



**October 27, 2017**

**DRAFT AGENDA**

8:00-8:30 AM Coffee and Registration

8:30-8:45 AM Welcome

Patricia Kuszler, Director, Center for Law, Science and Global Health,  
University of Washington School of Law

*This conference will consider new frontiers in care and treatment at the end of life and for those struggling with post-traumatic stress disorder and severe depressions. In recent years, there has been increasing interest in use of psychedelics for relief of anxiety at the end of life and for depression and post-traumatic stress disorder. Our speakers will discuss these developments from scientific, legal, ethical and social justice perspectives.*

8:45-9:15 AM Overview of Developments in Law and Medicine Governing  
End of Life Care of Past Quarter Century

Kathryn Tucker, Director, End of Life Liberty Project

*How have law, policy and medicine around end of life care evolved over the past 25 years? What progress has been made toward ensuring patients' autonomy to make informed decisions? How has this been reflected in case law, statutes and medical practice in the context of advance directives, withholding or withdrawing medical treatment,*

*aggressive pain and symptom management, and medical treatment which advances time of death. How do end of life liberty advocates view the emerging science showing the efficacy of psychedelics in relieving anxiety associated with terminal illness?*

9:15-10:15 AM

Panel Discussion with End of Life Care Providers: How has patient care decision-making changed as a result of the movement for “Death with Dignity”? Who has benefitted and who has been left behind?

- Dr. Ira Byock, Providence Institute for Human Caring
- Dr. Nick Gideonse, Oregon Health Sciences University
- Dr. Tom Strouse, University of California/Los Angeles

*What have end of life providers witnessed with these recent changes in law, medicine and policy? How have their practices changed as a result? What have they observed about the demographics of patients that can benefit the most from these changes? Do they note disparities of use of options among communities of color, or “marginalized” or “vulnerable” populations? Are there “gaps” in the palliative care toolbox? Have most of the tools been to address physical pain and symptoms? Is there a need for more tools for addressing non-physical pain and symptoms?*

10:15-10:30 AM

BREAK

10:30AM-11:45 PM

Psychedelics: A New Frontier in Palliative Care?

10:30-11:00 AM

History of Psychedelic Substances in  
Medicine

- Rick Doblin, Multidisciplinary Association for Psychedelic Studies
- Don Lattin, author of *Changing our Minds—Psychedelic Sacraments and the New Psychotherapy*

*In the 1950s and early 1960s, psychedelic drugs such as psilocybin and LSD were considered promising treatments for a broad range of psychological and psychiatric conditions, including end-of-life anxiety. By the late 1960s, however, as psychedelics became symbols of youthful rebellion, social upheaval, and political dissent, scientific research to evaluate their medical safety and efficacy was halted. In recent years, researchers have revived study of psychedelics, with dozens of clinical*

*studies published and underway at top medical schools and research institutes worldwide. How did we get here? What are the findings?*

11:00AM-11:45 PM Panel: What Is the Latest Psychedelic Research Telling Us?

- Phil Wolfson, Multidisciplinary Association for Psychedelic Studies
- Leanna Standish, School of Naturopathic Medicine, Bastyr University

*We are now in the midst of a psychedelic research renaissance. The results have shown that psychedelic-assisted therapy is potentially more effective than conventional treatments for easing anxiety in the dying, interrupting the hold of addictive drugs, alleviating post-traumatic stress disorder, and treating other distressing conditions. Who is likely to benefit – or miss out – from these efforts? And what cultural barriers might exist for patients from marginalized populations in studies and trials?*

11:45AM -1:00 PM LUNCH

Kenneth Tupper, Director, Implementation & Partnerships, British Columbia Centre on Substance Use  
Ethan Nadelmann, former executive director of Drug Policy Alliance

1:00-2:00 PM Regulatory Pathways to Patient Access

Lynn Mehler, Hogan Lovells

*What are the possible scenarios for regulatory pathways and patient access, such as rescheduling psychedelic medicines from Schedule I to II or beyond? What is involved, what is the timing, and what can be predicted from where we are now? What are the limitations of the U.S. drug scheduling system? Are there ways to facilitate access aside from rescheduling?*

2:00-3:30 PM The Medicinal Marijuana Experience: Legal, Political and Advocacy Parallels for Medicinal Psychedelics

- Dan Abrahamson, Drug Policy Alliance
- Representative Roger Goodman, Washington State House of Representatives
- Sam Kamin, Sturm College of Law, University of Denver

*More than half of U.S. states have approved for medicinal marijuana use. While state medical marijuana programs differ from one another in significant ways, most are tightly controlled programs regulated by the state departments of public health. Could this be a template for access to medicinal psychedelics and other non-traditional drugs? Could the safety and efficacy of psychedelics be further established in the “laboratory of the states”?*

3:30-3:45 AM

BREAK

3:45-5:00 PM

Pathways Forward: Legal, Social and Ethical Challenges and Opportunities

- Dan Abrahamson, Drug Policy Alliance
- Margaret (Peggy) Battin, University of Utah
- Lynn Mehler, Hogan Lovells
- Ingrid Walker, University of Washington Tacoma
- Hope Wechkin, EvergreenHealth Hospice

*This roundtable will address the following discussion points:*

- *If patients are empowered to choose medical treatment with controlled substances to a) induce complete unconsciousness (as with palliative sedation) and/or b) precipitate death (as with aid in dying), doesn't it make sense to offer a palliative option of psychedelic psychotherapy? Might psychedelic psychotherapy alter a patient's interest in palliative sedation or aid in dying? Is this something researchers ought to consider investigating in trials? Can we foresee a day when offering a course of psychedelic psychotherapy will be standard of care in end of life care?*
- *Recent research has demonstrated dramatic sustained improvement in symptoms of PTSD and chronic disabling depression/PTSD after treatment with marijuana as well as short courses of treatment with psychedelic drugs. What hope does this offer for those suffering from these disorders, many of whom belong to marginalized populations? What risks does this treatment modality present for these populations – medically, legally, and socially?*
- *What impact do increased pressure for access to marijuana and psychedelics for “recreational” or other non-medicinal purposes (e.g. spiritual, shamanic, etc.) by medically healthy people have on efforts to facilitate medicinal use?*

- *What are the positive and negative impact of charismatic “trail blazers”? Is there a comparison to be made between Timothy Leary vis-a-vis psychedelics and Jack Kevorkian vis-a-vis aid in dying? What can be said about their efforts? Did they advance or delay progress toward the goal of increasing access?*
- *What issues arise for patient access in marginalized communities?*