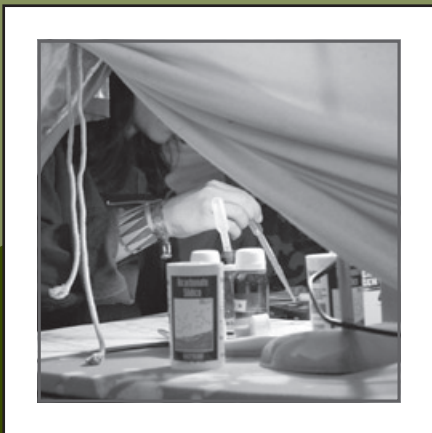
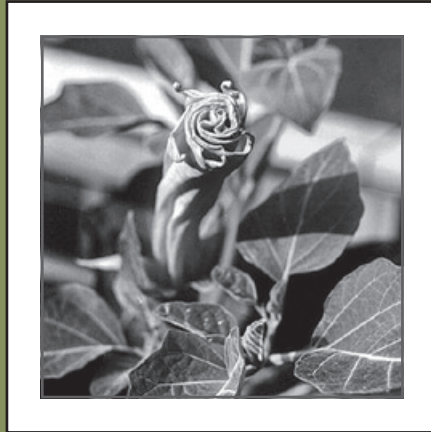
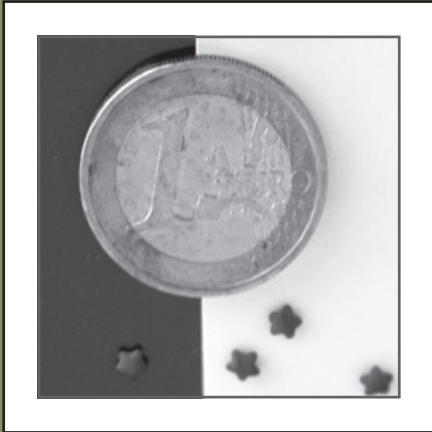


Erowid Extracts

DOCUMENTING THE COMPLEX RELATIONSHIP BETWEEN HUMANS AND PSYCHOACTIVES

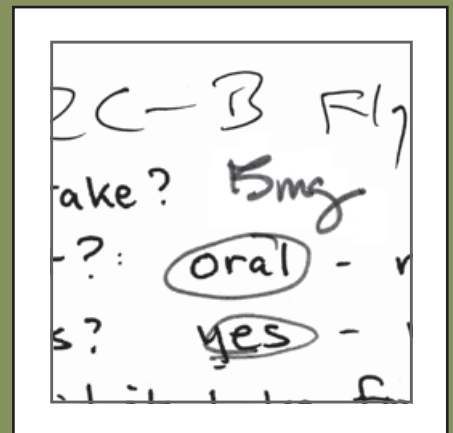
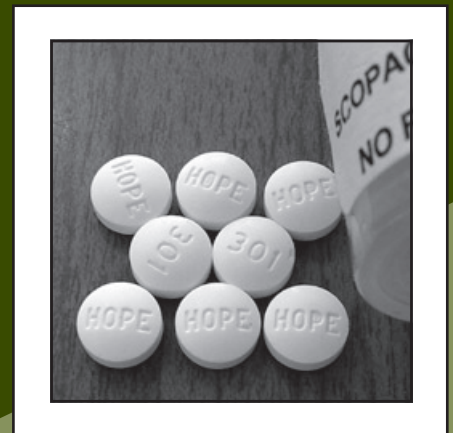
November 2008

Number 15



*"Do not wait for leaders;
do it alone, person to
person."*

— Mother Teresa



2C-B-Fly Survey • Energy Control: Thin Layer Chromatography
Anticholinergics For Smoking Cessation • Boom Festival • Changa

LETTERS & FEEDBACK

I had never taken any psychoactive drugs before last weekend, and my first experience with oral cannabis (hash brownies) was a total nightmare. I started with too high a dose and went into a panic attack, thoughts racing, unable to string moments together into any kind of continuity, lacking any sense of a continuous "I", and terrified that I would forget to exist. The only thing that saved my sanity was that my pal had read enough Erowid reports and articles to immediately identify what was happening to me and act as an ersatz "sitter", even though he was under the influence as well. His constant time-checks, well-informed answers, and reassurances that I would return to normal were exactly what I needed. Erowid, I owe you my sanity. Keep up the excellent work.

— C.O.
Email to Erowid

My wife and I have found the information on your website very useful and helpful.

— K.T.
Erowid Member

Thank you for all that you do for the global community. Your resources are absolutely priceless. I'm sure your organization has saved countless lives from an entire spectrum of dangerous and deadly circumstances. Let's keep the momentum moving forward.

— P.B.
Email to Erowid

I was just told about this site. It's wonderful and I look forward to gaining more knowledge. Thank you so much!

— L.L.
Erowid Member

I am a Drug Prevention Specialist living in Kentucky. Thank you for such a logical website. The information in your website seems very accurate and candid. It is fascinating to read the experiences of individuals... the good and the bad.

— NEAL
Email to Erowid

Thank you so much for your efforts! I always refer people to your website when they want to try a new drug but aren't sure about it. What you do is so essential to our society. Congratulations on finally receiving NPO status.

— M.B.
Erowid Member

You are assigned reading in my class. Thanks!

— L.M.
Erowid Member

If it weren't for Erowid, I'd still be huffing paint!

— A.L.
Email to Erowid

I had an unfortunate occasion once to need to send information from Erowid along with the paramedics as they transported a dear friend to the hospital because of a bad drug interaction. Although it was a frightening experience, I was so grateful to have access to accurate information about a rather new recreational drug. I was sure the medical professionals in my medium-sized town would not be familiar with this substance, so it gave me some peace to know I could help them do their jobs. Ultimately this meant better, safer health care for my friend. Thank you for that.

— H.H.
Letter to Erowid

Thanks for the consistently thorough work on your site. What an invaluable reference!

— A.L.
Email to Erowid

I would like to extend a personal thank you for the information you provide. Though the subjects covered within are certainly not for everyone, having a centralized source of information for those who would responsibly use the knowledge is paramount for continued research.

— N.F.
Email to Erowid

I think this site does a very good job at bringing an objective opinion about a very controversial issue.

— N.K.
Email to Erowid

Thank you very much to the crew at Erowid. Your site is a valuable tool in the search for true freedom.

— J.C.
Email to Erowid

The following is an example of the rare strongly negative feedback sent to Erowid. Although we usually correct spelling and punctuation, since the writing quality is fairly typical of this type of response, we decided to present the letter verbatim.

The people who run this site and honestly think its okay to have possession of drugs and go by the 4th amendment stating its unconstitutional to be searched without probable cause is stupid. fucking dumbasses like you are what cause this country to have problems. don't you have better things to do than to run a site that tells kidsfucking kids about drugs? get a real life man. why don't you contribute something good from your life rather than this lame fucking website? everyone who is a part of this site doesn't deserve to be in a country like ours. all u do is abuse the system for your fucking lame piece of shit website. how would you feel if you knew some 12 year old kid wanted to get high and came across your site to find out what to take and died from it? [...]

— S.T.S.
Email to Erowid

Send correspondence to:
extracts@erowid.org

Please include your name, title, and city/state/country of origin to be published with your letter. Letters may be edited for length and clarity.

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EROWID CENTER is a non-profit educational organization working to provide free, reliable, and accurate information about psychoactive plants, chemicals, practices, and technologies.

The information on the site is a compilation of the experiences, words, and efforts of thousands of individuals including educators, researchers, doctors and other health professionals, therapists, chemists, parents, lawyers, and others who choose to use psychoactives. Erowid acts as a publisher of new information and as a library archiving documents published elsewhere. The collection spans the spectrum from solid peer-reviewed research to creative writing and fiction.

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<http://erowid.org/donations/>

Past issues can be read online at:

<http://erowid.org/extracts/>

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Know Your Body
Know Your Mind
Know Your Substance
Know Your Source

Recent News & Updates

Thomas Lyttle (May 5, 1955 – Sep 5, 2008)

Erowid was saddened to learn in September that Thomas Lyttle had passed away at age 53; cause of death is unknown. Tom was editor of the periodical *Psychedelic Monographs & Essays*, of which he published six issues between 1985 and 1993. These books helped to keep the flame of information alive when publishing on the topic of illicit drugs had slowed to a crawl during the “Just Say No” era. A “best of” collection of material from *PM&E* came out in 1994, and in 1999 he edited a new compendium, *Psychedelics Reimagined*, featuring writings by Timothy Leary, Hakim Bey, Jochen Gartz, and others. Over the years Tom contributed articles, interviews, and reviews to *The Entheogen Review*, *Heads*, *High Times*, the *International Journal of the Addictions*, and the *Psychozoic Press*. An avid bibliophile, Tom was a major contributor to David Goldstein’s Papers from the History of Drugs Catalog and Library, which contains over 12,000 hard copy articles on psychoactive drugs, dating back to 1860.

Tom was the first person to ask psychedelic luminaries to sign blotter art. Collaborating with Mark McCloud in the early 1990s, Tom asked Albert Hofmann to autograph 20 “Shields” blotters, which remain among the most highly valued pieces of blotter art to date. He next obtained Timothy Leary’s autograph on 250 sheets of “Roses”, and went on to get autographs by Ram Dass, Ken Kesey, Sasha Shulgin, and others, dramatically increasing the value of and interest in this art form. His article exploring the history of blotter art appeared in the *MAPS Bulletin* 14(1), 2004. Autographed blotter art has been a valuable fundraising tool for Erowid, and we are indebted to Tom for his innovative idea. ●

Tom Lyttle Character Vault:
Erowid.org/characters/lyttle_thomas

Timothy Leary Archives

Timothy Leary’s personal collection of correspondence, photographs, memorabilia, audio recordings, research papers, legal documents, newspaper clippings, and other artifacts and ephemera represents a fascinating record of one man’s remarkable career, as well as of the mid-twentieth-century counterculture and psychedelic movements.

Faithful to Leary’s wishes, the Futique Trust has been working towards the goal of digitizing his archives and making them accessible online in a searchable form. Organizing and scanning the collection began before Leary’s death in 1996. Since that time, under the aegis of the Trust, volunteers have converted numerous books and hundreds of hours of digital recordings. Some of the recordings are publicly accessible at Matrix Masters (matrixmasters.net/blogs/?cat=115), and other documents are being hosted by the Internet Archive (archive.org), to be publicly launched in November. The next step is the scanning of one-of-a-kind letters and personal documents.

The collection is currently preserved in 400 boxes in a storage facility in Northern California. The Futique Trust is seeking allies and sponsors interested in helping to fulfill this dream. For more information visit Learyarchive.com. ●



Psilocybin & Mystical Experience: 14-Month Follow-up

In July 2008 the *Journal of Psychopharmacology* published results of the 14-month follow-up evaluation of 36 volunteers who took part in a 2006 psilocybin study conducted at Johns Hopkins University. The study was designed to determine whether psilocybin experiences—provided via a double-blind experiment to drug-naïve, mentally healthy adults who had an ongoing spiritual practice—resembled spontaneous mystical experiences.

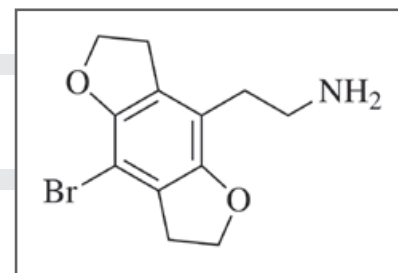
Follow-up testing measured the persistence of the sessions’ effects related to mysticism, spirituality, and personality. The main finding of this follow-up study was that the remarkable gains in several domains were robust and were still reported or measured more than a year after the original experience. At the 14-month follow-up, a large proportion of volunteers still seem to have received substantial benefits from participating in the study.

Fifty-six percent of volunteers rated the psilocybin experience as being among the five most personally meaningful experiences of their lives, 67% rated it as one of the five most spiritually significant experiences of their lives, and 64% indicated that the experience increased their sense of well-being or life satisfaction moderately or very much. Of the 22 subjects who were originally scored as having a “complete mystical experience” during their session, 21 continued to fulfill the criteria. A significant correlation was found between whether or not a mystical experience was scored during the psilocybin sessions and the high or low ratings of personal meaning and spiritual significance during the follow-up. The follow-up study represents an important extension of the original findings from 2006. ●

Erowid.org/extracts/n15/psilocybin

SURVEY PROVIDES NEW 2C-B-FLY DATA

by Jon Hanna



The first 2C-B-Fly experience report was submitted to Erowid in October 2005, and since then we have published only 15 reports about this rare psychoactive drug. However, Erowid crew members were recently at an event where about 30 people reported taking 2C-B-Fly. For most (if not all) of them, it was their first time consuming this substance. The Erowid crew recognized a unique opportunity to gather information on a compound for which very little human bioassay data is currently available. They whipped up a survey on the fly (as it were), asking those who had taken the drug to answer 14 questions. Twenty-six people completed the survey.

In response to a question asking how much they had taken, 21 respondents reported a dose of 15 mg (although one was careful to describe this as “15 mg ± 2 mg”, as the scale used to weigh the material was only sensitive to ±2 mg). Four people took other doses: 12 mg, 15–18 mg, 12 mg + 5 mg 65 minutes later, and 20 mg. One final respondent replied “1 dose?”, indicating that they didn’t know (or

remember) how much they took. All but one person consumed the drug orally (one took it rectally) and everyone reported experiencing effects.

Although one individual reported feeling an alert of first effects after only 8 minutes, for 13 people it took somewhere between 20 and 60 minutes before effects were felt. Most of the remaining people first noticed effects by 2 to 2.5 hours, although for one it took 3 hours before onset. Several people provided a more detailed chronology of effects. For example, one noted mild effects were felt at 1 hour, stronger effects were felt at 2 hours with the addition of nitrous oxide, the peak was around 3–4 hours, and a return to baseline occurred by 11 hours. That same person’s response highlighted an important way in which the hastily constructed survey was flawed: it failed to ask if and when any other psychoactive drugs might have been consumed along with the 2C-B-Fly.

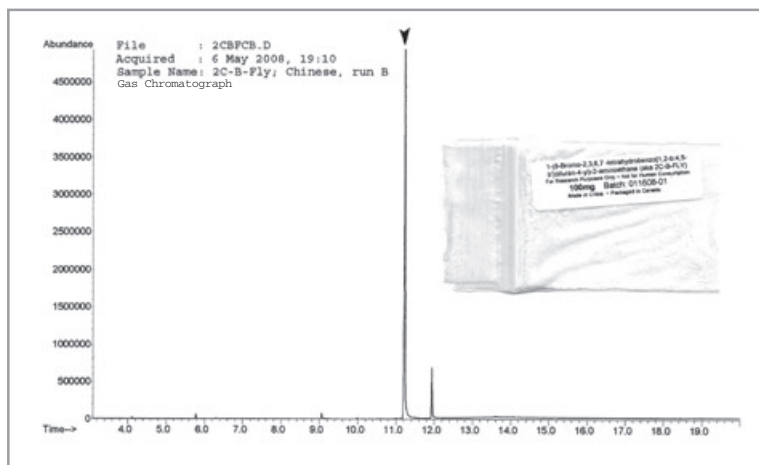
Polydrug consumption is commonplace among some users, and in retrospect Erowid learned that such consumption had occurred with several individuals who took part in these 2C-B-Fly bioassays.

Duration of reported effects ranged from 4 to 12+ hours (with one person describing that primary effects were felt for 9 hours but that some effects were still

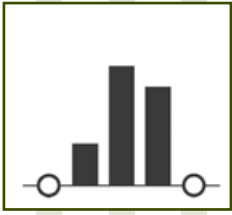
The Erowid crew recognized a unique opportunity to gather information on a compound for which very little human bioassay data is currently available.

felt until 20 hours following ingestion). A dozen people characterized the duration as 8 hours or less (with only three of those indicating 6 hours or less), while ten people listed the effects as lasting between 8 and 10 hours, and two said they lasted 11–12+ hours. One person did not respond to the duration question, and another vaguely remarked, “It lingered into the next day.”

Questions 5 through 10 asked participants about the types of effects they experienced and provided a scale of 1 to 5 for respondents to circle. Responses to this format seem to indicate the degree to which psychedelic enthusiasts feel comfortable with non-conformity in answering questions. Nine out of twenty-six respondents chose, on one or more questions, to select a number between the provided options (for example, 2.5, 3.5, etc.). This suggests that offering more resolution (1–10 for example) might have been beneficial. It may also be necessary to give members of the psychedelic community more explicit directions to choose a number from the scale provided when picking an answer, since having clearly defined values makes statistical analysis of the data easier.

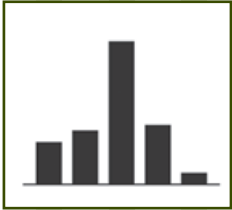


Several weeks following the event, GC/MS was run on a trace residue of the material, and it was found to be correctly identified and very pure.



5) HOW STRONG WERE THE EFFECTS?

In response to the question about strength of effects, no one answered “1” (weakest) or “5” (strongest). Three people gave it a “2”, two people gave it a “2.5”, eight people gave it a “3”, four people gave it a “3.5”, seven people gave it a “4”, and one person gave it a “4.5” (one person did not respond to this question). One respondent first answered using the Shulgin scale, and then converted that answer to the survey’s format.



6) HOW VISUAL WAS IT?

Responses to the question about the level of visual effects ranged from “1” to “5”, with the most common answer being a “3”, and approximately equal numbers of people giving it a “2” and a “4”. More people rated the visual effects as extremely low than rated them extremely high.



7) HOW HEART OPENING WAS IT?

Responses about the heart-opening character of 2C-B-Fly also indicated that most people thought it had moderate empathic effects. Answers were clustered mostly around “3”, with ten people considering these effects stronger than a “3” and six considering them weaker.



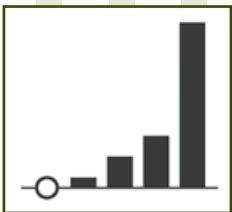
8) HOW MUCH BODY LOAD?

There was less consistency in answers to this question than for any other. Results were spread between reports of very low body load and fairly high body load. No one reported that the body load was extreme, while 31% rated it as higher than a “3” and 58% rated it as lower than a “3”.



9) HOW MUCH DID YOU LIKE IT?

Almost 90% of responses scored 2C-B-Fly as moderately likable or better (“3” or higher), with 60% rating it higher than a “3” on the 5-point scale.



10) WOULD YOU LIKE TO DO IT AGAIN?

This question resulted in the most unified response: 96% replied positively (giving a “3” or higher) as to whether they would like to try 2C-B-Fly again, with 84% giving a “4” or higher, and 64% replying with a “5”.

2C-B-FLY SURVEY

1. How much did you take?
2. How did you take it?
(oral / nasal / rectal)
3. Did you get effects?
(yes / no)
4. How long did it take for effects to start?
5. How strong were the effects?
(weak - 1 - 2 - 3 - 4 - 5 - strong)
6. How visual was it?
(weak - 1 - 2 - 3 - 4 - 5 - strong)
7. How heart opening was it?
(weak - 1 - 2 - 3 - 4 - 5 - strong)
8. How much body load?
(little - 1 - 2 - 3 - 4 - 5 - lots)
9. How much did you like it?
(little - 1 - 2 - 3 - 4 - 5 - lots)
10. Would you like to do it again?
(no - 1 - 2 - 3 - 4 - 5 - yes)
11. How long did it last?
12. What did you like best?
13. What did you like least?
14. Describe:

Flying

An Experience with 16 mg 2C-B-Fly

by *Jet Fuel*

It was the spring when a large group of friends decided to try 2C-B-Fly together. It took two hours to come on. My partner and I looked at each other at the two-hour mark and thought, "Do we notice anything yet?" It took going to our own room, without the stimulation of other people and loud music, to feel it come on. As we lay next to each other in the sweet quiet of our bed we had sensual interactions. We felt a gentle onset of closed-eye visuals taking over our inner space. Music was also enhanced, as we explored more of our sense of touch. After having sex, we joined the group again and noticed that, along with this substance being fun in a one-on-one setting, at this dose it is good for social interacting as well! My partner laughed and laughed as he talked to a friend. We carried on for hours in this manner. After about ten hours, people started coming down and going to sleep. It was a very enjoyable experience; it felt good in the body, and the next day we both felt great.

This is one of my favorite compounds. We did it again several months later at the same dosage. This time, three of us decided to conduct a new experiment: we insufflated 15 mg of 5-MeO-DMT eight hours after we had ingested the 2C-B-Fly. We all experienced a "battle" of the two substances ten minutes into the onset of the 5-MeO-DMT. Two of us had to decide to surrender to the 5-MeO-DMT, and we had beautiful experiences of heart-opening fluidity, feeling the interconnectedness of the universe. The third person said that the 5-MeO-DMT was "a buzz kill". Although none of us would recommend this combination to anyone, we were happy to run the experiment and discover that these two compounds seem to fight for dominance—at least they did for these three people. The 2C-B-Fly came back after 25 minutes, and even after eating some food, the entire experience lasted for about twelve hours. The same good feeling in the body during the experience, and good feeling the next day, was repeated. I would love to have more such experiences with my dear psychonautic family. Two female friends say that they have had multiple orgasms on 2C-B-Fly, so there is clearly more fun to be had! ●

BEST EFFECTS

Effects offered by a number of people as the "best" qualities of the experience included: the visuals (6 people), open communication (6), body sensations/response (5), happiness (3), energy (3), a clean/smooth high (3), and mental focus (2). Some other effects mentioned as "best" included empathy, camaraderie, thoughtful repose, dreamy headspace, lack of stimulation, and the ability to sleep afterwards.

WORST EFFECTS

Aspects of the material that were liked least by respondents included gastrointestinal distress (6 people), the slow onset of effects (5), inability to sleep afterward (3), headache or fuzzy-head the next day (3), lasted too long (2), and the effects kept coming and going (2). Other negative effects mentioned included feeling antisocial, an edgy come-on, difficulty functioning, and assorted body load issues such as stomach growling, muscle tension, and numbness.

SUMMARY

It is clear that the survey itself, as well as the approach taken toward presenting the survey, were not ideal due to the circumstances. If a questionnaire is created in advance and discussed with participants before they bioassay a compound, greater attention could be paid during the experience to the sort of things that the questions address, allowing for more accurate answers.

Clocking the effects at regular intervals and noting specifically what time the compound was consumed would be helpful. With these 2C-B-Fly bioassays, it is worth pointing out that most people consumed the drug late in the evening and stayed up all night, and this may have affected some people's biorhythms, making it more difficult for them to sleep once the effects had concluded.

Including a question about gender might allow insight into whether males or females are more likely to experience certain types of effects. Future surveys should always ask age and weight.

As previously mentioned, the biggest oversight in the 2C-B-Fly survey was the failure to ask what additional drugs or supplements people may have taken before, during, or after they took the 2C-B-Fly.

In these 26 people, 2C-B-Fly produced a wide range of effects from similar doses. For a few people 15 mg was highly psychedelic, for others only moderately so. But overall, the large majority seemed to enjoy the experience enough to want to try it again. ●

Dosage: Twenty Minutes of Pure Erowid

An Experience

by Asbjørn P.

I AM A LONG-TIME USER of Erowid, and recently decided to donate. This was the first time I had ever donated to anything except for the occasional change in collection cans, or to street beggars. The following is an experience report of sorts, but with an unusual substance. That substance is Erowid.

After a recent trip to Norway to visit relatives, I had an opportunity to talk a little about psychoactives and Erowid with Anne, a drug abuse counselor I met at a party. I was happy to inform her about Erowid, and even though I could only show her the copy of *Erowid Extracts* that I had brought along, she was very intrigued and seemed to think it was a good idea. She asked me if I thought Erowid contributed to increased drug use, to which I replied that I did not, and I found her to agree with me. Mind you, this is a professional who has more or less exclusively dealt with people experiencing negative effects from drug use, and as such should have a strong negative bias. Yet she didn't say a single negative thing about Erowid, or the validity of providing accurate information.

I also suggested that she recommend it to her colleagues and co-workers, so do not be surprised if the Erowid site receives marginal increased traffic from a particular rural area in Norway.

Baseline

Preloading consisted of a grand three-course meal from extremely fresh and quality grown foodstuffs, 25 cl of wine and ~8 grams of dark chocolate. Dosage was about twenty minutes of pure Erowid-related discussion.

T+00:00: We are out in the hot afternoon sun on the patio at a farm located in northern Norway. After inquiring what she does for a living, I ask Anne if she knows what Erowid is. The words come out before I can reflect on what I am about

to do—almost as if I had carelessly chosen to insufflate or smoke an experimental mind-altering drug—and my emotions for the milliseconds before her reply fluctuate broadly. She replies, “No”, and my anxiety subsides; I had feared a pre-biased reply, a negative vibe forming, and a general worsening of the set and setting, which had been quite good prior to my question.

I do not recall exactly the next few sentences uttered between us. While I found it difficult to articulate what Erowid was, I remember stressing how the information contained within was independent, strongly referenced, from a variety of sources, up-to-date, and substantial.

My next clear memory was a change in setting, as the crowd on the patio did not appeal to us when it came to dissecting psychoactives and their pitfalls. We relocated to the kitchen, a spacious area directly connected to the main dining area. It was not big, just open and flowing with a lot of indirect sunlight.

Peak

T+00:05: My pulse is elevated, I'm sweating, my mouth is dry. I have a general feeling of alertness, stress, euphoria, and a sense of being in connection with the universe.

At this point I excuse myself to retrieve my copy of *Erowid Extracts* from the car outside. I experience a warm glow as I walk the short distance to the car, and when I retrieve the *Extracts*, it is as if I'm holding a tangible piece of cosmic destiny. So many events had unfolded to allow me to possess this copy of *Extracts* at this precise moment in time.

I show it to Anne, who reads the headlines; I give her a short break-down of each story inside, and make sure to point out the articles that cite references, to assure her they are not just rants. Somehow I anticipate a negative reaction, yet she never

once reveals a bias against anything that I am telling her or showing her.

T+00:10: My pulse is mostly back to normal, but vivid afterimages are present, along with some euphoria and stress. We are discussing some specific psychoactives. Anne is basically of the opinion no one should do drugs for any reason, yet the people who choose to do so are not diminished in any way. This is something which I believe makes her good at what she does; if she looked down at her clients, they would probably not be able to gain positive effects from sessions with her. Sensing that she's not judgemental allows me to open up a little about my prior experiences with psychoactives, but I do not feel comfortable sharing everything, as I am not looking for counseling.

T+00:15: I'm mostly back to baseline, except for some interesting feelings of conflict about what to divulge regarding my own experiences and views, and how to extract as much of her own experience and views as possible. Some elevated pulse at times, some feelings of fatigue. The trip is pretty hard on my body, but rewarding mentally.

This experience helped me in many ways. It showed me that professionals in certain lines of work can still harbor unbiased attitudes towards psychoactive drug use, and I realized that it is sometimes my own preconceived notions that need adjustment (or banishment) and not always everyone else's.

All in all this is a substance with great potential, which needs to be spread as much as possible. Trust that Anne is not the last professional I will refer to this excellent site, and as soon as money allows, I plan to renew my membership early. After all how far does \$33 go when airmail postage is involved? I have nothing but the utmost respect and love for everyone who helps make Erowid possible. ●

THE TEAFÆRIE THE TEAFÆRIE THE TEAFÆRIE

...and not a moment
too soon!

When I found out that my husband was going to be away at an overnight bachelor party, I was thrilled to pieces. I'd finally have the house to myself for long enough to get some serious tripping done.

A thorough examination of my lunch box revealed that I had a bag of mushrooms and a capsule of MDMA left over from Burning Man, a tab of acid of indeterminate provenance, *Salvia divinorum*, DMT and 5-MeO-DMT, pot, and a few assorted research chemicals that I was largely unfamiliar with. I selected the E and the fungus, figuring I'd stick to basics. I also prepared a bit of the cannabis, but the herb is such a staple in my household that I almost don't count it as a drug.

The only dilemma was that I didn't really have any way to weigh the mushies. I eyeballed the bag and estimated it to be about four grams, give or take. Maybe more give than take. I'm a tiny little thing, and I knew that whatever it was, it was more than enough. Mentally, I shrugged. The ecstasy would buoy my set, I reasoned. I'd be fine. I filed a flight plan with a friend (like a good girl) and set about my business, excited about the upcoming adventure.

All was as it should be in hyperspace for what seemed like quite a long time. The Universe was doing what it does and the Færie was surfing it handily, lucidly hallucinating (say that ten times fast) and inventing some awesome new yoga moves. All was as it should be, that is, until I decided to turn some music on.

I selected the "Re-Evolution" track by Terence McKenna and The Shamen, set it to play, and turned my attention back to the Vortex. Presently, however, I started to notice something rather odd: the same series of events repeating themselves over and over again. I was so far gone that it took me a few iterations, if it was only a few iterations, to catch on to this phenomenon; but once I realized that this was happening, it became the focus of my awareness.

The sequence went something like this: Terence McKenna's inimitable voice is heard saying "...and not a moment too soon!" I suddenly become aware of myself and take stock of the situation. Didn't I already hear that line? I remember thinking this before, and notice that I'm breathing in the same pattern as I did the last time. Oh shit, I'm caught in a time loop! (Thought that before, too!) How many times has this happened? Is it really happening over and over, or is it just a glitch in the Matrix? (Think of something new, dammit!)

Terence says something about "...the end of the world..." Uh oh, now I remember. Here it comes again! Then the whole thing repeats: Terence's voice is heard saying "...and not a moment too soon!" I suddenly become aware of myself and take stock

of the situation.... Wash, rinse, repeat. I truly have no idea how many times I cycled through. Then, in a new twist on the game, the scenario started to play itself out in different parts of the room! Terence McKenna's voice is heard saying "...and not a moment too soon!" I suddenly become aware of myself and take stock of the situation. Didn't I already hear that line? I remember thinking this before, and notice that I'm breathing in the same pattern as I did the last time. Oh shit, I'm caught in a time loop! (Thought that before, too!) How many times has this happened? Oh wait! I was on the sofa before, and now I'm under the table! Is it really happening over and over, or is it just

a glitch in the Matrix, or am I getting bleed-through from nearby alternate dimensions? Yes! It must be multiple variations of the same moment! I have to figure out which one of them really "happened" in my home dimension so I can get off at the right stop.

Terence says something about "...the end of the world..." Uh oh, now I remember. Here it comes again!

To my eternal credit (or perhaps to Dr. Shulgin's credit) I managed to maintain a sense of humor about the whole thing. Yep, there I was, all alone in the house, once again a perfect poster child for the campaign to promote the use of the digital scale. Typical. Hilarious, really. If only my friends could see me now...

Finally, be it luck or skill or fate, my native intelligence rearing its foggy little head, or an act of mercy by whatever powers that may be, I stumbled upon the answer to the riddle:

I had accidentally put the track on repeat.

That explains everything, I've accidentally put the track on repeat! (I've thought this before.) I've been falling into a reverie whenever I hear the "end of the world" line, and coming back into what passes for normal consciousness at the very end of the track, just before the voice says "...and not a moment too soon!" All I have to do is... Uh oh, now I remember. Here it comes again!

Over and over, I figured it out. Each time, I lurched a few more precious feet in the rough direction of the computer that was masterminding my insanity. Eventually, heroically, I managed to pull the plug out of the wall. I'd passed the test. Time obligingly resumed its normal flow, and after a brief but passionate victory celebration, so did the Teafærie. And not a moment too soon!

I've since acquired an accurate scale; you should, too! And learn to laugh in the face of the impossible. When the head and the heart are both working in your favor, there isn't much reason to fear. —*Teafærie*

Oh shit, I'm caught in a time loop! ... How many times has this happened?

A CURIOUS CURE:

Anticholinergic Smoking Cessation Therapy



by Lux

When an Erowid crew member announced that he was going to try a scopolamine and atropine treatment to help him stop smoking cigarettes, we were surprised to learn that psychoactive levels of these delirium-inducing drugs would be given in an outpatient setting. We later learned that a physician friend of Erowid worked at a clinic administering the treatment to patients, and another friend had tried the treatment three times. It was clearly time to dig into this curious cure.

Tropane Alkaloids

A number of plants in the Solanaceae family (*Datura* spp., *Brugmansia* spp., *Atropa* spp., and *Duboisia* spp.) contain the tropane alkaloids hyoscyamine, atropine, and scopolamine, which induce delirium and hallucinations in sufficient doses. Growing wild in many parts of the world, with some cultivated for their striking blooms, they are notorious for causing intense intoxication and for their use by young, naïve seekers.

Erowid has published hundreds of first-time experience reports with solanaceous plants, although few take them

a second time. Media sources regularly report on incidents where people who have ingested them end up hospitalized. While powerfully psychoactive, their effects are widely experienced as too unpleasant (or considered too dangerous) to give them much of a following.

Nonetheless, tropane alkaloids have been valuable as entheogens and medicines for thousands of years. Smoking cessation therapy is one of their newer applications. Currently, several clinics in the United States offer smoking cessation treatments employing scopolamine injections, some of which also include atropine and/or an antihistamine, followed up by additional scopolamine in tablets or patches.

Pharmacology and Effects

Scopolamine and atropine are similar to one another in action and effects, though scopolamine is 7–8 times more potent.¹ Both are anticholinergics that blockade acetylcholine receptors in the brain, and prevent neurotransmitters (the brain's chemical messengers) from binding at those sites.² They bind to the muscarinic receptors, but show little

activity at the nicotinic receptors, the other acetylcholine-based receptor type.²

Depending on dose, scopolamine and atropine can produce delirium lasting anywhere from 3–24 hours or more, during which vivid hallucinations are common. Unlike the visuals experienced with serotonin-affecting psychedelics like LSD and mescaline, tropane alkaloid hallucinations often seem so substantial that they cannot be distinguished from reality. Physical symptoms include dry mouth, blurred vision, and dizziness.

History and Medicine

Theophrastus, a student of Aristotle, wrote about the hallucinogenic effects of *datura* in the fourth century BCE.³ The plant also appears frequently in Hindu and Buddhist religious art and literature,⁴ and has likely been used in Indian ethnomedicine for centuries.

The Persian physician Avicenna (980–1037 BCE) described *Datura metel* as a narcotic medicine.⁵ *Datura innoxia* has been consumed as an entheogen by Native Americans in the southwest United States since at least 1200–1250 CE.⁵ The Aztecs,



Datura innoxia flower, Photo by Scruff

No Craving Whatsoever

by Scruff

I decided to get serious again about quitting smoking, after a 27-year, pack-a-day cigarette habit, when I learned I had Chronic Obstructive Pulmonary Disease. I've been part of the Erowid crew for a long time; in the first two years that the Experience Vaults were online, I was the second most active report reviewer, after Fire. I had a particular interest in reviewing *datura* reports, and have grown *datura* plants in my garden for a long time.

My doctor had previously mentioned a clinic that featured a "stop smoking shot", so I visited their website. When I read that scopolamine was a constituent of the injection, I was more excited than I'd ever been to quit smoking. I mean, really, I thought... a controlled *datura* alkaloid experiment? Sign my silly ass up!

who referred to *D. inoxia* as *toloache*, used it as a fever remedy.⁵ *Brugmansia* is employed in South America as an entheogen, and some species are included as admixtures in ayahuasca.⁶

In addition to producing visionary effects, scopolamine and atropine are approved by the FDA for diverse medical uses. Atropine was introduced to western medicine in the early nineteenth century by British soldiers who learned of its use in treating respiratory disorders in India.⁷ It has since been used as an asthma treatment, along with scopolamine and various other anticholinergics.⁷ Atropine is considered an “essential medicine” by the World Health Organization for its use as a pre-operative sedative, a poison antidote, and in ophthalmologic procedures.^{8,9} Scopolamine is available in transdermal patches to treat severe motion sickness, nausea, and dizziness.

Anticholinergics and Smoking Cessation

The use of scopolamine and atropine for smoking cessation has not been approved by the FDA. However, as both compounds have been approved for other conditions, they may be prescribed “off label” for this use.

In the 1950s, atropine was found to counteract some of the deadly effects of anticholinesterase nerve agents such as sarin gas by blocking the muscarinic receptors.¹ Using a similar logic, Glick et al. noted in 1970 that scopolamine may inhibit

nicotine’s addictive effects by blocking its site of action.¹⁰ Scopolamine, atropine, and nicotine all affect acetylcholine receptors. Scopolamine and atropine primarily block the muscarinic receptor subtypes while nicotine acts primarily on the nicotinic receptor subtypes.

An exploratory animal study found dose-dependent decreases in the self-administration of tobacco smoke in two rhesus monkeys that had been administered scopolamine; however, scopolamine’s effect of increasing thirst may have contributed to the decrease in smoking.¹⁰

In 1986 a pilot study examined anticholinergic therapy in 500 human patients for a twelve-month period.¹¹ Dr. Kirk Voelker, an advocate of the therapy, explains the theory for nicotine withdrawal that informed the pilot study:

Bachynsky’s [1986] paper [...] suggested that there was competitive inhibition between nicotine and acetylcholine for the nicotinic receptors. [Chronic nicotine use thus leads] to an increase in acetylcholine stores in the brain. When the patient quit smoking, this excess of acetylcholine in the brain caused some of the physical effects of withdrawal. Bachynsky suggested that it took about 7–10 days for

these acetylcholine stores to get back to normal. Thus the “hump” of physical withdrawal was in the first 7–10 days.¹²

In Bachynsky’s theory, using anticholinergics to block the muscarinic receptors should shield them from excess acetylcholine, and thereby prevent physical withdrawal. In the pilot study, during their out-patient visits, patients were initially given intramuscular

An exploratory animal study found dose-dependent decreases in the self-administration of tobacco smoke in two rhesus monkeys that had been administered scopolamine...

injections of 0.2 mg atropine and 0.2 mg scopolamine. Five minutes later they were given two subcutaneous injections totaling an additional 0.2 mg atropine and 0.2 mg scopolamine, plus 10 mg of the antipsychotic chlorpromazine.¹¹ For the 13 days following their injections, patients received oral and/or transdermal anticholinergics.¹¹ 86.8% of patients were smoking-abstinent at two months, and 39.8% remained non-smoking at one year—higher than expected success rates for smokers using “the average smoking cessation program”, Bachynsky claimed.¹¹

This study was completed prior to the widespread use of bupropion (Zyban) and varenicline (Chantix) for smoking cessation. Research into the

When I made an appointment, they asked me to arrange for someone to pick me up from the clinic. They made me wait nearly two hours, during which I smoked at least eight cigarettes... it was kind of creepy, with everyone who was waiting for treatment smoking like fish. It was fun to watch the different people ahead of me as they left the clinic after their shot.

During the session, a doctor gave me three injections—one IM and two subcutaneous under each ear. I could hear the fluid going under my skin during the injection. The principle drugs in the cocktail are scopolamine and atropine, although other drugs are sometimes included as part of the initial injection, depending on the needs of the person seeking treatment.

Upon leaving, they made me use the ramp: “No stairs!” I danced a jig out to the car. On the way home, I had the most unusual hallucinations and time displacements I’ve ever had. I mostly slept during the

ride, but I would awaken suddenly every five or ten minutes and I’d be in another time. Still in the same town, but seven years old and with my parents on our way to my aunt’s house, or 19 and heading somewhere after a Grateful Dead show. I had six or seven very real moments like that. There were one or two that I couldn’t place in memory, in which I felt older. These moments would last a minute or two and then I’d pass out again.

I got the shots around 1:00 pm and regained minimal self-motivated functioning at about 7:00 pm, but the effects were strong until morning. After the initial shot in the doctor’s office, the treatment required that I take 0.2 mg of scopolamine (Scopace) twice a day, orally. I was prescribed two doses each day but I’d guess on the average I took 3–5 doses a day, because I enjoyed the effects. I was supposed to do the follow-up therapy for 7–10 days; I did three weeks, with the Algonquin coming-of-age ritual in mind.

effectiveness of newer pharmacotherapies at 13 months shows the rate of continuous abstinence was 10.3% for placebo, 14.6% for bupropion, and 23% for varenicline.¹³ Depending on the form (transdermal patch, inhaler, gum, sublingual tablet, intranasal spray), nicotine replacement therapy abstinence rates range from 14 to 24% after one year.¹⁴ These figures are consistent with Bachynsky's claim.

Glick et al. 1970 and Bachynsky 1986 are the primary peer-reviewed studies supporting anticholinergic smoking cessation therapy.¹⁵ However, the authors of the 1970 monkey study caution that their results may not be generalizable to humans, and the 1986 pilot study has methodological problems, such as failing to use a comparison/control group. It should also be noted that about three years after the 1986 paper was published, its author was sentenced to just over ten years in jail for insurance fraud,¹⁶ and his medical license was revoked.

Two additional smoking cessation studies have reported results similar to Bachynsky. One followed 45 subjects and found a one-month success rate of 76%.¹⁷ The researcher holds a patent on the technique¹⁸ and is a primary shareholder in a clinic that administers the therapy. Another provider, the Welplex Stop Smoking Clinics, conducted a study of 200 patients with either a 78% or 88% smoking cessation success rate at 60 days (there is a discrepancy in the numbers provided in their report), and a 56% success rate at one

year.¹⁹ Such results are encouraging, but reports lacking peer review that have been conducted by those with a direct financial stake in the success of a treatment should be viewed with caution.

Although the procedure appears to be relatively safe, delirium is sometimes a problem. In one case, a 59-year-old man who received anticholinergic smoking cessation therapy suffered delusions of persecution by his family. He was hospitalized after contemplating suicide and the murder of his wife.¹⁵ After discontinuing the oral anticholinergic regimen, his symptoms disappeared within 48 hours.

The Treatment Experience

The initial injections of scopolamine and atropine produce psychoactive effects such that patients are instructed not to drive. Forgetfulness, euphoria, intoxication, and hallucination are reportedly common. However, those effects usually subside within the first 12 hours. While the two weeks of follow-up medication may be sufficient to push some patients off baseline, it does not generally produce the kind of delirium associated with acute solanaceous plant intoxication.

Nicotine's physical withdrawal symptoms include depressed mood, irritability, nicotine craving, and anxiety.²⁰ The two people we talked with who had undergone this treatment and the doctor who worked at a clinic offering the procedure all agree that it effectively

eliminates physical withdrawal symptoms. Since the acute psychoactive effects of the treatment subside after 12 hours, it is clear that relief from withdrawal symptoms is not simply due to the effects being masked by a mental fog, though the pharmacological mechanism behind this relief is still a matter of speculation.

Mind or Matter?

It is possible that the psychological effects brought on by the initial psychoactive dose of scopolamine and atropine contribute to the quitting process. Such experiences are not unknown; the modern use of ibogaine to treat opiate dependence involves physiological and psychological elements that can be difficult to disentangle.^{21,22} In a related example, Leo Zeff reported losing all desire for cigarettes after a psychedelic therapy session in which he addressed his smoking.²³

A doctor who worked in a clinic offering anticholinergic therapy for smoking agreed:

How can we ever fully differentiate between pharmacologic and psychodynamic intervention? I believe both aspects were strong determinants of successful outcome. I would *take advantage* of this mythos of the *strong and powerful medication*, telling patients that we know these medications well and use them safely; that they *do* make you feel funny, and that is the

That was enough to get some psychoactive effects at night, but not especially pronounced. I had dry mouth and dilated pupils during the day, and usually felt very otherworldly and detached. I was easily distracted and unable to return to the present task, which is unusual for me.

I was successful in quitting for twenty months. I'm smoking again now, but much less than ever before. The best I'd done previously was three months and every day was a torment. It was actually quite remarkable at first—no craving whatsoever, unlike any other method I'd tried, including a disastrously unpleasant reaction to Zyban that didn't reduce my cravings at all. Thinking about the fact that cigarettes are available nearly anywhere I go didn't trigger the "I need one NOW" response, the way it did with other methods of quitting. ●

Three Tries and Still Working on Quitting by Wonderama

I heard about scopolamine/atropine therapy from Scruff. After the first time I tried it, all was well for five weeks or so, then I started to get depressed. I'm prone to depression to begin with, and smoking cessation triggers it. I wasn't on antidepressants at the time, and I was pushing suicidal, so I started smoking again; the depression lifted within a couple of days.

The second time was about a year later, and that failure seemed to boil down to bad timing. My stepfather passed away three weeks after I was treated, so I picked it back up. I was, however, prepared for the depression, and had gone back on antidepressants (150 mg Effexor daily) a couple of months before I was treated.

The most recent time, I was, again, prepared with the meds. What

therapy working; that even before they were pharmacy medicines, the plant sources were healing medicines for native peoples.²⁴

Whether the primary cause is physiological or psychological, this doctor is convinced that scopolamine treatment can be effective in helping smokers quit.

Some patients came in through ads, but most came in because they knew someone who successfully stopped smoking at the clinic. You take a 60-year-old southern gentleman with a 90-pack-a-year history (who tried to quit every way he could and always failed) who *suddenly stops smoking after one two-hour visit without much difficulty*; that is pretty damn impressive. It is enough to make one almost evangelical.²⁴

In the accounts that accompany this article, an anticholinergic smoking cessation program appears to have been effective in eliminating nicotine withdrawal symptoms. Yet, like many smoking cessation therapies, it does not curtail the long-term, ingrained behavior patterns and stresses that can lead people back to smoking months or years after treatment. Nevertheless, these powerful deliriants may constitute a useful approach for some patients who need help getting started with the quitting process. ●

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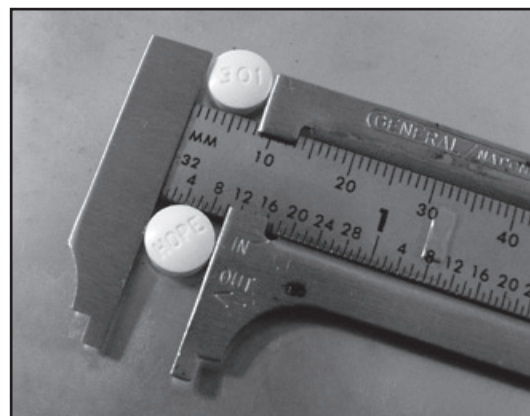
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I've found, and what I think would have ultimately caused me to fail with the prior treatments (if other stuff hadn't precipitated my failure), is that the treatment obliterates all physical withdrawal, but doesn't set one up well for breaking the habit and dealing with the psychological stuff that needs attention.

As far as any psychoactive effects, I mostly had euphoria, along with very blurry vision and memory loss while on the scopolamine. Once the medicine runs out, the psychological stuff hits me hard.

I was interested in the treatment at first because it took away the most challenging part of the withdrawal, and I did it again because I really thought that's where I'd have the most problem.

I'm still working on quitting. After a lot of thought, I've decided that the nicotine patch is what works best for me. My most successful quit was for nearly a year, via nicotine replacement therapy; I was still getting nicotine for a good long time, which gave me one less thing to stress about and allowed me to focus on dealing with the other stuff, which is clearly where things fall apart for me. ●



Scopolamine (Scopace) Tablets, Photo by Scruff

EROWID IN PORTUGAL

At the Boom Festival 2008

by Jon Hanna and Sylvia Thyssen

THE BOOM FESTIVAL began in 1997, and for the past decade it has drawn an international crowd every other year to camp and dance at the beautiful lakeside setting of Idanha-a-Nova, Portugal, near the Spanish border. Although rooted in psy-trance, these days Boom features four music stages with assorted live and recorded styles, plus food and merchandise vendors, exhibition gardens, a radio station, a daily newspaper, and more.

At this year's Boom, held August 11–18, Erowid provided a psychoactive drugs information booth, staffed by Jon Hanna and Sylvia Thyssen, with the help of volunteers Pedro and Zariat. We looked forward to hearing what sort of questions festival attendees might have over the course of the week, as well as posing our own questions to such a varied crowd, since dozens of countries were represented at the gathering. Jon had attended the Boom twice before as a speaker, so he had a good sense of what to expect from the event.

We were picked up at the Lisbon airport by Pedro, who gifted us with a bottle of wine (for which Portugal is renowned) and took us on a tour of the city. Pedro is a pharmacy student at a Lisbon university, and we picked his brain a bit about his country's illicit drug culture. We were aware that Portugal's laws regarding the possession of small "personal use" amounts of prohibited drugs were fairly liberal; Pedro confirmed that this was true and provided some specifics. He also filled us in on the cannabis scene. The finest hash is referred to as "Pakistani" and average quality is "Moroccan"; however, it all reportedly comes from Morocco. We remarked that a similar situation exists on the West Coast of the United States, where brown or seed-containing weed is occasionally called "Mexican" even if it didn't originate from that country. Pedro related that lower-quality hash in Portugal is sometimes adulterated with assorted "extenders" (there are rumors of wax and shoe polish). He also explained that cannabis buds are rarely sold in Portugal, although a few people grow plants for personal use. Over the course of the week at Boom, we found Pedro to be friendly and helpful, eager to both learn and to share information.

Erowid at Boom

Our booth was located within the Kosmicare cluster, an evolution of Sandra Karpetas' Ground Central Station project, which began at Boom as a small psychedelic first-aid dome. Having viewed its humble beginnings in 2002, and volunteered as a facilitator in the slightly larger CosmiKiva tent incarnation of 2004, Jon was particularly impressed by the expansion of Kosmicare this year. Led by psychologist David Lameiras in consultation with Karpetas and a strong team of volunteers, many of whom drew experience from previously working at Boom, the Burning Man Sanctuary project, and/or other gatherings, Kosmicare exceeded our expectations and set a new standard for what is possible with psychedelic crisis support at festivals.



"Kosmicare" spelled out in stones helped make it easier for the emergency helicopter to locate the crisis dome. Teepees in the background were used by Erowid, Energy Control, and Check-In, Photo by Zariat

The Booth

Situated a stone's throw from the main Kosmicare dome, our information table featured a laptop loaded with the Erowid website and a few reference books, so that we could help people seek answers to their questions. We shared a teepee with two European risk reduction groups. Portugal's Check-In provided printed flyers and pamphlets with an assortment of basic information about common recreational drugs. They also distributed earplugs, condoms, personal-use insufflation straws, and spray-mister bottles. But from an Erowid perspective, the highlight of the event was witnessing the on-site thin layer chromatography (TLC) drug testing conducted by our other teepee-mates, the Spanish organization Energy Control (see page 16). This service permitted festival-goers to learn more about substances they were considering ingesting. In some cases the test confirmed a substance's identity, while in other cases the test indicated that a substance had been misidentified. In those situations where a substance was adulterated, the test could often provide the identity of the adulterants.

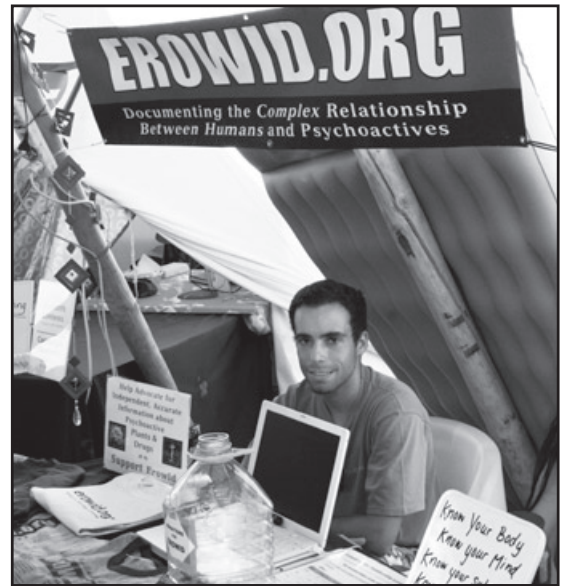
Over the course of the week, we helped explain the TLC process to visitors, encouraging them to get testing done on their drugs when it seemed appropriate. Excellent assistance from Pedro aided

communication with some of our colleagues, and he helped to interpret aspects of the event that weren't immediately apparent to those who only spoke English.

“What do you know about LSD-17?”

Visitors' questions frequently transformed into short experience reports, where we got to ask questions of the person giving the report. While illuminating in some respects, these interactions reinforced an underlying reality of working on the Erowid project: many questions related to psychoactive drugs are complex, difficult to answer definitively, and they often require deeper research, consultation with a medical professional, or some degree of speculation.

A few questions we got were puzzling. For example, where did the idea to ask about “LSD-17” originate from? But other than the occasional unusual question, people generally were interested in practical things, like the time until onset, dose, and length of action for various drugs.



Erowid volunteer Pedro, Photo by Jon Hanna

One woman initially inquired, half in jest, “Can I ask you about anything and you'll know the answer?” Variations of this question were repeated throughout the week, pointing to a common sentiment: the desire for certainty. She went on to describe that she takes paroxetine (Paxil) for depression, and she experiences a terrible comedown following her MDMA consumption. She was wondering whether she should quit taking MDMA. We described that SSRI drugs generally attenuate the effects of psychedelics, but we also looked on the site for specifics related to interactions between Paxil and MDMA. This helped remind us to discuss issues such as potential mood disruption in the days following MDMA use, which can be a more serious problem for those already suffering from depression. It is easy to forget such points when answering diverse questions off the cuff, which is one reason why having access to the Erowid website is so valuable.

One of the more surprising exchanges was with a French woman who worried that if she tongue-kissed her boyfriend several hours after he had taken LSD sublingually, she might get unwanted LSD effects. Through talking with her, we learned that a “common” rumor in her peer group is that you shouldn't pet a dog if you're on LSD, because this will transfer the LSD effects to the dog!



The lakeside view from our teepee, Photo by Jon Hanna



LSD microdots, actual size
Photo by Jon Hanna

The Persistence of Myth

The “problem child” at Boom was a red star-shaped microdot swathed in speculation and frequently sold as mescaline. This microdot was also hawked as LSD and less commonly as “2C-B”, “MDMA”, or a “DO_x compound”. After the festival, we even located an image of one of these stars misidentified as 2C-T-7 on Wikipedia.

Early in the week a sample was tested via TLC, and it was identified unambiguously as LSD. In at least one case where the correct identity of the substance was known, it was reported as containing “160–170 µg” per star. A Dutch visitor who supported the substance’s identity as LSD claimed that two tablets had been quantitatively tested in a lab in the Netherlands: one was 68 µg and the other 72 µg.

While no one reported how much they were charged for a dose of red star “mescaline”, other examples of prices for this microdot included one as “DO_x” for €10 (about \$13.50 USD), one as “MDMA” for €9, and seven as LSD for €50.

The idea that these microdots were mescaline was so widespread and persistent that Energy Control posted flyers at their booth explaining that they were actually LSD. Erowid has busted the myth of mescaline microdots before in the article “Myth Debunking: Mescaline in Microdots” (*Erowid Extracts*, May 2001;1:10), so we were well prepared for handling the topic. But we were less prepared for how strongly people wanted to believe that it was possible to fit an active dose of mescaline in a

microdot! One dealer of dots presented the theory that the mescaline could fit into such a tiny tablet through a process of “super compression”. Then a couple insisted the tablets had effects that were distinctly different from LSD. And in a truly strange story confounding the issue, a man described how he knew “over 100” people who took the red stars and just went to sleep.

All of this is a testament to the power of the mind and the complex recipe of dose, set, and setting. Lacking basic information about what constitutes an active dose of mescaline, a person is susceptible to the sales practices of an unscrupulous or uninformed dealer looking to make a buck. In a worst-case scenario, folks buying “substance A” with expectations of obtaining “substance B” might find themselves in dangerous or unpleasant situations. Fortunately, with LSD sold as mescaline, the psychedelic properties of both substances are similar enough that consumers would likely have an experience that was roughly what they expected.

Even people who know what constitutes a typical dose of mescaline may be so excited about having obtained this relatively rare drug that they overlook basic rules about the physical laws of mass and volume while clutching their miniscule tablets. The case above with the couple who was astonished to learn that the microdots they had taken were LSD nicely illustrates how strongly expectations can shape experience.

More Test Results

Aside from misrepresented mescaline, Energy Control’s analyses showed that there was fake and adulterated MDMA and cocaine on site as well. While 87% of the crystalline MDMA and 71% of the MDMA tablets available were found to be pure, only 12% of the putative cocaine tested had cocaine as its sole psychoactive ingredient, and 37% contained caffeine and lidocaine, with no cocaine at all. Of the forms of LSD submitted, 79% was blotter, 15% was liquid, and 6% was microdot. Everything sold as LSD that was analyzed actually contained LSD. Other samples obtained at the event tested positive for 2C-B, amphetamine, ketamine,

4-OH-MET, DMT, DPT, methylone, 4-Acetoxy-DMT, DOC, AMT, bromo-dragonfly, and mescaline. (Yes, some real mescaline actually *did* show up in one sample of powder, although it had been cut with an unidentifiable adulterant.)

Risk Reduction Worldwide

Aside from the opportunity to learn about the approach taken by Energy Control, we interacted with representatives from a few other risk reduction groups (“risk reduction” seems to be preferred to the term “harm reduction” among those we spoke with), giving us a tantalizing taste of these non-English drug information efforts. We learned about a (new to us) harm reduction gadget that some groups distribute: a booklet of papers that can be rolled up to make disposable personal-use sniffing straws (since sharing straws can potentially spread Hepatitis C, as well as cold and flu germs). A Czech group working under the umbrella of Centrum Protidrogové Prevence a Terapie receives 90–95% of its funding from the government. Active for the last five years, this group sees a lot of alcohol and methamphetamine use at parties, and some MDMA and LSD. They offer Marquis reagent testing and distribute earplugs and info pamphlets. Check-In staffers explained that harm reduction is currently being promoted in Portugal by the government. They would like to be doing TLC, and have applied for a grant from the Ministry of Health. It was heartening to hear about actual and potential government funding for risk reduction initiatives in other countries, since such support is largely lacking in the United States. Erowid would love to learn more about foreign information dissemination organizations, and link to such groups.

A Safe Space

While all this discussion and testing was happening in the teepee, next door in the main Kosmicare dome, the rubber was hitting the road. Festival attendees having difficult psychedelic trips found their way into the care of dedicated and skilled volunteers who created a safe zone for these people to navigate their challenging mind states.

The enormous dome was well-appointed with comfortable areas for people to lie down, reorient, and recover. A psychiatrist was on call and at least one psychologist was usually on site. The dome could support a large number of people, and an annex teepee nearby was specifically dedicated for particularly intense cases. If a visitor was agitated enough to disrupt others in the main dome, this person was moved to the teepee where he or she could get more focused attention in privacy.

What distinguished Kosmicare from other festival crisis support that we've seen was the third degree of safe space that it offered. If a person who arrived at the dome was having a strong experience and his or her belief system seemed compatible with a shamanic context, then volunteers could take this person to a nearby structure—a cross between a Native American kiva and a teepee—designed to support a spiritual journey. Built from straw bales plastered with adobe, this private space for individual journeying stayed unusually cool and dark even during the sunniest of days. The lighting created a moody, dramatic context that contrasted with the typical festival setting.

The thoughtful organizing, experienced staffing, and assortment of educational and crisis services provided by the groups clustered within the Kosmicare area was a substantial improvement over past Boom festivals, and magnitudes better than anything we have witnessed at other events. The efforts of everyone involved

in this aspect of the festival are to be applauded; in particular the event producers are to be credited for allotting the funding necessary to provide all of these important services to festival attendees. After years of effort and learning, Boom has created a model worth emulating at other events.

Major Health Issue

The largest failings of the Boom Festival, both in 2008 and in years past, have been related to food poisoning. Although we brought our own pure drinking water and hand sanitizer, we were both among the hundreds—if not thousands—of people who got sick over the course of the week. Unless you had brought your own, hand sanitizer and soap were scarce, and sinks for washing were few and far between. The event was about 20% oversold, which impacted an already strained infrastructure. Combine this situation with a multitude of flies swarming around the composting toilets and food stalls, and illness brought on by contaminated food was dismayingly common.

Applied Psychonautics

In the middle of the week, we stepped away from our booth to facilitate a workshop at the Liminal Village, which hosted a series of lectures, films, and a visionary art gallery. Titled “Applied Psychonautics: Cultivating Skeptical Thought”, we planned to talk about practical approaches for dealing with psychoactive drugs, raise questions about common misconceptions and myths, and stimulate discussion. Due to the types of questions that we had been getting earlier in the week, and because English was not the native language for most of those in attendance, we instead took a “back to basics” approach with our presentation.



Kosmicare center garden display, Photo by Zariat

About 200 people showed up for our workshop. We focused on the Erowid motto, “Know Your Body, Know Your Mind, Know Your Substance, Know Your Source”, as well as other critical-thinking principles. At one point we decided to ask about *changa* (or *xanga*), a smokable psychoactive preparation that we had first heard about a few days earlier (see page 18). We were curious if the crowd knew anything about this substance, and a workshop attendee provided everyone with some valuable data. The topic was revisited in a funny way later in the week, when someone visiting the Erowid booth told us that he had heard we had given a talk all about *changa*! No, we did not give a talk about *changa*.

“Erowid is my Bible”

Two different people made this bold proclamation over the course of our week at the festival, and countless others had kind words to say, thanking us for Erowid's existence. It was heartening to hear how useful people find the Erowid site. However, the general enthusiasm for psychoactive drug consumption coupled with the lack of basic knowledge we observed among many festival-goers, reinforced how important it is for Erowid—while staying abreast of new research and keeping the website updated—to develop documentation that explores fundamental principles regarding how to best relate to psychoactive drugs, while stimulating visitors to think critically and ask good questions. ●

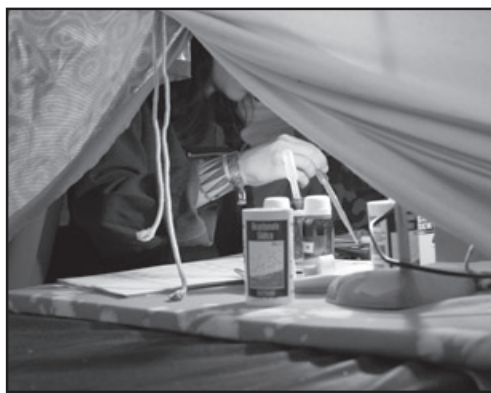


Kiva, Photo by Jon Hanna

ENERGY CONTROL

TLC and Other Risk Reduction Approaches

by Sylvia Thyssen and Jon Hanna



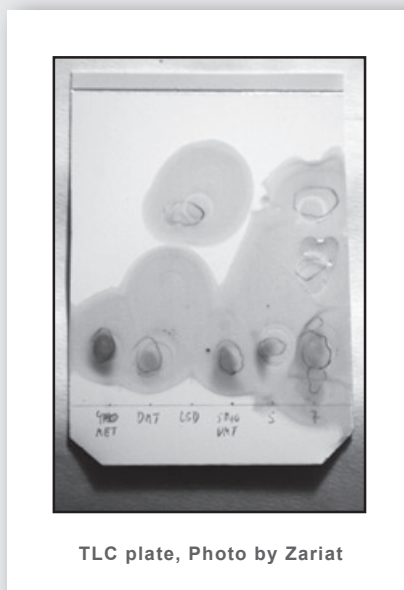
A unique service at the 2008 Boom Festival was the thin layer chromatography (TLC) conducted on site. Erowid interviewed three key members of the Spanish group Energy Control (energycontrol.org) that provided this drug testing service, to ask them about their work.

Evening at the Boom Festival: A woman wonders whether the tablet in her hand really contains MDMA. At the Energy Control booth she speaks with a volunteer who photographs the tablet, then obtains a tiny scraping, assigns it a unique number, records what the woman thinks it might be. The sample is turned over to a three-person team sequestered in a tent equipped with dozens of drug reference standards, pipettes, solvent, an ultraviolet light-box, gloves, and a laptop. The woman is instructed to come back in about an hour to obtain the results of the test...

OVER the course of the week, 303 drug samples were analyzed for their probable contents. The “cocaine” was in most cases fake or adulterated. The “2C-B” was usually 2C-B, but sometimes it was MDMA. The “speed” was rarely an amphetamine compound at all. And when misidentified tablets were brought in more than once, such as the “MDMA” tablets that contained mCPP or the “mescaline” microdots that contained LSD, Energy Control projected their images onto a screen along with information relating what they actually contained. The primary method used for their analysis was thin layer chromatography (TLC).

TLC is a low-cost, qualitative analysis method that involves using small specially prepared “plates” (usually plastic or glass), that are coated on one side with a very thin layer of sorbent (such as solid silica gel). The sample to be analyzed is dissolved in a solvent or solvent blend, a small spot is placed near the lower edge

of the plate, and the bottom of the plate is set in unadulterated solvent. Chemicals are wicked up the plate via capillary action causing spots of chemicals to creep slowly upward. Different chemicals move at different rates. If a sample contains multiple chemicals, it will separate into



TLC plate, Photo by Zariat

multiple spots as it moves. After putting a microliter of a known reference standard (of say LSD), next to a microliter of a sample (of say a microdot), the plate is checked in around 20–90 minutes to compare the two spots by color, size, and distance traveled. If the sample matches the reference standard, the sample has likely been identified. In some cases a developing reagent, UV light, and/or heating of the plate is required to make the spot(s) visible.

In order to identify chemicals using thin layer chromatography a pure reference standard must be available for each chemical, though the amount of the reference chemical used for each test is tiny. Energy Control staff members explained that a one-milligram standard (of MDMA for example) from a chemical supply company can be used for hundreds of tests, as only a microliter containing one to four micrograms is required for each test. To analyse an unknown sample, only about three micrograms of a chemical needs to be present.

A few conditions must be met for Energy Control to run TLC testing at an event: a relatively isolated and quiet space conducive to concentration, enough volunteers, a sufficient power supply, and the appropriate ambient temperature so that the testing procedure works properly (during hot days, evaporation can be a problem; if it gets too cool, the methanol system can become saturated with water from the atmosphere).

Move Over Marquis

Energy Control was founded in 1997 by Josep Rovira, a social worker at a Barcelona drug treatment center. Since those early days, the group has provided Marquis reagent colorimetric drug testing at parties as part of its broader risk reduction mission. The Marquis test is a very limited method that can not positively identify a chemical, but is sufficient for ruling out the presence of some substances. If the test comes up negative, it's near-certain that none

of the targeted substances are present in the sample. However, a positive result only indicates that a target substance *might* be present, since dyes and other chemicals such as opiates, LSD, and MDMA can all cause similar color changes. Another limitation of using the Marquis reagent for drug testing is that unscrupulous dealers have responded to such tests by producing Ecstasy tablets that contain very small amounts of MDMA—enough to present a positive test result but not enough to produce the desired psychoactive effects.

After observing the Basque risk reduction group Ai Laket!! (ailaket.com) doing thin layer chromatography in a van outside a party, Energy Control staff members Mireia Ventura and Iván Fornís started their organization's TLC program in 2005. Ventura, a pharmacy PhD student, and Fornís, a biologist, quickly became engrossed in mobilizing the project. Ventura explains: "I thought it would be great to combine my technical background with drug risk reduction, and that TLC analysis results could help professionals respond appropriately to the shifting conditions surrounding illicit drug use." Ventura and Fornís formed an alliance with a drug analysis laboratory in Barcelona, where Fornís learned the TLC process and adapted it to Energy Control's needs. The lab provides them with the reference standards, and it can run GC/MS on samples selected for further scrutiny and quantification. In return, Energy Control shares the TLC data

that they collect with the laboratory. Although a chemistry background is not required to conduct TLC, their team is comprised of two chemists, two lab technicians, two pharmacists, and a computer technician.

Energy Control started out by distributing information directly to users at parties. As their work grew, they developed two-day trainings for primary care physicians about emerging patterns of drug use. In their effort to propagate risk reduction information, they began providing alcohol and tobacco education in secondary schools, including programs for teachers and parents. They also survey users by email, both for internal use and to collect data for public health efforts.

Public Perception

Spain is considered to have a progressive drug policy among European countries, but of course Energy Control's work has its detractors. "Many times, reporters on television and in the papers suggest that we are promoting drug use", Nuria Calzada, the group's coordinator, remarks. "It's the same people who think that if you give a condom to a young person, you are inciting them to have sex. So if you give away clean straws for safer sniffing, you are inciting them to sniff drugs. But Energy Control has the approval of educators, social workers, health care workers, psychiatrists, and the young people themselves. A lot of professionals have a good impression of Energy Control, and see us as experts

on new drugs and new contexts for drug use. But not everyone; it's different in different provinces." Because of their reputation for doing good work, Calzada explains, "We are funded by Spain's Ministry of Health, with smaller grants from the governments of Catalonia, Andalusia, Ibiza, Majorca, and Madrid."

The term "risk reduction" (Spanish: reducción de riesgos; French: réduction des risques; Portuguese: redução de riscos), is preferred over "harm reduction" in some European countries.

Meeting Various Clients' Needs

Although Energy Control has done TLC at three events in 2008, they prefer to conduct testing at their Barcelona office, where they can collect and analyze samples before, rather than during, parties. In an office setting their staff has plenty of time to speak with users and impart information in a comfortable environment. Calzada, who is a psychologist, points out that their testing service is useful for parents, whom they are increasingly seeing in their office. "Parents who have found a substance in their child's room may bring it in for testing and to ask about its effects." Specific visiting hours have been established for concerned parents.

Making a Difference

In promoting risk reduction over the last decade, Energy Control's staff and volunteers have trained people throughout Spain. They are developing a protocol for their TLC process with the dream of training others in the procedure and spreading the service internationally, so it can be made available at centers and festivals worldwide.

A team conducting TLC creates a feedback loop that can transform the sociology of an event. In a context where street drug users lack discernment about what they put in their bodies, shedding light into the black box of illegal substances can be revelatory for people unaccustomed to knowing the identity of the drugs they obtain on the underground market. Since its inception, Energy Control has noticed a rise in users' consciousness about the risks of illicit substances, at least in Barcelona. By making testing available, the group is helping to foster the development of critical thinking about consumption. "Providing non-judgmental, fact-based risk reduction services builds trust", Ventura reflects, "And it is important for young people to take the first step, to ask questions and obtain more information." ●



EC's Nuria Calzada, Mireia Ventura, and Iván Fornís
Photo by Jon Hanna

got changa?

by jon hanna

One of the more interesting topics that came up at the 2008 Boom Festival was a “new substance” called *changa* (or *xanga*), which I had not heard of before. One British visitor described changa as a chunky brown plant-based smoking blend. He was unsure about its legality, but said it was sold “under the counter” for £20–30 (\$27–40 USD) per gram in Camden headshops. He characterized it as being “opiate-like, with the teeniest creep of DMT-like effects”, and said he had heard of people mixing DMT into it. He mentioned a particular quality of electricity that occurred in one’s hands after smoking it, which he called “changa fingers”. Later, in response to us scrawling “Got Changa?” on our booth’s whiteboard, a fellow from Brighton showed us some. He said it combined DMT with a MAOI plant, which extended the DMT effect from 3–5 minutes to about 20 minutes. On viewing the changa, I noticed that it looked similar to a *Banisteriopsis caapi*-plus-DMT smoking blend I’d seen earlier this year in Basel. Energy Control ran TLC on a small sample, and it spotted positive for DMT. There were three other unidentified spots, one of which the EC worker speculated might be a harmala alkaloid due to its fluorescence (although without having reference standards on hand, he could not say for sure).

The composition of changa blends varies, but most incorporate *Banisteriopsis caapi* and DMT.

An Erowid contributor from Australia provided the following data: changa is largely produced in Australia, and blends vary in composition—they may contain several herbs at different concentrations, but most incorporate *Banisteriopsis caapi* (either leaves, or shredded stem-bark, or both) and DMT, which is usually extracted from *Acacia obtusifolia*. A couple of festival-goers brought out two different blends of changa for us to photograph.

Another Australian visiting the Erowid booth claimed to be the person who invented changa. He said it is generally 20% DMT by weight, sourced from *Acacia obtusifolia* or *A. acuminata*. This extract is deposited onto a smoking blend that usually contains 60% *B. caapi*, passion flower, mullein, and peppermint. The remaining 40% typically contains *Calendula officinalis*, *Justicia pectoralis*, *Nymphaea nouchali* var. *caerulea* (or another lily), and *Turnera diffusa*. He expressed that changa is best smoked from a bong, but that people commonly take 2–3 puffs from a medium-sized joint.

While these Australians were very knowledgeable, some changa dealers may not know what they are selling. For example, one buyer at Boom was told that changa is a legal blend of four herbs said to be in the “family of DMT and *Salvia*”. In most countries, changa can’t be considered legal, and none of its ingredients are in the *Salvia* family.

Numerous mentions of changa can be found online. Although there was no description specifically of what changa is on Erowid until this article, interestingly the earliest mention of the term that I could locate was within an experience report added to the vaults on June 29, 2005.¹ Additionally, in early 2006, two DMT smoking mixtures using *Banisteriopsis caapi*-based substrates (one from Australia) were described by Justin Case in *The Entheogen Review*, although they were not called “changa”.²

Changa is generally said to produce effects that are smoother and longer-lasting than pure DMT, a difference some believe is due to the MAOI alkaloids potentiating the DMT. One smoker remarks: “...the experience is a LOT like Ayahuasca and far more grounding and insightful than smoking DMT on its own. I find it extremely enjoyable, too. It’s gentler, less freaky, lasts longer, and yet it goes very deep.”³

Combining harmala alkaloids and tryptamines is nothing novel, with at



Changa, Photo by Jon Hanna

least hundreds of years of ayahuasca use, and a couple of decades of subcultural experimentation in the United States. In 1985, Gracie and Zarkov described their experiences with smoked extracts of *Passiflora incarnata*, *Peganum harmala*, and *Banisteriopsis caapi* in their paper “Three Beta-Carboline Containing Plants as Potentiators of Synthetic DMT and Other Indole Psychedelics”. In his 1993 book *True Hallucinations*, Terence McKenna related the effects of smoking *B. caapi* stem-bark while high on psilocybin-containing mushrooms. And in 1994, D. M. Turner wrote about combining an oral MAOI with smoked tryptamines in *The Essential Psychedelic Guide*. Despite such combinations not being new, the commercial availability of a DMT/MAOI smoking blend is a noteworthy recent occurrence.

How much MAOI could be contained in a few puffs of a changa joint? While the leaves of *Banisteriopsis caapi* generally have a higher concentration of harmala alkaloids than the vine, they nevertheless may only contain 0.28–0.7%, or about 3 to 7 mg of MAOI alkaloids per gram of dried leaf.⁴ Using one recipe’s suggested 50% *B. caapi* leaves plus 50% DMT (by weight), this adds up to only 1.5 to 3.5 mg of MAOI alkaloids in a one-gram joint—and changa is frequently diluted further with other herbs that don’t contain MAOI chemicals.

IN THE NAME OF SCIENCE



Rats Prefer Sweetened Water to Cocaine

An enduring fixture of prohibitionist literature is the claim that, given the option, animals will self-administer cocaine until they overdose or starve to death by selecting it in preference to food. Research supporting this contention frequently involves animals placed in unnatural conditions (isolated, immobilized, starved, etc.), and removing these stresses generally reduces cocaine self-administration.^{1,2}

Researchers have previously found that providing rats with sweetened water significantly reduced their voluntary cocaine intake,³ and a recent study has reported that rats overwhelmingly prefer water sweetened with saccharin or sucrose over cocaine.⁴ When presented with an either/or choice eight times a day, 94% of test rats selected the non-caloric sweetener saccharin over a “behaviorally effective” dose of cocaine (0.25 mg, i.v.). While it took the rats eleven days to develop a statistically reliable preference for selecting cocaine over nothing, it took only two days to develop a statistically reliable preference for saccharin over cocaine.⁴

According to the researchers, “the preference for saccharin sweet taste was not surmountable by increasing doses of cocaine and was observed despite either cocaine intoxication, sensitization or intake escalation—the latter being a hallmark of drug addiction”. Pointing out apparently contradictory findings from previous primate studies that offered solid pellets instead of sweetened liquids, the researchers speculate that important differences may exist between the research methods or could be a result of inter-species differences between rodents and primates. ●

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Few people smoke a gram of material alone. If a changa joint is split between three or four people, then each person is getting, at most, one milligram of mixed harmala alkaloids. Justin Case ended his description of this smoking blend with the statement: “The degree to which [*Banisteriopsis caapi* leaves] can prolong the effects of DMT must be experienced to be believed.” Could such a minuscule amount of harmala alkaloids really cause so much potentiation?

I asked Dennis McKenna of the Heffter Research Institute if he thought the trivial amount of harmala alkaloids likely to be present in most changa could possibly inhibit enough MAO to influence the DMT effects, and he replied:

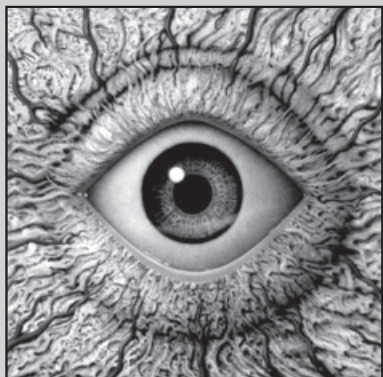
I am not too surprised that it works; because although the amounts of beta-carbolines being absorbed may be small, they are directly absorbed into the brain, and given their potency [...], there is probably enough to transiently inhibit MAO in the brain, temporarily partially inhibiting metabolism of the tryptamines.⁵

In his bioassays of snuffed 5-MeO-DMT, Jonathan Ott characterized 10 mg as his “threshold dose” of that tryptamine, and in three experiments he found this to be significantly potentiated when combined with 20, or 10, or 5 mg harmaline hydrochloride, “irrespective of the diminishing dosage of harmaline—that is, even the minimal dose was appreciably as effective as the maximal in this regard.”⁶ One might wonder if he would have found 2.5 mg an equally effective potentiator? Or half that much again?

Drawing conclusions based on different routes of administration (insufflated vs. smoked) can be problematic. Nevertheless, Ott’s snuff findings may provide additional support for Dennis McKenna’s speculations on changa’s method of action. Erowid looks forward to learning more about this intriguing approach to smoking DMT. ●

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THE ENTHEOGEN REVIEW

A RETROSPECTIVE

by Lux

After sixteen years at the leading edge of unauthorized research into visionary plants and drugs, the final issue of *The Entheogen Review* will be published later this year. Its editor, David Aardvark, granted an interview for this article.

In 1992, former English teacher and entheophile Jim DeKorne was busy researching *Psychedelic Shamanism*, a book that would soon become a milestone in psychedelic literature. To help gather information for his book, and to spark discussion regarding data that he had already come across, DeKorne started *The Entheogen Review* (*TER*), a self-described clearinghouse for “hard-to-find empirical data on growing techniques, extraction procedures, dose information and subjective results experienced by readers.”¹

As only a few pamphlets and small-press books touching on psychoactive substances were in circulation at the time, DeKorne believed that a well-researched source of information would be a valuable addition. In the inaugural issue DeKorne noted, “The season is long overdue to shed a little light on this topic and separate a few facts from what appears to be a limitless mythology.”¹ Inspiration for early issues of the publication came from sources such as the 1960s journal *The Psychedelic Review* and Thomas Lyttle’s *Psychedelic Monographs and Essays*. Later influences included *PIHKAL*, *TIHKAL*, and *Pharmactheon*.

During DeKorne’s six-year tenure as editor-in-chief, *TER* established a solid base of readers, some eager to share their own findings. Intrepid explorers described experiences with substances that were poorly documented at the time, including 2C-B, *Salvia divinorum*, and assorted ayahuasca analogs. One such enthusiastic subscriber was David Aardvark.

New Leadership

“Before taking over as editor, I had regularly corresponded with Jim DeKorne, and he had printed a few of my letters in *The Entheogen Review*”, Aardvark recalls. “That history between us gave Jim enough confidence in me to pass the torch.” Aardvark took over in 1998 when DeKorne decided to step down, and the publication quickly doubled in size. Aardvark shared DeKorne’s commitment to facilitating dialog in the psychedelic community. This helped make *TER* a platform for people to describe their own backyard research and bioassays. “Like Jim, I was interested both in learning and in helping other people learn.”

While the Internet was increasingly becoming a source of drug information (Erowid first went public in October 1995), most online data sources were unmoderated and unedited. In his first issue at the helm Aardvark lamented, “Because virtually anyone with a computer can post anything they want (without the benefit of editors or peer review), information found on the Internet is suspect by nature.”²

The commitment to careful editing of submissions distinguished *TER* from many other information sources. Aardvark critiques the penchant of authors like Adam Gottlieb, who penned several slim publications on the topic of legal highs, for passing along too much speculation. In discussing how smoking banana peels might get you high (it doesn’t), Gottlieb wrote: “[s]ome experts believe that combustion converts some of the banana’s chemistry into bufotenine...”³ Let the smoker beware!

Expert Assistance

DeKorne and Aardvark communicated with many experts to help answer some of the questions that came up. “I enlisted Keeper Trout as technical editor when I took over the publication”, Aardvark recalls. “Over the years we’ve received advice from Richard Boire, Jim DeKorne, Earth and Fire Erowid, Jon Hanna, Albert Hofmann, Terence McKenna, Jonathan Ott, Dale Pendell, Giorgio Samorini, Nick Sand, Sasha Shulgin, Rick Strassman, D. M. Turner, and Leander Valdes, just to mention a few of the more well-known names in the field.”

The psychedelic community attracts a large number of researchers, mind-hackers, and explorers who boldly experiment in botany, chemistry, and pharmacology. Yet due to prohibitionist policies, this subculture is often shrouded

in secrecy and anonymity. As a result, enormous amounts of important data are in danger of being lost. Jonathan Ott puts the problem this way:

What's the difference between the ethnobotany of the Ladakhis, and the ethnobotany of the Sacramento suburban residents? I mean, scientifically speaking, they're both valid subjects of study. And in fact, now we have this very thriving, active home experimentalist scene, of which *The Entheogen Review* is really one of the strongest elucidators, because that's where some few of these people come forward and talk about what they might have done.⁴

While the scientific data generated by this anonymous cadre of citizen-scientists and basement shamans is important, the societal phenomenon is interesting as well. Since its inception, *TER* has devoted pages to psychedelic culture and arts. Aardvark believes visionary art serves a unique role in documenting altered consciousness:

Art inspired by entheogenic voyages may evidence shared mental states, providing maps for inner space. Some mind states induced by entheogens may be protolinguistic; as such they would be ineffable through written or spoken language, yet visual art may allow their expression. Most traditional entheogen-using cultures

produce art depicting the territory accessed via psychotropic plants [...] and this has also been true in our own culture [...].

The diversity of content—first-person trip reports, scientific discoveries, art, music, and reviews of psychedelic conferences and cultural events such as Burning Man—all helped make *TER* a source of cross-pollination, relentlessly fascinating to the generalist. “People who never intend to manufacture LSD might still enjoy skimming a piece that relates a novel synthesis approach”, Aardvark notes. “People who don't believe in parallel dimensions may nevertheless find reported visions of ‘discarnate entities’ to be engaging.”

Spanning Eras

In its 16-year span, *The Entheogen Review* witnessed and documented deep changes in the cultural and political climate of the United States. Aardvark speculates that interest in altered states of consciousness may have grown during the life of *TER*, and certainly, access to information has changed dramatically. “A 2002 AltaVista search for the word ‘entheogen’ resulted in 3,000 hits; today the same search provided 702,000 hits. In 2002 ‘psychedelic’ returned 140,000 hits, and today it got 65,200,000 hits.” Another metric of that change is the explosion of interest in *Salvia divinorum*, which transformed during his time as editor from an obscure entheobotanical to a multi-million dollar industry, and

which is now increasingly banned across the United States.

Several prominent figures in the psychedelic world have passed away during the magazine's run, including Timothy Leary, William S. Burroughs, Terence McKenna, Humphry Osmond, Richard Evans Schultes, John Lilly, and Albert Hofmann. Aardvark notes that replacements do not seem to be on the horizon:

[S]o far no one particularly stands out in a ‘leadership’ position in the same way that Leary and McKenna filled that role. Perhaps this simply indicates that the field has reached a new level of maturity—one that supports many different voices and ideas, without requiring a solitary figurehead or spokesperson to rally the troops or inform the mainstream media. I'm optimistic about the future. ●

Read the full interview with David Aardvark at: Erowid.org/extracts/n15/er

References

1. DeKorne JB. “The Entheogen Review”. *The Entheogen Review*. Sep 1992;1(1):1.
2. Aardvark, D. “Welcome”. *The Entheogen Review*. Fall 1998;7(1):1.
3. Superweed MJ (aka A. Gottleib). *Herbal Highs: A Guide to Natural & Legal Narcotics, Psychedelics & Stimulants*. Stone Kingdom Syndicate. 1970.
4. Ott J. “Jonathan Ott Speaks... Part Two”. *The Entheogen Review*. Summer 1999; 8(2):62–73.

IMPORTANT *TER* ARTICLES

- “Plants Containing DMT” (AUTUMN 1992)
- “*Salvia divinorum*” (AUTUMN 1993)
- “*Mimosa* Active Without MAOI?” (SPRING 1999)
- “Terence McKenna Speaks...” (WINTER 1999)
- “Moving Into the Sacred World of DMT” (SPRING 2001)
- “Mushroom Cultivation...” (WINTER 2001)
- “Introducing The Moksha Method” (AUTUMN 2003)
- “Outdoor Mushroom Cultivation” (WINTER 2003)
- “DMT for the Masses” (AUTUMN 2006)

NOTEWORTHY BECAUSE...

- One of the earliest articles to mention the use of *Phalaris* grasses in ayahuasca analogs.
- The first published account of the “quid” method of ingesting *Salvia divinorum*.
- Early account on the oral activity of *Mimosa tenuiflora* (= *M. hostilis*) sans MAOI.
- Terence interviewed by J. Hanna and S. Thyssen, one of the last interviews he gave.
- A now-classic discussion of DMT by Infinite Ayes.
- Features a new technique for growing *Psilocybes* without using sterile procedures.
- Includes a simple psilocybin extraction process via precipitation by Yachaj Paye.
- Excellent article on growing mushrooms outdoors by Tyler D. Flyer.
- Simple DMT kitchen extraction tek for *Mimosa tenuiflora* by Noman.

The Distillation

The Distillation includes updates, statistics, and information that we hope will offer insight into the ongoing site additions, traffic, and projects currently underway at Erowid.

Summary

General Content Pages	14,209
Archived Site Pages	4,660
Experience Reports	17,898
References	7,003
Ask Erowid	551
The Erowid Review	205
Content Images	5,050
Visionary Art	1,966
Total	51,542

Erowid Files on Server	131,828
Erowid Disk Footprint	37.3 GB

Current Members	1,240
Daily Visitors	56,015

Content Details

General Content Pages	14,209
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Number of Substance Vaults	314
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Most Popular Substance Vaults (with change)

Cannabis (↔); Mushrooms (↑); LSD (↓); MDMA (↓); *Salvia divinorum* (↔); Cocaine (↔); DMT (↔); Morning Glory (↔); Oxycodone (↔); DXM (↑); Methamphetamine (↓); Ketamine (↔); Opiates (↑); Amanitas (↑); Datura (↑); Heroin (↓); Cacti (↑); Peyote (↓); 2C-B (↓); Amphetamine (↓).

Most Accessed Documents

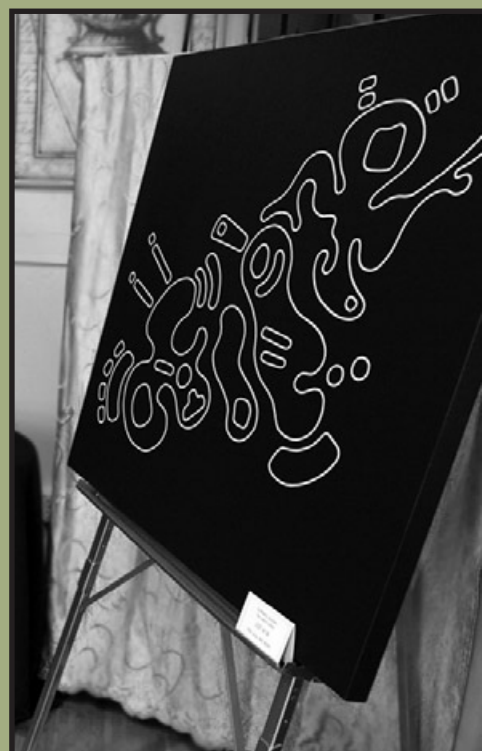
Drug Testing Basics; Mushroom Effects; LSD Effects; Cannabis Effects; MDMA Effects; Cannabis Drug Testing; Salvia Effects; Albert Hofmann; Mushroom Basics; Cocaine Effects; LSD Basics; LSD FAQ.

Erowid Center Gala Event

All photos by Paul Daley.



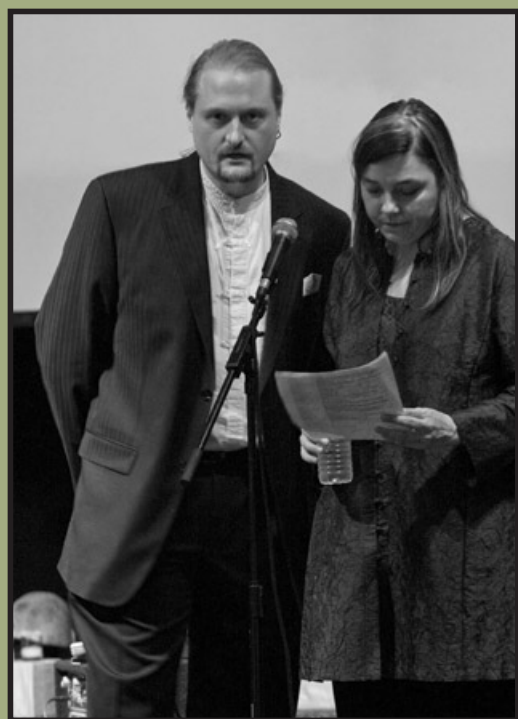
Zoë Keating's avant-cello set delighted.



Artist JwaTucker contributed to the silent auction an original painting, a framed set of Actual Contact cards, and blotter art autographed by Sasha and Ann Shulgin.



**Erowid Center Benefit Gala:
A Feast for the Mind and for the Senses**



Earth and Fire addressing guests at the Gala.



Erik Davis emcees the Gala event.

Experience Reports

Published Reports	17,898
Published in Last 6 Mo.	852
Fully Triaged Reports	23,378
Partially Triaged Reports	1,590
Un-triaged Reports	11,664
Viewed Each Day	103,828
Submitted Each Day	15
Substances Included	471
Active Triagers/Reviewers	33

Erowid Center Celebrates

Two fundraising events held in June and July kicked off Erowid Center’s new non-profit status. The June 21st Erowid Center Benefit Gala, held at San Francisco’s Broadway Studios, attracted attendees from as far as Australia and the United Kingdom. The event featured talks by special guests, a performance by cellist Zoë Keating, silent and live auctions, and an exquisitely catered dinner. As a fundraiser the Gala was solidly successful, raising more than \$30,000 for Erowid Center’s operating expenses (after event costs).

The most-bid-upon live auction items were a “Brunch with the Shulgins”, and a “Literature Pack” kindly donated by Michael Horowitz and Flashback Books, which included the rare *Les Champignons Hallucinogènes du Mexique* and *Nouvelles Investigations sur les Champignons Hallucinogènes* by Heim & Wasson, and issues #1–10 of the *Psychedelic Review*.

This event would not have been possible without the help of dozens of amazing volunteers who worked long hours to transform the venue into a stunning space; special thanks to these volunteers, to everyone who contributed auction items, and to event co-hosts Katherine Rochlin-Fenster and Jon Hanna.

The July 19th Seattle fundraiser and auction, An Evening with Tribe, was a sweet conglomeration of performances, presentations, and mingling. Hosted by Ra Young Chung and friends at Columbia City Theater, this 150-person event featured DJs and a riveting aerialist performance by Beverly Rose. Thanks to everyone who participated in Seattle.

Erowid Center is interested in partnering with allies in other cities such as New York, Chicago, and Atlanta to produce a series of smaller “meet the members” events in 2009. We send out updates about events through our e-mail announcement list, so make sure you’re subscribed if you want to keep informed. Erowid.org/general/announce

Image Vaults

Published Images	5,050	New in Last 6 Mo.	6
Image Vaults	277	Submitted Each Day	4.5
Viewed Per Day	50,183	Awaiting Processing	8,763

Morning Glory Leaf, Photo by Erowid



N,N-DMT Extracted from *Mimosa hostilis*, Photo by H_303

Erowid Essay in *Cato Unbound*

Fire and Earth Erowid were invited to write the September lead essay for *Cato Unbound*, the libertarian Cato Institute's online publication. From the *Cato Unbound* website:

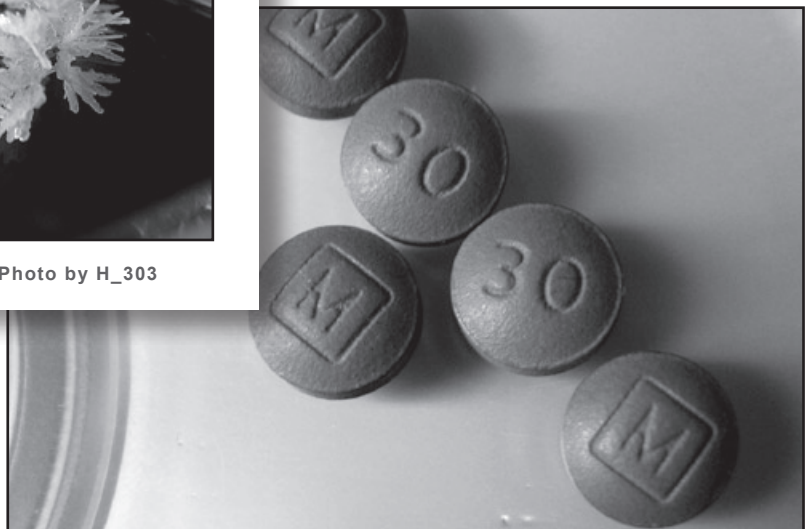
"Each month, *Cato Unbound* will present an essay on a big-picture topic by one of the world's leading thinkers. The ideas in that essay will then be tested by the comments and criticism of equally eminent thinkers, each of whom will respond to the month's lead essay and then to one another. The idea is to create a hub for wide-ranging, open-ended conversation, where ideas will be advanced, challenged, and refined in public view."

In their essay, "Towards a Culture of Responsible Psychoactive Drug Use", Fire and Earth posit that "psychoactive drugs are everywhere... everyone uses them... [and] they are not going away." They offer a list of "Fundamentals of Responsible Psychoactive Use", and make the argument that "in a world filled with materials and technologies that affect the mind, adults must have the robust education and accurate, pragmatic information necessary to help them take charge of their relationships with psychoactives [...]."

Commenting on their essay were Jonathan Caulkins, former co-director of the RAND

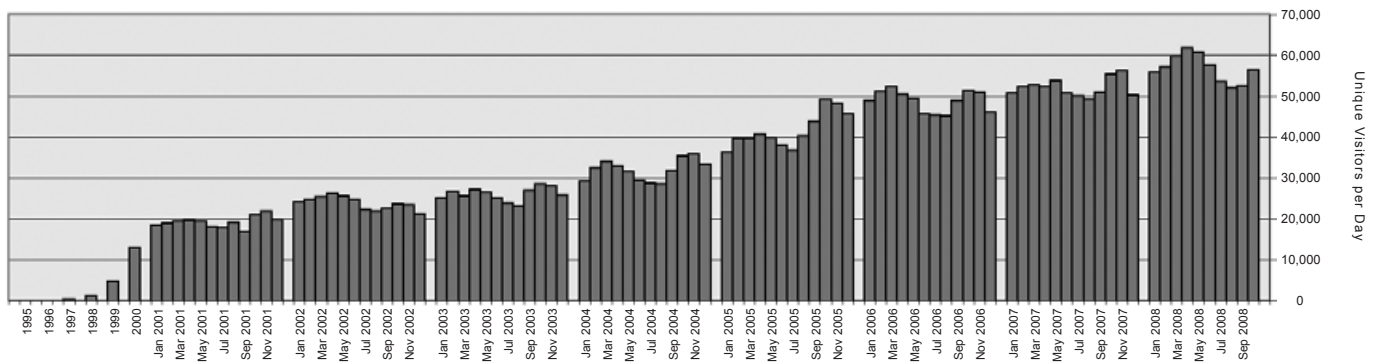
The Erowid Review

Published Reviews	205
Published in Last 6 Mo.	8
Viewed Each Day	2,199



30 mg Morphine Tablets, Photo by Dembow

Daily Erowid Visitors (1995–2008)



Corporation’s Drug Policy Research Center and Professor of Operations Research and Public Policy at Carnegie Mellon University’s Qatar Campus; Jacob Sullum, senior editor at *Reason* magazine and author of *Saying Yes: In Defense of Drug Use*; and Mark Kleiman, professor of policy studies at the UCLA School of Public Policy and Social Research and author of *Against Excess: Drug Policy for Results*.

While Caulkins, as first responder, diverted the topic away from responsible use toward legalization politics, the ensuing discussion was a fascinating mix of the participants’ respective specializations and offered a platform to lay out some of the complexities of Erowid’s founding principles. As their essay concluded, “Establishing a culture of responsible use—built on a foundation of unbiased, factual information—is essential to the practical long-term management of psychoactives in our society.” The article has been well received; we encourage Erowid members to read the series online.

Erowid.org/extracts/n15/cato

EcstasyData Summary

2008	Daily Visitors	3,626	Daily Page Hits	27,684
	Results Posted	16	Daily File Hits	331,333
BY YEAR	Results Posted		Testing Results (1999–2008)	
	2008	16	Total Results Posted	1,639
	2007	59	MDMA Only (37%)	602
	2006	46	MDMA + something (19%)	318
	2005	136	No MDMA (44%)	719
	2004	159	– Nothing	98
1996–2003	1154	– Unidentified	73	



Erowid Traffic Statistics

DAILY	Visitors	55,641	File Hits	3,751,814
	Transfer	23.53 GB	Page Hits	401,583
BY MONTH		Avg Daily File Hits	Avg Daily Page Hits	Avg Daily Visitors
	Oct 2008	3,751,814	401,583	55,641
	Sep 2008	3,594,306	413,164	52,386
	Aug 2008	3,503,308	377,779	52,048
	Jul 2008	3,573,805	393,789	53,658
	Jun 2008	3,617,894	407,733	57,503
BY YEAR	2008	3,829,051	424,637	56,643
	2007	3,559,761	439,501	51,979
	2006	3,025,185	409,796	48,443
	2004	1,799,694	405,528	31,241
	2002	1,206,855	283,541	23,042
	2000	462,000	126,000	12,000
1998	31,200	8,500	1,000	

Membership

Current Members	1,240
Recently Expired Members (0–6 mo.)	505
Older Expired Members (6+ mo.)	3,392
Members in the United States	867 (69%)
Members in Other Countries	397 (31%)
Countries with Members	37
Top Membership Countries	
USA (867); Canada (72); UK (68); Australia (55); Germany (21); Netherlands (18); Norway (13); Sweden (12); Switzerland (10); Ireland (10); France (10); Italy (9); Belgium (9); Denmark (9); Finland (6); Spain (6); Portugal (5); South Africa (5).	

VERBATIM

“The greatest pleasure in life is to do what people say you cannot do.”

—Walter Bagehot (1826–1877)

“What lies in our power to do, lies in our power not to do.”

—Aristotle (384–322 BCE)

“The search for happiness is one of the chief sources of unhappiness.”

—Eric Hoffer (1902–1983)

“The middle of every successful project looks like a disaster.”

—Rosabeth Moss Cantor (b. 1943)

“Some people are idiots and some aren’t. You have to acknowledge that and empower the good people to control the quality.”

—Jimmy Wales, Wikipedia founder (b. 1966)

“Many ideas grow better when transplanted into another mind than in the one where they sprang up.”

—Oliver W. Holmes, Jr. (1841–1935)

“A cigarette is the perfect type of a perfect pleasure. It is exquisite, and it leaves one unsatisfied. What more can one want?”

—Oscar Wilde (1854–1900)

“History is fables agreed upon.”

—Voltaire (1694–1778)

“The [nonprofit] sector is the natural home of nonmajoritarian impulses, movements and values. It comfortably harbors innovators, maverick movements, groups which feel they must fight for their place in the sun, and critics of both liberal and conservative persuasion.”

—John W. Gardner (1933–1982)

“The fight is never about grapes or lettuce. It is always about people.”

—Cesar Chavez (1927–1993)

“Since fear is mostly about ignorance, the best part is that it’s as temporary as you choose.”

—Christine Comaford (b. 1962)

“Language exerts hidden power, like a moon on the tides.”

—Rita Mae Brown (b. 1944)

ΨΥΧΗΣ
ΙΑΤΡΕΙΟΝ

[Healing-Place of the Soul]

—Inscription on the sacred library in the tomb complex of Ozymandias (Ramses II), at Thebes, as reported by Hecataeus of Abdera, a Greek historian of the early third century BCE.

“A writer is someone for whom writing is more difficult than other people.”

—Thomas Mann (1875–1955)

“It’s not getting any smarter out there, people. You have to come to terms with stupidity, and make it work for you.”

—Frank Zappa (1940–1993)

“I have never met a man so ignorant that I couldn’t learn something from him.”

—Galileo Galilei (1564–1642)

“The library connects us with the insight and knowledge, painfully extracted from Nature, of the greatest minds that ever were, with the best teachers, drawn from the entire planet and from all our history, to instruct us without tiring, and to inspire us to make our own contribution to the collective knowledge of the human species. I think the health of our civilization, the depth of our awareness about the underpinnings of our culture and our concern for the future can all be tested by how well we support our libraries.”

—Carl Sagan (1934–1996)

“What is more important in a library than anything else—than everything else—is the fact that it exists.”

—Archibald MacLeish (1892–1982)

“We are not afraid to entrust the American people with unpleasant facts, foreign ideas, alien philosophies, and competitive values. For a nation that is afraid to let its people judge the truth and falsehood in an open market is a nation that is afraid of its people.”

—John F. Kennedy (1917–1963)

“The best writing is rewriting.”

—E. B. White (1899–1985)

“Librarian is a service occupation. Gas station attendant of the mind.”

—Richard Powers (b. 1957)

“If there be time to expose through discussion the falsehood and the fallacies, to avert the evil by the processes of education, the remedy to be applied is more speech, not enforced silence.”

—Louis D. Brandeis (1856–1941)