The story of Mind Medicine Australia and the future of psychiatric treatment in Australia began inauspiciously enough. Surely no one on the streets of Tel Aviv a few years ago seeing a tour bus drive by would have suspected that a transformative movement was being conceived on it. Yet when a woman named Tania met a man named Peter on that bus, the ordinary was about to blossom into something extraordinary.

Tania de Jong and Peter Hunt were delegates on an Australian trade mission to Israel who hadn’t met before but became acquainted on the tour bus traveling to an event together. They noticed a degree of serendipity as they talked about what brought them on the mission to Israel, and it’s fair to suspect that both Tania and Peter began to feel the pangs of being smitten with one another. One can also suspect that those pangs began to intensify, at least for Peter, when at a reception at the Australian embassy, Tania, a professional soprano, performed a soul-stirring rendition of the moving ballad ‘Somewhere’ from West Side Story. I’ll let Peter take it from there. “It’s a beautiful song and as I listened, I saw another side of Tania.”

Beautifully understated, Mr. Hunt.

When the trade mission ended and Tania and Peter returned to their regular lives in Australia, their budding relationship was complicated by some considerable distance between them. Hunt is a retired investment banker and philanthropist who lived in Sydney, and de Jong lived in Melbourne where her own philanthropic and charitable activities are located. Yet that distance proved to be no match for their romance, and the two were soon living together and splitting their time between the two cities.

It is about at this point that the story of how Mind Medicine Australia began starts to accelerate. As the couple grew closer, they revealed to each other that they both had traumatic backgrounds. Hunt's father committed suicide when he was just 13, and de Jong is the daughter and granddaughter of Holocaust survivors. This is when Tania realized, with great wisdom, that if they worked together to heal from their traumas, they would strengthen their relationship in a powerful way. And eventually their quest for mutual healing and relationship building led them to the burgeoning field of psychedelic psychotherapy.

The history of psychedelics such as LSD, psilocybin (found in certain mushroom species), and mescaline (from the peyote cactus), to the degree in which it is known by most people, is considered much more for its cultural impact than its medical aspects. The thoughts that come to mind for most people are of the 1960s, when LSD in
particular became identified with the counterculture in the US and the explosive hippie and anti-war movements. Yet prior to the late 1960s, and actually beginning in 1938 when Albert Hoffman first synthesized LSD in a Swiss laboratory, there is a more meaningful history that took place behind the scenes and beyond public view. Extensive research in laboratories and universities of psychedelics led scientists to believe that a major breakthrough in the field of psychiatric medicine had been made. As the 1950s ended, the consensus opinion was that LSD would be an extremely effective treatment for alcoholism, and with that was the belief that research was just starting to scratch the surface of ways in which psychedelics could treat mental illnesses.

Yet, sad to say, that is when the days of great hope and promise ended. For reasons having nothing to do with science and medicine, and virtually everything to do with culture and politics, psychedelic research was outlawed. LSD and the other psychedelics were classified in the same category as hard drugs like cocaine and heroin, and with that the first phase of 20th century psychedelic history came to a close.

But fortunately, the story did not completely end in the late 60s. Unbeknownst to most people and almost clandestinely, research and clinical studies on psychedelics have been going on at universities and medical schools in the US and Europe for much of the past two decades. Psilocybin has been passed through Phase 2 clinical trials by the FDA, and there is a possibility that it may be approved for psychiatric treatments for depression in the next few years. How psychedelics have returned from the abyss and reached this level of approval by the US medical establishment is a story of how some scientists, believing that something of great value was lost when psychedelics were made illegal in the 1960s, made it a mission to regain and rehabilitate these substances for a new generation. And thankfully this mission has spread around the world, including in the Netherlands, where Tania de Jong was able to arrange a treatment in a private clinic for herself and Peter Hunt.

Not that they didn't have reservations. “I’d never been drunk; I’d never done drugs and although this seemed like a safe way to lose control, these drugs had been so stigmatized I was afraid my brain would be damaged,” Tania said. Peter approached their adventure with a greater sense of calm, even though it was Tania’s idea to begin with. “Tania had done the research and she wanted us to do this. I went with no preconceptions.”

What were their results? As Peter Hunt succinctly put it, “You get taken and are in a different plane of reality, very present and conscious, but de-identified, without ego. It was like pushing a reset button.” But while space considerations preclude delving into greater detail, it should suffice to say that Hunt and de Jong both felt the effects were so powerful and positive they were inspired to embark on a major philanthropic venture together, which was the launch of Mind Medicine Australia, or MMA, in February 2019.

Hunt and de Jong assessed the state of mental health care in their country and came to the conclusion that something like MMA was needed to address what they felt was a growing crisis. As is stated in MMA literature, one in five Australian adults have a
chronic mental illness. Over 3 million Australians suffer from depression, over 800,000 more have PTSD, suicide rates are high, and nearly half of Australians will contract a mental illness in their lifetime. And with that, mental health treatments now being given in Australia are not turning around this epidemic. MMA feels new treatment options are urgently needed if the problem is to be mitigated, and psychedelic-assisted psychotherapy can play a major role in meeting that need.

It is very interesting that Peter Hunt used the metaphor of “pushing a reset button,” because research on how psychedelics work in the brain indicates they do give test subjects the conviction they are restarting or “rebooting” their consciousness. While researchers in the US have focused more on the subjective experience of psychedelics and its possible therapeutic applications, in the UK the focus has been on how they interact with the brain itself and its neurological functioning. At Imperial College in London, researcher Robin Carhart-Harris has been working to discover the “neural correlates” of psychedelics, and the results have been illuminating. What’s been discovered is that it is not the drug that the experience derives from. Instead, they are entirely the creation of the mind/brain. All psychedelics do is enable adult brains to use or access different neuro-transmitting pathways than it usually can, and the experiences naturally occur when the dominant pathways are temporarily disabled.

Many people have heard by now the medical maxim that humans only use about 10% of their brain's capacity. Modern brain imaging and scanning technologies used in neurological research has more or less confirmed this. But in addition to that, a 2001 discovery showed that most of that 10% is located in an area known as the default mode network, DMN for short. The DMN can be defined as the area in the brain where the concept of self and ego consciousness is constructed. And by the time a person reaches adulthood, the DMN's neurotransmitter pathways become so worn in by overuse that directing brain activity outside of the DMN becomes almost impossible. Researchers liken it to a pathway that has been cleared through fallen snow that people habitually gravitate towards. That is what gives people the sense that they are trapped in captivity of their ego/self-identity. Psychic walls are built that confine the person's subjective experience and create the impression that the self is forever a separate entity from the world perceived by the senses. And an overactive DMN is linked to numerous mental health problems, most notably anxiety, depression, and existential distress.

Returning to the snow analogy, what psychedelics do is add a fresh layer of snow to the brain and cover the DMN, allowing neural or mental activity to take place along neurotransmitter connections the person has likely never used before, which leads to the perception that their consciousness is “rebooting” or resetting, as Hunt referred to it as doing. Patients are able to break out of habitual, repetitive and rigid patterns of thought, feeling and behaving, and can escape a major symptom of depression.

Yet this neurological research, as compelling as it is, is not what has attracted the attention of groups like MMA. What has done that is the astounding success seen in
clinical trials in treating common mental illnesses, in part, with psychedelic-assisted psychotherapy.

Most notably, at least in the US, are clinical trials that have taken place at Johns Hopkins and New York University. At NYU, researchers investigated if psychedelics can be helpful for people with very difficult to treat psychological conditions, in particular those who have been diagnosed with cancer and are facing a possible terminal prognosis. The NYU psilocybin cancer trial tried to determine if psilocybin can help people facing the greatest personal crisis there is: the existential fear and dread that comes with knowing that you have only a short amount of time to live. And the results were nothing short of amazing, both for the researchers and the subjects themselves.

Stephen Ross of NYU saw things in his patients he could hardly believe and said, “People who had been palpably scared of death — they lost their fear. The fact that a drug given once could have such an effect for so long is an unprecedented finding. We have never had anything like that in the psychiatric field.”

One case study reported on was that of Patrick Mettes, a New York man with bile duct cancer who volunteered for the NYU program and had his initial psilocybin session in January 2011. Mr. Mettes was able to speak in great detail about his experience even as he was having it, at one point sitting up and saying to his doctors “Everyone deserves to have this experience, that if everyone did, no one could ever do harm to another again… wars would be impossible to wage.” He eventually added, “The sheer joy, the bliss, the nirvana, was indescribable. I know I’ve had no earthly pleasure that’s ever come close to this feeling. No sensation, no image of beauty, nothing during my time on earth has felt as pure and joyful and glorious as the height of this journey.” Mettes lived another 17 months after his experience, and loved ones say he seemed to carry that bliss with him the entire time. From his hospital bed in his final days he was the one consoling his wife and friends, not the other way around. “It was like he was a yogi. He put out so much love,” his wife Lisa said.

If you’re thinking that if psychedelics work that well for terminally ill patients then they should work at least as well for more common mental illnesses like depression and addiction, you are right. In fact, the results from clinical trials at Johns Hopkins and other US research institutions have been so impressive the FDA has given both psilocybin-assisted and MDMA-assisted therapies its Breakthrough Therapy Designation, putting them on a faster track for federal approval. What also allows psychedelics to be considered a “breakthrough” therapy, besides the vastly superior results, is that patients are only administered the drugs 1–3 times in the current therapeutic model or regimen. This is as opposed to the daily use over the course of years or a lifetime of antidepressants, as in treatments today. And MMA notes that even with the relative brevity of the psychedelic-assisted psychotherapy regimen, the experience results in substantial increases in self-awareness, self-compassion, insight, and connectedness that is perceived as personally meaningful. Among the testimonials compiled by MMA
include “the usual negative self-narration that I have had vanished completely” and “I felt like I went through 15 years of psychological therapy in one night.”

MMA has begun its mission with a sense of urgency, knowing that Australia is behind the US, UK, Canada, Israel and parts of Europe in researching psychedelic-assisted psychotherapy programs. But MMA has hit the ground running and accomplished a lot for its short time in existence. In addition to its education and outreach programs, it already has assisted with the establishment and funding of Australia's first clinical trial program at St. Vincent's Hospital in Melbourne. Like New York University's psilocybin cancer trial, St. Vincent's will test psilocybin-assisted psychotherapy on palliative care patients to help treat their end-of-life anxiety, distress and depression.

Another major initiative it is pursuing is the development of a Psychedelic Therapist Training Program for qualified and experienced doctors and clinicians, which is going to be needed for psychedelic therapy to be approved by Australian authorities. MMA is showing a lot of foresight by making this a priority.

MMA is also inviting the psychedelic world to Australia when it hosts the International Summit on Psychedelic Therapies for Mental Illness in Melbourne on November 16–19, 2020. Some of the biggest names in the field will be there, including Prof. David Nutt and Dr. Robin Carhart-Harris of Imperial College in London and Dr. Rick Doblin, founder of the groundbreaking Multidisciplinary Association for Psychedelic Studies in the US.

Finally, MMA's most ambitious project will be the creation of the Asia-Pacific Centre of Excellence in Psychiatric Medicine. Modeled on the Centre for Psychedelic Research at Imperial College and the Center for Psychedelic & Consciousness Research at Johns Hopkins, MMA estimates the cost of this institute at about $45 million for the first five years.

So, thanks to Tania de Jong, Peter Hunt, and a dedicated team of researchers, scientists, psychologists and administrators, it’s safe to say that Australia is finally on board the psychedelic express. Tania summed it up by saying, “We lost 50 years of research and development with these transformational medicines. In that half-century we’ve seen an exponential increase in loneliness, social isolation, mental illness, suicide and disconnection. We urgently need to focus on treatments that work for the millions of people who are suffering so that they can lead meaningful lives and contribute their gifts, intelligence and energy in an increasingly challenging world. We have an ethical obligation to make these medicines available and accessible.”