocin, which interacts with serotonin receptors in the brain. As a partial agonist at serotonin 5-HT_{2A} receptors, psilocin modulates serotonin signaling pathways, leading to significant alterations in perception, cognition, and emotions. Psilocin's influence on other serotonin receptor subtypes, including 5-HT_{1A} and 5-HT_{2C}, may also contribute to its effects on mood and anxiety (Passie et al., 2002; Hassan et al., 2011; Mithoefer, Grob, & Brewerton, 2016; Nichols, 2016; Kargbo, 2020). Unlike traditional antidepressants, which require daily dosing (such as selective serotonin reuptake inhibitors – SSRIs, or serotonin-norepinephrine reuptake inhibitors – SNRIs), psilocybin is administered in a single session, thereby avoiding many of the adverse effects and nonadherence issues of current standards of care.

As with any novel treatment, ongoing research is essential to fully understand the long-term safety and efficacy of psilocybin in treating mental health issues. While early findings are encouraging, it is crucial to develop standardized protocols for administration and dosage guidelines to ensure that psilocybin therapy remains a responsible and evidence-based option for patients. Additionally, appropriate screening and patient selection are critical to identifying individuals who may benefit most from psilocybin therapy while minimizing potential risks. As the research landscape continues to evolve, psilocybin's potential as a valuable tool in mental health treatment holds significant promise for transforming the field of psychiatry and enhancing the lives of countless individuals struggling with mental health issues.

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- https://www.nature.com/articles/s41591-022-01744-z

Safety and Efficacy of MDMA for PTSD

MDMA (3,4-methylenedioxymethamphetamine) is a synthetic compound and the active ingredient in the recreational drug commonly known as "ecstasy." MDMA has been studied for its potential therapeutic efficacy in the treatment of certain mental health conditions, particularly post-traumatic stress disorder (PTSD) (Cipriani & Cohen, 2018; Mithoefer et al., 2018; Krediet et al., 2020; Mitchell et al., 2021; Slomski, 2021). Indeed, research published in reputable medical journals such as Nature Medicine, Frontiers in Psychiatry, the Journal of the American Medical Association, and Lancet have shown that MDMA-assisted psychotherapy, conducted under controlled and supervised conditions, may help individuals with treatment-resistant PTSD (Cipriani & Cohen, 2018; Mithoefer et al., 2018; Krediet et al., 2020; Mitchell et al., 2021; Slomski, 2021). The mechanism of action of MDMA involves its effects on neurotransmitters, including serotonin, dopamine, and norepinephrine, and hormones like oxytocin. MDMA initiates the release of serotonin and oxytocin, resulting in increased feelings of empathy, emotional openness, and a sense of connection with others. These effects, combined with the supportive therapeutic environment, may facilitate the processing of traumatic memories and emotional healing, making it a potentially valuable adjunct to psychotherapy in specific cases.

In terms of safety, it is essential to differentiate between therapeutic use and recreational use of MDMA. When used recreationally, MDMA can lead to adverse and serious adverse events, including increased heart rate, dehydration, and elevated body temperature, which may pose significant health risks (Kalant et al., 2001). Additionally, drug quality can be a serious concern; MDMA manufactured in 'basement labs' can contain many harmful ingredients (Krediet et al., 2020). However, in clinical trials, pharmaceutical-grade MDMA has been administered at lower doses and in controlled settings, with careful screening and monitoring of participants. Under these conditions, MDMA-assisted therapy has generally been well-tolerated, with participants reporting transient adverse side effects such as anxiety, nausea, and fatigue. Severe adverse events are rare when used responsibly in therapeutic contexts (Kalant et al., 2001).

While early research suggests potential efficacy and safety of MDMA-assisted therapy, further investigations are necessary to fully understand its long-term effects and the specific conditions for which it may be most beneficial. The controlled and supervised use of MDMA in therapeutic settings shows promise in addressing mental health challenges, but it is crucial to continue rigorous clinical trials to establish its place as a safe and effective treatment option. As with any novel therapeutic approach, careful consideration of the risks and benefits, along with appropriate patient selection and ongoing research, is vital to ensure responsible and evidence-based use of MDMA in mental health treatment.

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Current Regulations Outside of Canada

On July 1, 2023, there was a notable milestone in the field of clinical mental health treatment as psychedelic-assisted therapy became legalized in Australia. The decision was based on the accumulation of research and scientific evidence from clinical trials conducted worldwide, which strongly supports the therapeutic potential of psychedelic substances, specifically psilocybin for treatment-resistant depression and MDMA for treatment-resistant post-traumatic stress syndrome. The efficacy of these treatments was found to be particularly significant when administered in a controlled and supportive therapeutic setting. As a result of the substantiated evidence and the absence of comparable alternatives, the Therapeutic Goods Administration (TGA) granted approval for these measures.

In the United States, widely varying from state to state, compassionate use of psychedelics primarily occurs through the Expanded Access framework, also known as "compassionate use" or "right to try." This FDA-regulated pathway permits terminally ill patients or those with serious and life-threatening conditions to access investigational drugs, including certain psychedelic substances, when they are not eligible for participation in clinical trials. The treatment is closely monitored, and patients undergo therapy sessions with trained professionals to maximize safety and therapeutic efficacy. While the compassionate use of psychedelics shows promise, it is essential to emphasize that the approach is currently limited to specific cases under strict clinical oversight, and ongoing research aims to further elucidate the safety and efficacy of these treatments.

Oregon and Colorado have passed voting ballot regulations that permit the adult use of certain psychedelics. In January 2023, Oregon began granting licenses for legal adult use of psilocybin, but only under the supervision of a licensed facilitator within an authorized facilitation center. Meanwhile, in November 2022, Colorado voters approved the Natural Medicine Health Act (MNHA), which allows for adult use regulations similar to Oregon's approach. Additionally, the MNHA opens the possibility of incorporating other plant medicines like Ayahusaca in the future.

However, these regulations in Oregon and Colorado have limitations concerning the inclusion of therapy in the context of Psychedelic-assisted Therapy (PaT). Claims of therapy associated with using psychedelics cannot be made until the US FDA approves them through clinical trials, proving their therapeutic efficacy. As a result, PaT is expected to be regulated significantly differently from state to state, with some states potentially not making it available for many years, similar to the situation with cannabis regulations.

Health Canada Special Access Program (SAP)

In January 2022, Health Canada broadened the scope of its Special Access Program (SAP) to encompass psilocybin and MDMA. Prior to this expansion, both substances were classified under Schedule I in the Canadian Drug and Substance Act (CDSA), signifying that they were deemed to have no medicinal or health benefits.

Psilocybin and MDMA have not yet been approved for a drug label by Health Canada; the only way to access these drugs in Canada is through clinical trials or the SAP. To be eligible for these drugs through the SAP, patients must suffer from a serious or life-threatening condition and have exhausted all conventional treatment options, which either failed, were unsuitable, or were not available in Canada.

Initially, only applications for psilocybin treatment to address end-of-life distress were approved, but in more recent months, the SAP has authorized it for treating Major Depressive Disorder (MDD) and Post-Traumatic Stress Disorder (PTSD).

As a physician requesting drugs through the SAP on behalf of their patients, certain responsibilities must be fulfilled. These include ensuring that patients are fully informed about the potential risks and benefits of the requested drug and its current development status. Additionally, physicians are required to submit a report to Health Canada detailing the outcomes of the drug's usage, including any adverse reactions that may occur. It is crucial to maintain accurate and accessible records to account for the quantities of the drug received, as the drugs are technically not legal. Furthermore, the decision to prescribe the drug should be backed by credible evidence available in relevant medical literature or provided by the manufacturer.

The SAP does not provide information or guidance on the administration of the drug being accessed. It is up to the physician requesting it to have full knowledge and clear understanding for the use and effect of the drug being requested.

Challenges for Physicians

Psilocybin and MDMA have not yet received drug label approvals in Canada. As such, the SAP does not provide information or guidance on the administration of the drug being accessed. It is up to the physician requesting it to have full knowledge and clear understanding for the use and effects of the drug being requested.

Physicians who wish to obtain access to these drugs for PaT will need to formulate a comprehensive plan for the safe administration of the medication. It is important for physicians to have access to a knowledgeable interdisciplinary team, which should include at least one other therapist. This collaborative approach is essential to ensure the safe and effective delivery of treatment, albeit time intensive.

Physicians wishing to participate may be deterred by challenges such as:

- Time constraints to undertake and how to be compensated
- Unfamiliarity with this new field of medical therapy using psychedelics
- There is no drug label to work with
- No guidance, procedures, and protocols to assure the safe and effective administration of the drugs
- No administrative system to organize interdisciplinary teams and undertake ad hoc cases of PaT
- Lack of suitable facility space to deliver PaT under the SAP

Concluding Notes

Physicians are increasingly presented with many mental and physical health concerns that stem from mental health disorders with limited treatment options. The literature and research on the safety and efficacy of psychedelic therapy provided in this brochure should provide physicians with a comfort level in working with these medicines to treat patients in need.

Clinical trials are yielding positive results and nearing regulatory proof stage. Regulations for PaT are being implemented, drafted, and discussed internationally. There is a legal avenue for physicians to provide PaT for patients in Canada who have exhausted traditional treatment without relief; the SAP allows for access to psychedelics for PaT for compassionate reasons. However, there are challenges that physicians and prescribers face with accessing psychedelic drugs through the SAP, and then administering therapy, that has deterred wider participation. If you are a physician or prescriber interested in the SAP program but are hesitant because of the challenges, ATMA can assist. Our workshop offers CME opportunity.

ATMA and Cenalife SAP Workshop

ATMA/Cenalife is committed to providing physicians' education, guidance, safety procedures, and protocols as well as administrative support services to streamline the SAP and PaT process upon approval. As a physician, you can feel supported in participating and helping patients in desperate need of this treatment.

Our workshops are provided through a team of multidisciplinary practitioners who are well versed in healthcare, but also in the field of PaT. You will learn about the topics below and how ATMA/Cenalife can provide additional support:

The medical aspect of PaT

- Screening and assessing the potential risks, adverse effects, contraindications, and drug-drug interactions of the patient, as well as dosage effects and the potential to exacerbate certain pre-existing medical and psychiatric conditions.
- Psychiatric Pharmacology
- Filing an SAP application, detailed eligibility criteria for a successful application

The roles and responsibilities of an interdisciplinary team

- Who do you need on your team to deliver effective treatment
- Team management

Procedures and protocols for highest safety standard of patient care

- ATMA/Cenalife provides an overview on protocols of quality assurance and management systems, along with standard operating procedures, within clinical environments, commonly employed in clinical trials and similar the guidelines set by the College of Physicians and Surgeons of Alberta.

SAP Workshop

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