

# Psychedelic and related medicines at the end of life

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**T**he Assisted Dying Service<sup>1</sup> reflects the implementation last month of the End of Life Choice Act (EoLCA) 2019 and marks a turning point for medical practice in New Zealand. While we as a profession grapple with the implications of the new law,<sup>2</sup> it is timely to consider the range of options that may assist dying patients and their families.

Although unregistered and currently illegal in this country, the classical psychedelic psilocybin has shown encouraging results in two randomised crossover trials of patients with terminal cancer and associated anxiety and depression.<sup>3,4</sup> In contrast to conventional palliative pharmacotherapies, the clinical effects of psilocybin, including long-lasting symptomatic and quality-of-life improvements, are often apparent after a single supervised psychedelic experience. If validated in larger studies, these findings would suggest psychedelics will be an important addition to current therapeutic options at the end of life.

Compared to the serotonergic psychedelics psilocybin and LSD, methylenedioxymethamphetamine (MDMA, “ecstasy”) is another unregistered illicit drug with somewhat different pharmacology and subjective effects and notably

less hallucinatory. MDMA has been termed an “entactogen” because of its powerful tendency to suppress fear responses and promote feelings of openness and connection. Recent controlled trial data indicate the long-lasting efficacy of MDMA-assisted psychotherapy in relieving the symptoms of treatment-resistant post-traumatic stress disorder;<sup>5</sup> US Food and Drug Administration approval for this indication is currently being sought. Closer to home, a randomised controlled trial of MDMA for anxiety and depression in terminal illness, hosted by the universities of Auckland and Otago, is due to start in early 2022. A small, US-based pilot study has indicated the likely benefit of MDMA-assisted psychotherapy for this indication.<sup>6</sup>

Patients with terminal illness often encounter a variety of psychological and physical challenges, and these are generally well managed in palliative care. Nonetheless, concerns about the efficacy and tolerability of conventional palliative treatments have led patients and their families to seek additional options, including medically assisted dying. The future availability of psychedelic and related medicines may offer valuable alternatives to patients who might otherwise opt to pursue the EoLCA.

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Nil.

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