

May 2023

Legal  
psilocybin  
mushrooms  
in Oregon:  
*a prologue*

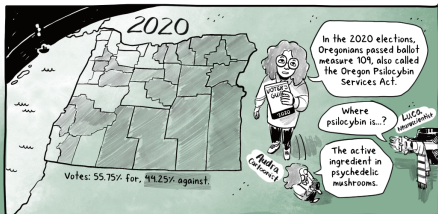


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Written May 2023. Your local laws and regulations may have  
changed since this comic was released.



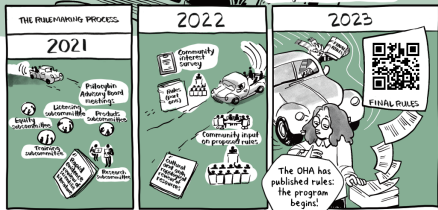
This vote gave the OHA two years to create rules that

"Permit persons licensed, controlled and regulated to manufacture psilocybin products and provide psilocybin services"

with the goal of

"ensuring that psilocybin services become and remain a safe, accessible & affordable option for all persons 21 years and older for whom psilocybin may be appropriate."

\* Text from Measure 109, adopted into law as Oregon Revised Statute 475A.





# WHAT THE OREGON PSILOCYBIN SERVICES ACT DOES NOT DO:



The Oregon Psilocybin Services Act does not create cannabis-style dispensaries.

The Oregon Psilocybin Services Act does not make it legal to fake psilocybin mushrooms...



...in your home



...on a hike



...in a hospital



...at a festival



The Oregon Psilocybin Services Act does not make it legal to grow your own mushrooms.

## THE PSILOCYBIN SERVICES ACT DOES NOT LEGALIZE OR DECRIMINALIZE PSYCHEDELICS

Psilocybin is a Schedule One drug federally. Psychedelic drugs were decriminalized in Oregon in 2020, under ballot measure 110, or the Drug Addiction Treatment and Recovery Act. The Act decriminalized possessing small amounts of many different drugs.

Now, if you're found to possess less than 12 grams of psilocybin in Oregon, you'll pay a \$100 fine or complete a health assessment. Possessing more than 12 grams could lead to jail time.

What is Schedule One?

The most restricted kind of drug, considered to have "high potential for abuse and no medical use."

Federal rules didn't keep up with the science...





Under the new regulation, psilocybin products may be used by adults in Oregon for any reason, under the supervision of licensed facilitators inside licensed service centers.



Okay, okay!

People aren't allowed to just go out and eat mushrooms anywhere.



Because the reason psilocybin is getting popular interest is for its mental health benefits!



The FDA\* regards psychedelic-assisted therapy as a "breakthrough treatment" for its extraordinary promise in treating mental illness,

including depression, anxiety, addiction, and PTSD.

If the current (phase III) clinical trials confirm the preliminary findings, psychedelics could revolutionize mental health!

Psilocybin produces substantial and sustained decreases in depression and anxiety in patients with life-threatening cancer. *A phase III clinical trial*



\*The FDA, or the Food and Drug Administration, is the federal agency responsible for protecting public health.



Roland Griffiths, MD  
Johns Hopkins  
Psychiatry &  
Neuroscience

As a scientific phenomenon, if you can create a condition in which 70 percent of people will say they have had one of the most meaningful experiences of their lives...well, as a scientist that's just incredible.



Monnica Williams, PhD  
University of  
Illinois School  
of Psychology

I feel like I have stone-age tools in comparison to what psychedelics can do for people.

We need the phase three clinical trials still, but the preliminary data is remarkable. If the promise is fulfilled, then they're going to transform how we treat a whole host of conditions.



Bryan Roth, MD, PhD  
University of  
North Carolina  
School of Medicine



The research on psilocybin-assisted therapy is promising, but...



**OREGON'S PSILOCYBIN SERVICES ARE NOT PSILOCYBIN MEDICAL THERAPY.**



Let me say that again, in a couple different ways.

Oregon psilocybin services are not medical, not even a little. Insurance won't cover them.

If you participate in psilocybin services, you're not participating in the kind of programs all those clinical trials are about.

You don't need a diagnosis to participate in psilocybin services. You can access them for any reason.

The rules are dead clear on this.

Before you engage in psilocybin services, you will sign an informed consent document confirming that:

I, initial here, understand that psilocybin services do not require medical diagnosis or referral and that psilocybin services are not a medical or clinical treatment.

But confusion on this point is understandable. The ballot measure itself begins:



Voters' Pamphlet  
2020

# Measure No. 109

prepared by initiative petition to be voted on at the General Election, Nov. 3, 2020

- The People of the State of Oregon find that
1. Oregon has the highest prevalence of mental illness among adults in the nation.
  2. An estimated one in every five adults in Oregon is coping with a mental health condition.
  3. The Governor has declared addiction as a public health crisis in this state...

# ENTITIES LICENSED UNDER THE OREGON PSILOCYBIN SERVICES ACT



## MANUFACTURERS

grow mushrooms & make products indoors



## LABS

test for potency and speciation



## FACILITIES

where the ~magic~ happens



## FACILITATORS

support clients through the process

# PSILOCYBIN SERVICES CONSIST OF

## The PREP session



## The ADMINISTRATION session



## & the OPTIONAL INTEGRATION session(s)





# THE FACILITATOR

is "affirming,  
non-judgemental,  
and non-directive."



Your facilitator is required to have a high school diploma or equivalent, 120 hours of classroom training, 40 hours of practical training, and to have passed their training program's test and an OHA test.

If your facilitator has a professional license (nursing, therapy, massage, etc) they're not working in that capacity or using those privileges during the session.



Facilitators could specialize in certain kinds of experiences (none of which would legally or medically be therapy, which does not preclude them from being meaningful), such as:



Reconnecting with nature and one's body



Fostering creativity



Having an experience with a partner



Thinking about grief, or racial, sexual, or childhood trauma

The facilitator may refer you to someone else if you're seeking a particular experience they don't specialize in, or if you have specific risk factors they don't feel prepared to handle. Ideally, a strong network of facilitators will help clients find a perfect fit.



# PREPARATION SESSION

Step one: a preparation session at least 24 hours before psilocybin administration.



Facilitators will ask specific questions about you and your life; you don't need to disclose your entire medical history.

## QUESTIONS INCLUDE

Have you taken Lithium in the last 30 days?

Y N

You may not participate in psilocybin services under the current rules.

Do you have thoughts of causing harm to yourself or others?

Y N

Have you been diagnosed or treated for active psychosis?

Y N

Please consider consuming a psilocybin product that is not whole or homogenized fungi.

Have you ever had an allergic reaction to mushrooms?

Y N

Will you require assistance consuming psilocybin?

Y N

Will you require assistance consuming medication during the session?

Y N

You can select an appropriate client support person to have in the room.

Will you require assistance with mobility, mobility aids, or communication aids?

Y N

Do you need an interpreter?

Y N

This isn't the standard set of exclusion criteria for psilocybin clinical trials, where participants are excluded if they have a personal or family history of bipolar depression or schizophrenia; are currently taking SSRIs; or have cardiac conditions.



## fill out the:



**& the Transportation Plan**

You can take a ride share or have a friend pick you up. Your facilitator must convince you to stay if you try to leave before the experience is over, and call emergency services if you persist.



## And read the:

Client Bill of Rights, whose rights include: being treated with dignity, receiving equitable care, having privacy and confidentiality.

Informed consent document, making sure you understand Oregon Psilocybin Services and potential effects of psilocybin.

Product information document for psilocybin products that may be consumed.

## & (of course) obtain written consent if participating in activities including:

- A group administration session.
- Use of supportive touch during an administration session.
- Video or audio recording of the session.
- Presence of an interpreter or a client support person.
- Opting out of sharing de-identified client data.

All the documents you create during this session will be saved by your facilitator and the facility you were at.



# BIRD'S EYE VIEW OF THE Administration Session





To introduce the mushrooms, we turn to



We know that psilocybin fungi have been used by peoples across Mexico, Central America, and likely North and South America for centuries. It's important to honor that. This is not a new idea.

"When we were deciding what fungi to allow, we considered fungi that grow here in the Pacific Northwest."



*Psilocybe azurescens*

"but they have the potential to be confused with visually similar poisonous ones. So we didn't go with those."



*Galerina marginata*

"The species we did go with, *Psilocybe cubensis*, grows from tropical Florida all the way down into Central and South America."



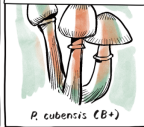
*P. cubensis*  
(Mexican Dutch King)

"*Cubensis* grows indoors fine, in legit labs."



*P. cubensis*  
(Penis Envy)

"We chose naturally occurring psilocybin over synthetic because there is a long, safe history of consumption. Not only in pop culture but also indigenous cultures."



*P. cubensis* (B+)

"That's our first goal, consumer safety. We want people to have safe experiences."



*P. cubensis*  
(Golden teacher)

Eventually you may be choosing between dried whole mushrooms, extracts, and edibles as diverse as the cannabis industry's.



25mg psilocybin

You may have up to two servings, where a serving contains approx. 25mg of psilocybin.



25mg is the amount served to people in many clinical trials.

And may also combine the mushrooms with any prepackaged food you bring (as long as it doesn't contain other adulterants, like cannabis, alcohol, or caffeine).



DECAF

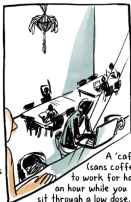


# Selecting your service center

Many kinds of psilocybin service facilities are possible under the current rules:



High priced luxury resorts for weekend retreats.



A 'cafe' (sans coffee) to work for half an hour while you sit through a low dose.

Small practices run by a facilitator offering one-on-one facilitation sessions.



Spiritual congregations with church-affiliated licensed facilitators



Group sessions outside.



Depending on where you live, your closest service center may be far away.

• **Psilocybin services allowed**

Pets aren't allowed unless they're a service animal.



Similarly, a client support person is present for a specific reason, such as: assistance consuming psilocybin or other medication during the session; aiding mobility; or aiding communication.



With your permission, your facilitator may provide "supportive touch" consisting of hand-to-hand, hand-to-shoulder, hand-to-foot contact, and hugs.



If you would like documentation of your session, you may request for it to be recorded.





Let's talk about

**MONEY**

You may pay for services in cash. Like cannabis, it's a federally illegal substance and service centers won't necessarily be able to work with banks and take cards.

6+ hour session

micrograms  
2k facilitator licenses  
liability insurance

TAXES  
20k facilitator training  
facility rent  
1000+ video cameras  
2k facilitator licenses

How much will this cost? Will it be affordable?

It could cost hundreds or thousands of dollars.



This is for many reasons—the federal illegality of the substance increases the tax burden on licensees.

And the way the Oregon Psilocybin Services Act is written requires the program to be fully funded by licensing fees, which will be highest as the program begins.

Plus the nature of psilocybin trips— 4-6 hours of direct supervision—are labor intensive.

And it's not a medical program, insurance will not cover it.

*not to sound like a broken record*

Cost will depend on factors including:

dose	min duration	min facilitator to client ratio
>25 mg	30 min	
>5 mg	1 hr	1:25
>10 mg	2 hr	1:15
>15 mg	4 hr	1:8
>25 mg		1:6
>35 mg	5 hr	1:4
>50 mg	6 hr	1:2

Group sessions will be cheaper, and so will taking smaller doses where you're at the facility for a shorter time.

But it's undeniable many Oregonians will be priced out of Psilocybin Services as they currently stand.

The Psilocybin Services Act mandates the creation of a program accessible to all Oregonians, and the OHA is working hard to meet this goal.

# Integration SESSION



I've heard the word 'integration' a lot. Nearly every clinical trial on psilocybin has at least one, and often has several integration sessions.

Integration is a pretty important part of the psilocybin process, yeah?

Yes, and...

There's integration in the cultural psychedelic sense, which has a broader definition than integration in the Oregon Psilocybin Services sense.

Integration in the psychedelic sense refers to processing your experience.

The Oregon Psilocybin Services integration session specifically is an optional session your facilitator must offer, where you review your experience with their non-directive facilitation.



However, you can integrate your psilocybin experiences outside the Oregon Psilocybin Services integration session.



You can integrate in a peer support group in your community.



You can integrate with a therapist or other guide outside the OPS framework.



Talking with friends and family is integration.



and so is thinking and writing about your experience.



In the past, experimental legislation has fruited in Oregon before spreading to other states.

see: *battle bills*  
*death with dignity*  
*legal gay marriage*

Now Oregon has a first-in-the-world chance to make an accessible, clearly regulated path to experiencing psilocybin mushrooms.

which have immense cultural meaning to a lot of people, including indigenous groups.



Oregon is deciding how to create legal access to psilocybin, using scientific data limited by years of prohibition along with cultural knowledge of the mushrooms.

It's trying to make the program as safe as possible for people in all situations, with all levels of knowledge of psychedelics.

That's what Oregon Psilocybin Services are, which is just the tip of the iceberg.



## Resources, footnotes, and further reading

Don't like typing in URLs but want to check our work? Scan here:



More about Oregon Psilocybin Services on the OHA web page, [oregon.gov/psilocybin/](https://oregon.gov/psilocybin/):



### PAGE 1:

The QR code leads to ORS 475A, [oregonlegislature.gov/bills\\_laws/ors/ors475A.html](https://oregonlegislature.gov/bills_laws/ors/ors475A.html). The final adopted rules can be found on the Oregon Secretary of State website, under the Oregon Health Authority Public Health Division Chapter 333, Division 333.

### PAGE 2:

More about M110 is at the Oregon Health Authority's Drug Addiction Treatment and Recovery Act (Measure 110) web page, [oregon.gov/oha/hsd/amh/pages/measure110.aspx](https://oregon.gov/oha/hsd/amh/pages/measure110.aspx)

### PAGE 3:

The QR code leads to Roland Griffiths, et al. "Psilocybin produces substantial and sustained decreases in depression and anxiety in patients with life-threatening cancer: A randomized double-blind trial." *Journal of psychopharmacology* (Oxford, England) vol. 30,12 (2016): 1181-1197. doi.org/10.1177/0269881116675513

Further reading:

Davis AK, Barrett FS, May DG, et al. Effects of Psilocybin-Assisted Therapy on Major Depressive Disorder: A Randomized Clinical Trial. *JAMA Psychiatry*. 2021;78(5):481-489. doi.org/10.1001/jamapsychiatry.2020.3285

Oregon Psilocybin Advisory Board Rapid Evidence Review and Recommendations, [oregon.gov/oha/PH/PREVENTIONWELLNESS/Documents/Oregon%20Psilocybin%20Advisory%20Board%20Rapid%20Evidence%20Review.pdf](https://oregon.gov/oha/PH/PREVENTIONWELLNESS/Documents/Oregon%20Psilocybin%20Advisory%20Board%20Rapid%20Evidence%20Review.pdf)

### PAGE 4:

Bryan Roth, personal correspondence.

Roland Griffiths, from Michael Pollan's *How to Change Your Mind*.

Monnica Williams quote from "Psychedelics and Race: A Profile of Dr. Monnica T. Williams", written by Patricia Kubala in *Society for Cultural Anthropology*.

### PAGE 7:

Oregon Psilocybin Advisory Board Rapid Evidence Review and Recommendations, page 12 and page 27.

### PAGE 10:

The trials by organizations currently furthest on the path towards FDA approval, Usona's PSIL201 trial for Major Depressive Disorder ([clinicaltrials.gov/ct2/show/NCT03866174?term=PSIL201&draw=2&rank=2](https://clinicaltrials.gov/ct2/show/NCT03866174?term=PSIL201&draw=2&rank=2)) and Compass Pathways' COMP Single-Dose Psilocybin for a Treatment-Resistant Episode of Major Depression ([nejm.org/doi/full/10.1056/NEJMoa2206443](https://nejm.org/doi/full/10.1056/NEJMoa2206443)), both gave 25mg of psilocybin to trial participants as the primary dose size.

### PAGE 11:

Map of possible service center location from *Psychedelic Alpha's Oregon Psilocybin Services Act Local Jurisdiction Tracker*, [psychedelicalpha.com/data/oregon-psilocybin-tracker](https://psychedelicalpha.com/data/oregon-psilocybin-tracker)

### PAGE 13:

The previously mentioned Usona and Compass Pathways trials have three and two integration sessions respectively.

## Acknowledgements

Audra and Luca began their comics collaboration within the University of Oregon's Science and Comics Initiative, led by Drs. Kate Kelp-Stebbins and Tien-Tien Yu. This project originated from a scientific collaboration between the two neuroscience labs led by Cris Niell and Luca Mazzucato at the University of Oregon, funded by the National Institute on Drug Abuse research grant R01-DA055439. This comic was informed by our illuminating conversations with many neuroscientists (Zach Mainen, Alex Kwan, Yi Zuo, Bryan Roth, Atheir Abbas), mycologists (Jessie Uehling, Roberto Garibay Orijel), journalists (Shayla Love), anthropologists (Giorgio Gristina), and OHA leadership (Angela Allbee); and many colleagues at the University of Oregon and other research institutes, including David Wyrick, Phil Parker, Angie Michael, Rolf Skyberg, and Danny Brown.

Thank you all for making this comic possible.

Mazzucato lab website: [mazzulab.com](http://mazzulab.com)  
Audra McNamee: [audmcnamee.com](http://audmcnamee.com)

Part two coming out later in 2023!





In 2020, Oregon voters approved a first-in-the-nation framework for legally consuming psilocybin-containing (“magic”) mushrooms.

After a robust rulemaking process, people in Oregon may now access Psilocybin Services in the state, where they choose a licensed facilitator who works with them through the preparation session, the administration session at a licensed service center, and an optional integration session.

