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The Rt Hon Chris Philp MP Home Office 2 Marsham Street London, SW1P 4DF

12th May 2023

Dear Mr Philp,

Psilocybin Access Rights

The undersigned urge you to commission a high priority ACMD review of the evidence for psilocybin's status as a Schedule 1 controlled substance under the Misuse of Drugs Regulations 2001, with a view to rescheduling.

The evidential basis for psilocybin's current status has never been reviewed since the substance was first controlled over 50 years ago. We recognise the urgent and medically justified need to reschedule psilocybin under the 2001 Regulations. It is unethical to delay any longer. A review of the evidence of psilocybin's harms and utility with a view to rescheduling should be undertaken immediately.

Depression is one of the most socially, medically and economically burdensome diseases of the modern world. It is the single largest cause of global disability and the leading contributor to suicide. An average of 18 people take their own lives every day. Up to one-third of people with depression do not respond to multiple courses of medication, an estimated 1.2 million adults in the UK living with 'treatment-resistant depression'. The direct treatment and unemployment costs to the UK associated with depression in 2020 have been estimated at £10 billion. The human and economic burden of this condition is profound and there are clear benefits in supporting development of novel therapies that may be effective where all other treatments have failed. The Government has a moral imperative to actively support mental health research, including the development of promising drugs.

Clinical research suggests that psilocybin can be used safely and feasibly in the treatment of the most intractable forms of depression and other mental health conditions, and that it is likely to have lasting therapeutic benefits. There is a large body of epidemiological, experimental, and clinical data in the scientific literature to indicate that psilocybin is a relatively safe drug with very low toxicity and no known link to the development of physical dependence.

There are serious and considerable barriers to legitimate research associated with Schedule 1 regulations. While current legislation does not preclude scientific research with these drugs, it does make them significantly more difficult, time-consuming and costly to study. It is well known in the research community that the net burden of these barriers is sufficient to deter many research studies from ever taking place, and to substantially complicate and delay those that do. It is clear that Schedule 1 regulations impede the development of the scientific work required to bring a drug to market. These regulations are not appropriate for the legitimate study of drugs with low potential for abuse.

Considerable evidence should be required to justify regulatory controls that impede legitimate mental health research, but there was little robust evidence to support the initial scheduling decisions made in the early 1970s and the evidence for psilocybin's current status has never been reviewed. Today, the overwhelming scientific consensus is that psilocybin does not pose a major risk to the individual, public health or to social order. Its Schedule 1 designation is not morally, medically or economically appropriate.

We urge the Home Office to commission a high priority ACMD review of the evidence of psilocybin's harms and utility with a view to reschedule psilocybin under the 2001 Regulations.

Yours,















Cc:

The Rt Hon Rishi Sunak MP, The Prime Minister
The Rt Hon Steve Barclay MP, Secretary of State for Health and Social Care
The Rt Hon Johnny Mercer MP, Minister of State for Veterans' Affairs
Dr Owen Bowden-Jones, Chair of the Advisory Council on the Misuse of Drugs
Steve Brine MP, Chair of the Health and Social Care Committee
Dame Diana Johnson MP, Chair of the Home Affairs Committee