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There has been renewed interest in "psychedelics" in the last 10 years and their usefulness in Psychiatric treatment explored. The aim of the article is to highlight current controversies surrounding psychedelics medicinal uses and address imminent international

in some resistant mental health diagnoses. Possession and use of drugs that fall under the category of psychedelics is criminalized universally. They are considered to have no medical use and high potential for abuse. The dissensus about their use in treatment of mental disorders

limited to a handful of research centers, due to their criminalization, but the evidence is building and becoming very hard to ignore.

In April 2016 the United Nations will debate control of illicit drugs, a process that started in September 2015 by the declaration of the SDGs for 2030 (Sustainable Development Goals). The SDGs prescribe human rights-centered approaches to ensure health and wellbeing of all the people and the public health approaches concerning illicit drugs are a target for change, since they are viewed as controversial, inconsistent with human rights and have historically yielded limited effects. (Unvienna.org/2016).

The topic of illicit drugs is hot in the United Kingdom also, as the Psychoactive substances bill comes into effect, also in April 2016, and the critics are already loudly protesting the unscientific approach to the blanket ban, which is targeting the "legal highs". It is drawing a new tribe into the mainstream discussion, those who are taking Nootropics, whether OTC Racetams or prescription medicines like Modafinil (a stimulant pq

the legislative agencies both at local and international levels at one end, and the scientific community at the other. The scientific community themselves are divided and use the terms loosely. You need to be extremely disciplined to follow the definitions ـ ﻗ

primary action is to alter cognition, mood and perception. The hallucinogenic or psychedelic experience is often compared to non- ordinary forms of consciousness such as trance, meditation, yoga, religious ecstasy, dreaming and even near-death experiences. They produce minimal craving or autonomic side effects. Another close term used is *"Illusinogens"* as the description fts alterations or enhancement in existing perceptions. Reality testing is generally intact and their effects vary with expectations and environment. Individuals transcend their primary identification with their bodies and experience ego-free states.

The classical hallucinogens (5HT2A agonists or partial agonists or serotonergic hallucinogens) are:

f _ some essential definitions:

- Ketamine.
- Dextromethorphan (DXM).
- Nitrous Oxide.

(Adapted from E. Zerbo, ASAM review course 2015).

A designer drug is a structural or functional analog of a controlled

unique to the group as well as others from the other two groups, psychedelics and Nootropics. The ASAM Principles of Addiction Medicine textbook lists the following as designer drugs:

analogue Methamphetamine.

or 2-CB also known as Nexus.

(naturally occurring in the Khat plant) and Methcathinone.

(Methylenedioxy methamphetamine) also known as Ecstasy or XTC

Their actions are unpredictable, not dose dependent and have resulted in fatalities due to overdosing. (ASAM, 2009.)

Another approach considers the following as and we will refer to it so the reader can compare with the above:

- Mescaline, PCP, LSD, Psilocybin, ketamine.

It is important to keep in mind the historical perspectives and remember that the relationship between mankind and drugs goes back thousands of years. The current debate is only new in terms of the types of drugs, the evidence for and against and the in fuence of times, cultural changes and emerging scienti fc evidence.

Reviewing the literature, the reader comes across a range of information from sensationalism to realistic, factual and disciplined scienti fc writings. The list of disorders where experimental work has been done or is ongoing includes: PTSD, OCD, Depression, Addiction (especially Alcohol, Nicotine related disorders), couples counseling (some claim it has gone underground but still practiced) and psychotherapy assisted end of life anxiety in cancer patients.

In the next section we will focus on the top 4 drugs that are currently being investigated for their medicinal use in Psychiatry.

No current medical uses and high potential for abuse. (Schedule

It is important to be aware of the turbulent history of psychedelics and the cycles of liberal use to total ban and the current ginger introduction into clinical research. The work of some great minds needs to be read and comprehended, like Humphrey Osmond who coined the phrase psychedelic meaning Mind manifesting in a letter in the late 1950s to Aldous Huxley who then suggested giving psychedelics to terminal cancer patients.

The scientifc community is divided between supporting the research like Tom Insel, director of NIMH who thinks they should be looked at if they prove to be useful to people who are suffering or caution against using them outside clinical research like Nora Volkow of the NIDA. Others are against their use citing small sample sizes and adverse reaction potential warning they may not be ready for the prime time. Nora Volkow, of NIDA, wrote that “the main concern we have at NIDA in relation to this work is that the public will walk away with the message that psilocybin is a safe drug to use. In fact, its adverse effects are well known, although not completely predictable.” She added, “Progress has been made in decreasing use of hallucinogens, particularly in young people. We would not want to see that trend altered.” On balance one has to respect this advice. We can only support psychedelics use to treat mental disorders only after meticulous and disciplined scientifc research informs us about safety, effcacy and the required medico-legal frameworks for prescribing them are in place.

Finally it remains to be seen even if the clinical trials yield positive results, as the drug industry will not fnd them lucrative since these drugs cannot be patented.

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