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A Psychedelics Pioneer Takes the Ultimate Trip

By David Marchese Photograph by Mamadi Doumbouya



As the founding director of the Johns Hopkins Center for Psychedelic and Consciousness Research, Dr. Roland Griffiths has been a pioneer in

investigating the ways in which psychedelics can help treat depression, addiction and, in patients with a life-threatening cancer diagnosis, psychological distress. He has also looked at how the use of psychedelics can produce transformative and long-lasting feelings of human interconnectedness and unity. One could surely classify his achievements using various medical and scientific terms, but I'll just put it like this: Griffiths has expanded the knowledge of how we might better learn to live.

Now he is learning to die. Griffiths, who is 76, has been diagnosed with Stage 4 metastatic colon cancer. It's a diagnosis, in all likelihood terminal, that for him has brought forth transcendently positive feelings about existence and what he calls the great mystery of consciousness. "We all know that we're terminal," says Griffiths, who since being diagnosed has established an endowment at Johns Hopkins to study psychedelics and their potential for increasing human flourishing. "So I believe that in principle we shouldn't need this Stage 4 cancer diagnosis to awaken. I'm excited to communicate, to shake the bars and tell people, 'Come on, let's wake up!'"

Can we start with your current prognosis? [Laughs.] Prognosis is a 50 percent chance that I'll

make it to Halloween.¹

1

Soon after we spoke, Griffiths was removed from the drug trial he was participating in because of a lack of positive results. That likely means his survival timeline is now shorter than it was at the time of our interview.

And how are you feeling about that? In spite of that, life has been more beautiful, more wonderful than ever. When I first got that diagnosis, because I work out regularly, I watch my diet, I sleep well, this came out of left field. There was this period in which it felt like I was going to wake up and say, “Boy, that was” — to put it in psychedelic language — “a bummer, a bad dream.” But soon after that I started to contemplate the different psychological states that would be naturally forthcoming with a diagnosis like mine: depression, anxiety, denial, anger, or adopting some belief system of religious outcomes, which as a scientist I was not cut out to do. I went through those, exploring what life would be like if I inhabited those reactions, and I quickly concluded that that was not a wise way to live. I have a

long-term meditation practice,²

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Griffiths practices Vipassana meditation, which comes out of the Buddhist tradition.

and the focus there is on the nature of mind, of consciousness, and one comes to see that thoughts, emotions, are transient. They're appearances of mind that you needn't identify with. That practice — and some experience with psychedelics — was incredibly useful because what I recognized is that the best way to be with this diagnosis was to practice gratitude for the preciousness of our lives. Grasping for the cure wasn't useful. [Laughs.] Actually we just got back another blood result that was an indication as to whether the cancer is progressing. My wife, Marla, and I say to each other, “No matter what this shows, it's perfect.” Indeed, it showed a big jump in this blood marker, which wouldn't be something to celebrate. It is what it is. It's real. And what's more fun than reality?



Roland Griffiths at a TEDMED conference in 2015. TEDMED

You're 76. You've had a long, full life. Is your perspective maybe one that a 40-year-old, say, with a terminal cancer diagnosis would be able to inhabit so profoundly? I've always lived under this illusion that I'm about 30 years younger than I am. I was feeling completely healthy at the time of this diagnosis. I was not about to wind down anything. As a scientist, it's like a kid in the candy store with respect to what research, what questions need to be answered about psychedelics and the theme of

The Roland R. Griffiths, Ph.D. Professorship Fund, which has an initial funding goal of \$20 million, was established to “examine how psychedelic experiences relate to aspects of spirituality, worldview, well-being and prosocial behavior.”

and human flourishing. We were continuing to build out the center. I was more deeply engaged than ever and feeling that I was about 35. This was not in my game plan.

You talk about your cancer almost as if it's a gift. Does that mean you don't have regrets about what's happening? My life has never been better! If I had a regret, it's that I didn't wake up as much as I have without a cancer diagnosis. It's been incredible. There have been so many positive things: my relationship with my children, my grandchildren, my siblings, my wife. Marla and I have lived together for 11 years and felt that it was unimportant to get married. Then at dinner one evening, I asked Marla, “Would it be emotionally important to you, now, to be married?” She thought about it. The next day she said, “You know, it would be.” Immediately it became important to me. We were just married in our living room with my three children and two of our best friends. It was beyond beautiful. So do I have any regrets? No, but my concern is principally for Marla and how she's going to deal with this. We've talked about my passing as being an opportunity, like my diagnosis, to wake up. Because these are opportunities to use events that could be labeled and experienced as miserable but don't need to be.

Have you taken psychedelics since getting your diagnosis?

Yes. After getting the diagnosis, I had no immediate interest in psychedelics. I felt in many respects that I was having a very psychedelic-like experience. There was this awakening, this aliveness, and I hesitated to take a psychedelic because I wondered whether it

was going to disrupt that. Then a question arose: Is there something I'm avoiding by not taking a psychedelic? Am I defending against some dark, fearful thing I'm in denial about? Am I papering it over with this story of how great I'm doing and actually I'm scared to death? I thought, Well, this would be an interesting stress test. So I did

a session with a psychedelic⁴

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He used LSD.

and went into that explicitly asking a couple of questions. First, asking myself, "Is there something I am not dealing with?" The answer came back: "No, the joy you're experiencing is great. This is how it should be." Then I asked a question directly of the cancer. I'm hesitant to talk about it because it's reifying the cancer as "other," and I don't hold that the cancer is some "other" with which I can have a dialogue. But as a metaphor, it's an interesting way to probe that question. So I asked the cancer: "What are you doing here? What can you tell me about what's going on?" I got nothing back. Then I wanted to humanize it, and I said: "I really respect you. I talk about you as a blessing. I have had this astonishing sense of well-being and gratitude, despite everything that's happening, and so I want to thank you. This process, is it going to kill me?" The answer was, "Yes, you will die, but everything is absolutely perfect; there's meaning and purpose to this that goes beyond your understanding, but how you're managing that is exactly how you should manage it." So then I said: "OK, there's purpose and meaning. I'm not ungrateful for the opportunity, but how about giving me more time?" [Laughs.] I got no response to that. But that's OK.

How else have psychedelics, both studying them and using them, helped prepare you for death? Our first study was in cancer patients. Ironically enough, these were cancer patients who were depressed and anxious because of a life-threatening diagnosis. The findings of that study were profound: A single treatment of

psilocybin⁵

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Psilocybin is the psychoactive compound found in some mushrooms. After we spoke, Griffiths mailed me a medallion embossed with an image of mushrooms and inscribed with the phrase "May you remain aware of awareness."

produced large and enduring decreases in depression and anxiety. I've had some limited experience with psychedelics since then. But what did that teach me about my diagnosis?

We've now treated hundreds of participants with psychedelics and before sessions, one of the key things that we teach them is that upon taking a psychedelic, there's going to be an explosion of interior experiences. What we ask them to do is be with those experiences — be interested and curious. You don't have to figure anything out. You're going to have guides, and we're going to create this safety container around you. But here's the trick: These are not necessarily feel-good experiences. People can have experiences in which they feel like they come to this beautiful understanding of who they are and what the world is, but people can also have frightening experiences. The preparation we give for these experiences is to stay with them, be curious and recognize the ephemeral nature of them. If you do that, you're going to find that they change. The metaphor we use is, imagine that you're confronted with the most frightening demon you can imagine. It's made by you, for you, to scare you. I'll say: "There's nothing in consciousness that can hurt you. So what you want to do is be deeply curious and, if anything, approach it." If your natural tendency is to run, it can chase you for the entire session. But if you can see it as an appearance of mind, then you go, "Oh, that's scary, but yeah, I'm going to investigate that."



Griffiths in one of the psilocybin treatment rooms at Johns Hopkins University. Will Kirk/Johns Hopkins University

Ah, OK. You can choose to investigate the experience rather than identify with it. But let me ask you this: The approach that you're describing is pretty far from the typical mind-set of many doctors, who are working within a framework of curing, fixing, prevention. So if the ultimate goal is to help more otherwise healthy people get safe access to the

potential benefits of using psychedelics,⁶

6

Which of course would need to be used in a safe setting and supervised by trained experts.

wouldn't that require a radical rethinking by medical practitioners about what helping people even means? Yes, it will. One of the inspirations for the endowment is that it's not aimed at patient populations. It's not aimed at reducing clinically recognized suffering. Right now, there's money pouring into this area, but that's all going to be patient-related⁷

7

Meaning for use by patients with a clinically diagnosed medical ailment, not just someone looking to explore consciousness more deeply.

— there's a pathway to medical approval. I do have concerns that we don't replicate the mistakes that occurred in the 1960s, which over-promoted psychedelics' use culturewide. They're so powerful that if misaligned with cultural institutions, they can result in cultural kickback. In the 1960s they became aligned with the antiwar movement and radicalized-youth movement that was terrifying to existing political structures and institutions, and as a consequence, legislation was put up against them, funding dried up, they were considered a third rail in academic research. We need to proceed cautiously. It's going to be critically important not to threaten existing cultural institutions. So I've been a proponent of medicalization, because with medicalization, we already have regulatory structures in place. It goes through F.D.A. approval; they're going to set standards to maximize safety by specifying who should be eligible to receive, who is authorized to prescribe, and under what conditions treatment should occur. So I'm cautious, but that's why I'll have the endowment in perpetuity. If we look at the long range, this could be critical to the survival of our species.⁸

8

It is Griffiths's belief that humanity has developed — and is developing — technologies that could threaten its ongoing survival. He also believes that psychedelic experiences can provide the basis for moral and ethical principles that would lessen the likelihood that humanity will drive itself off a cliff.

Because there's something about the nature of these experiences under these certain conditions that produce remarkable experiences of interconnectedness of all things. At the deepest level, if we recognize we're all in this together, then we have the kernel of what I suspect is most religious traditions and impulses and that is realizing that the Golden Rule makes a lot of sense.

I've noticed that often when you discuss human consciousness and our awareness of the preciousness of life, you talk about those things as an awe-inspiring "mystery." What do you get out of putting it in those terms? Because consciousness may be a mystery now, but I've read theories that are convincing, to a layperson like me, that thoughts come from emotions and our emotions are one of the body's mechanisms of maintaining homeostasis. Or as far as the awareness that life is precious, I could easily imagine that biophilia has evolutionary advantages. So I don't see why these states of being have to be understood as mysteries. Does it diminish them to see them as explainable? No, I can easily inhabit an evolutionary account that explains how we have come to be who we are — with the exception of the question of interiority! Why would evolution waste its precious energy on our having interior experiences at all? I don't get that. To me, it's a very precious mystery, and that mystery, if you want to put it in religious terms, is God. It's the unknowable. It's unfathomable. I don't believe in God as conceptualized within different religious traditions, but the mystery thing is something that strikes me as undeniable.

What do you struggle with? There must be something. Marla and I had just adopted a dog and that's brought us incredible joy. Then we got some test results back suggesting the possibility of kidney failure. That's been more difficult than dealing with my own

diagnosis. We might both be on a parallel course of expiry. That's difficult for me and doubly difficult for Marla. I can say, acutely, that this gives me something new to work with. It's just accepting what is real and then appreciating that in the context of celebration of life. In some ways, if I knew that this precious dog is also facing a terminal condition, there may be beautiful synergy there. I'm not going to rule that out as a possibility.

So you have this sense, near the end of your life, of waking up to life's real meaning. What's the most important thing for everyone else who's still asleep to know? I want everyone to appreciate the joy and wonder of every single moment of their lives. We should be astonished that we are here when we look around at the exquisite wonder and beauty of everything. I think everyone has a sense of that already. It's leaning into that more fully. There is a reason every day to celebrate that we're alive, that we have another day to explore whatever this gift is of being conscious, of being aware, of being *aware* that we are aware. That's the deep mystery that I keep talking about. That's to be celebrated!