

## Who needs Jesus, when you've got drugs?

First, I wish to acknowledge the considerable influence that Lloyd Geering has had on my thinking. Like many of us in the Sea of Faith Network, Lloyd has been both a great stimulator and an enormous comfort on the journey of sorting out our spirituality following early inculcation of traditional Christianity. I count it as one of the real thrills of my life to have met Lloyd personally, as well as having had the honour of introducing him several times to addiction treatment conferences, writing a scientific paper about the future of God in addiction treatment with him (Sellman et al 2007) and now following him as speaker at the Sea of Faith Conference 2009.

Who needs Jesus, when you've got drugs?

I was brought up in a fairly black and white spiritually-thinking family in which taking drugs including alcohol was largely viewed as an evil. Both of my parents have been teetotallers for their entire married life and the world outside the family was viewed as being on the wrong track and motivated by forces other than good ones. However, although taking drugs including alcohol was viewed as part of this fallen world and therefore not something to be engaged in, it was the lack of a personal relationship with the male creator Christian sky-god, "through Jesus Christ" that was an even bigger no-no. Pervasive ideas instilled in me growing up in the Sellman household, like many Christian households, were these: "Who needs drugs when you've got Jesus" and "Life can be enjoyed to the full without artificial intoxicants". Stepping off the Jesus Christ escalator in my early 20s, allowed me the freedom to dig beneath these ideas.

I'm not going to attempt to address definitively, the big questions all of us in the Sea of Faith like to think about – what is the purpose of life? What are the ingredients for a happy and fulfilled life? etc, questions which are intimately connected with the issue of taking drugs – mainly because I don't have a comprehensive formulation of these questions sorted out in my own mind as yet. But I've had a first go at providing some answers to these questions in a Chapter titled "Enjoy life" in a health book "Real Weight Loss" (Sellman 2008) and I'll refer to some of this material in this presentation. But the main focus of this talk is opening up discussion about the use of drugs for therapeutic and spiritual purposes. I'd like to acknowledge three academic psychiatrist colleagues, Dr Gavin Cape and Professor Paul Glue in Dunedin and Dr Fraser Todd in Christchurch, with whom I am currently planning research with involving the use of hallucinogenic drugs as "addiction interrupters" in the treatment of people with compulsive behavioural disorders.

Who needs Jesus, when you've got drugs?

Before I begin answering this question from a research perspective, I need to make some comments about Jesus. The difference between Jesus, the historical figure and Christ, the Christian God (or at least a third of the Christian God) became such a nagging issue in my mind over time that in the end it motivated me to commission a painting from a friend and well-known super-photorealist painter Kees Bruin. The painting is titled "Jesus Christ" and it represents the conclusion of my own personal catharsis in relation to the Christian world; separating the earthly Jesus the real, from the heavenly Christ the delusional fantasy. What I'm interested in thinking more about and researching now is the place of therapeutic and spiritual experiences which help people make positive changes and cope better with life. Certain drugs may be of considerable help to some people. The irony is that this line of thinking and research is that it is about the induction of psychotic-like experiences; some of the very things I thought I'd previously rejected in stepping away from charismatic Christianity!

Science, the only 'religion' trying to prove itself wrong, is the best way we (H. sapiens) have found of advancing knowledge. However when it comes to complex phenomena, even with sophisticated methodologies and analyses, science becomes very limited as a way of understanding and explaining certain things; things like love and hope, human feeling and experience, and the meaning of life. Our human response to this limitation of science is expression and exploration in the arts – philosophy, music, poetry, and religion.

But science is proving to be unrelenting and will continue to chip away at everything that has previously been the preserve of the arts, including the focus of religion and spirituality - the meaning of life and the experience of God.

The starting point for a scientific approach to religion is the observation that belief in a God of some sort can be found across all human societies and self-transcendence has been found to be a universal heritable personality trait in humans. This suggests there is something in the evolved brain of humans that is associated with religious experience.

Fred Previc is a leading scientist in the area of the neurology of religion and he points to certain pathways in the brain, which could very well underlie human capacity for religiousness (Previc 2006). These pathways are powered by the neurotransmitter dopamine and run from the primitive limbic system of the brain to the more recently evolved neocortex, specifically the anterior cingulate cortex and prefrontal cortex of the brain. These pathways appear to mediate our experience of distant extrapersonal space and time and are probably also associated with dreams and hallucinations. It gives new meaning to the well known first verse from Psalm 121: "I will lift up mine eyes unto the hills: from whence cometh mine help"

But can God be found through prayer?

Or more specifically for those of us adjusting to the breakdown of the mighty Christian religion, can the Christian God's help be accessed through prayer? In fact, this question has been put to the test in scientific research in various studies, the best of which so far (Benson et al 2006) examined the power of intercessory prayer for people undergoing coronary by-pass surgery. Perhaps not surprising, no differences were found in the complication rate following surgery between those prayed for and those not prayed for were found but there was a somewhat surprising additional finding; those who were prayed for and knew it had more complications, than those who were blind to prayer or not. Unless God is a Joker these findings indicate that either the Christian God is not there, or the Christian God's help can't be accessed through prayer.

But can God be accessed through drugs?

Hallucinogenic substances have been used by humans for thousands of years, although this drug use has traditionally been confined to religious ceremonies to facilitate communication with the 'spirit world'. The word "entheogen" (creating god within) is used to denote these hallucinogenic substances which are used for spiritual purposes. The rise of the Abrahamic religions, Judaism, Christianity and Islam actively discouraged their use, but the Enlightenment and subsequent development of empirical science has brought about a renaissance of thinking and research in this area. A comprehensive list of potential entheogens can be found below:

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1. Indole	LSD (lysergic acid diethylamide) Psilocybin Ibogaine DMT (dimethyltryptamine) (Ayahuasca Tea)
2. Catechol	Peyote and mescaline STP MDA (methylenedioxyamphetamine) MDMA (methylenedioxymethamphetamine) Other new synthetics
3. Salvia divinorum	
4. Anticholinergic	* Belladonna (atropine) * Mandrake (hyoscyamine) * Henbane (scopolamine, hyoscyamine) * Datura (atropine, scopolamine, hyoscyamine)
5. Dissociative anaesthetics	Phencyclidine Ketamine

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A recent randomized controlled study of psilocybin in normal volunteers (Griffiths et al 2006) used methylphenidate (Ritalin) as a control substance. Methylphenidate is a stimulant drug rather than a hallucinogen. Those who took the psilocybin as opposed to the methylphenidate were significantly more likely to have a personally meaningful experience rated as one of the most spiritually significant experiences of their lives and also reported an increase in personal well-being or life satisfaction. Further, these spiritual experiences were found to be sustained over time and corroborated by significant others.

So, who needs Jesus, when you've got drugs?

From a therapeutic viewpoint, LSD was a fairly common psychiatric treatment for alcoholism in the 1950s and 1960s. But just as the research methodology was becoming more robust, the outbreak of the War on Drugs in the US brought about a fairly abrupt discontinuation in this area of study and therapeutics throughout the Western World. It is somewhat ironic that Russian research has continued and now is viewed as pioneering the resurgence of interest. In Russia there is very little methadone maintenance treatment for people with opioid (heroin) dependence. Treatment generally consists of Russian style psychosocial methods using a largely unsuccessful abstinence philosophy. However, Dr Evgeny Krupitsky and colleagues at the St Petersburg Research Center of Addictions and Psychopharmacology have conducted a range of experiments involving the "entheogen" ketamine, a dissociative anaesthetic. In one of the more well-known studies (Krupitsky et al 2002) patients with opioid dependence were randomised to receive one of two different doses of ketamine. The first group received a relaxing dose and the second group received a hallucinogenic dose. Treatment outcome at two years following treatment was astounding. Those who received the hallucinogenic dose were five times more likely to be abstinent from heroin than those who received the relaxing dose.

It looks as if a temporary psychotic experience and the switching off of people's conscious selves through hallucinogenic drugs not only can bring about a greater level of meaningfulness and life satisfaction, as seen in the psilocybin study, but can also be an effective treatment for some of the most intractable of psychiatric disorders, opioid dependence, as seen in the ketamine study.

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But as we all know, turning off "self" and experiencing "God" is not something that is only achievable with the use of hallucinogenic drugs. Many forms of religious and spiritual practice can bring about the same result. Personally, I'm rather keen on L-S-D breathing (long, slow, deep breathing).

A final word from Daniel Dennett (2006) p303: "One of the best secrets of life [is] let your self go... That, I propose, is the secret to spirituality and it has nothing at all to do with believing in an immortal soul, or in anything supernatural."

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