



kap

Foundations of
Ketamine-Assisted
Psychotherapy

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Module 6

Considerations for Specific Conditions



Module 6

Lesson 6.2

Contraindications

Who Might be Excluded from Ketamine Therapy?

- History of increased intracranial pressure
- Pregnancy (current)
 - Ketamine while lactating only ok if the individual pumps for 8-12 hours after dosing
 - <https://www.authorea.com/users/395546/articles/508775-the-pharmacokinetics-of-ketamine-in-the-breast-milk-of-lactating-women-quantification-of-ketamine-and-metabolites>
- Uncontrolled hypertension
- Acute or unstable cardiovascular disease
- Previous negative response to ketamine
- History of psychosis

Prolonged Psychosis & Psychedelics

- Some individuals enter transient and sometimes prolonged psychotic states after psychedelic use (Cohen 1960; Halpern and Pope 1999; Strassman 1984)
 - 0.08% of 5000 volunteers who used LSD or mescaline had a psychotic or extreme panic reaction lasting more than 2 days (Cohen 1960)
 - Higher rate (0.18%) seen in individuals with psychiatric comorbidities
- Psychedelics are thought to trigger psychotic episodes in people already vulnerable to psychosis, rather than causing this reaction directly (Strassman 1984)
 - A survey of 4300 research volunteers who received LSD reported a rate of 0.9% for serious, persistent psychiatric reactions (Malleon 1971)

Psychosis & Ketamine

- While caution is advised, a history of psychosis is not an absolute contraindication
 - <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5859935/>
- Psychotic/ dissociative sx may be a bit more pronounced in individuals with psychosis, but typically not lasting beyond the session
 - <https://rebelem.com/is-ketamine-contraindicated-in-patients-with-psychiatric-disorders/>

Where Else to be Extra Cautious with Ketamine

- Bipolar I disorder with current mixed or manic episode
- Strong Axis II component, with recurrent behavioral issues while in treatment
- Unstable complex PTSD
 - May benefit substantially from KAP, but have team/support/skills in place first
- Dissociative identity disorder
 - Need to consider risks of pronounced or prolonged dissociation
 - May still be beneficial with the right treatment team & support in place
- Uncontrolled hypertension, tachycardia or unstable cardiopulmonary disease
- Severe and/or recent substance dependence

Ketamine & Substance Use Disorders

- A history of substance abuse is not exclusionary
- A recent meta-analysis of 7 studies (alcohol, opiates, cocaine) found improvement in abstinence rates, craving, and motivation.
 - “Studies of alcohol and opioid use disorders found improvement in abstinence rates in the ketamine group, with significant between-group effects noted for up to two years following a single infusion... These results suggest that ketamine may facilitate abstinence across multiple substances of abuse and warrants broader investigation in addiction treatment.” (Jones et al., Frontiers in Psychiatry, July 2018, PMID: 30140240)

Prudent Optimism

- Although there is much to be excited about – it is equally important to consider:
 - how to optimize experiences (with screening, community, prep and integration)
 - how to mitigate suffering and adverse events (having trained medical and mental health staff available)
 - working collaboratively with conventional medicine (i.e when seeking plant medicine ceremonies abroad)
 - how to say no to those for whom the risks are just too high given the state of our knowledge
- Also:
 - Psychedelics and psychotropics don't need to be mutually exclusive
 - Though it can be safe from a medical perspective to combine certain medications with plant medicines / psychedelics, it's also important to consider other psychospiritual implications

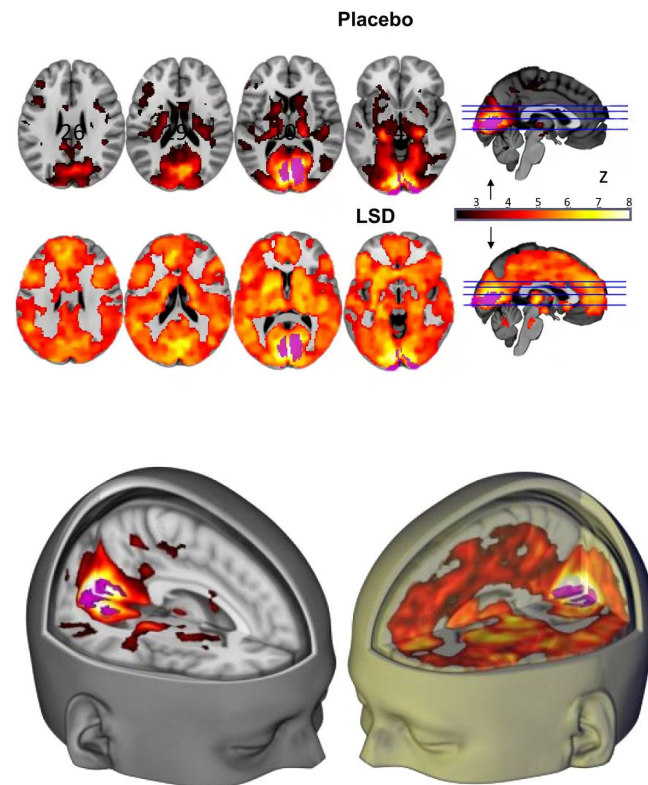
“Science is not only compatible with spirituality; it is a profound source of spirituality. When we recognize our place in an immensity of light-years and in the passage of ages, when we grasp the intricacy, beauty, and subtlety of life, then that soaring feeling, that sense of elation and humility combined, is surely spiritual. So are our emotions in the presence of great art or music or literature, or acts of exemplary selfless courage such as those of Mohandas Gandhi or Martin Luther King, Jr. **The notion that science and spirituality are somehow mutually exclusive does a disservice to both.**”

~Carl Sagan, Science as a Candle in Dark

APPENDIX

Your Brain on Drugs

- 20 subjects received either 75mcg of IV LSD, or placebo
- Brain activity measured via MRI, Arterial Spin Labeling, and MEG
- Robin Carhart-Harris: It was as if the subjects were “seeing”, but with their eyes closed. In other words, their visual systems were no longer being stimulated by the outside world, but rather by the intrinsic (endogenous) activity of their brains—their imaginations, so to speak.
- Under the influence of LSD, many other areas of the brain (those associated with hearing, attention and movement) interacted not only with the visual areas but also with one another, resulting in the “more unified brain” that this drug has been said to induce.



“Neural correlates of the LSD experience revealed by multimodal neuroimaging”
(Nutt et al, PNAS, 2016)

Thanks for listening!

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