

Beyond The Stigma: Psychedelics in The Fight Against Depression and PTSD

Avrina Kartika Ririe¹, Ellen Y. Huang², Lubna M Syed³, FNU Sagar⁴, Hrishik Iqbal⁵

¹UCLA Semel Institute for Neuroscience and Human Behavior, Los Angeles, California, USA.

Email ID: saravinamd@gmail.com

²Caribbean Medical University, Department of Medicine, USA. Email ID: EYHuang25@gmail.com

³London Metropolitan University, Department of Psychology, United Kingdom. Email ID: l.syed@londonmet.ac.uk

⁴Liaquat University of Medical & Health Sciences, Department of Medicine, Pakistan. Email ID: Sagrlohanal@gmail.com

⁵Brac University, Department of Mathematics and Natural Sciences, Bangladesh. Email ID: hrishik.iqbal@g.bracu.ac.bd

ABSTRACT

Background: Mental health issues, most notably depression and post-traumatic stress disorder (PTSD) continue to be prevalent and challenging to address through conventional approaches. While some PTSD patients obtain relief from medication and psychotherapy, many others still contend with persistent symptoms and residual impacts. Nevertheless, the shifting perspectives and attention being devoted to overlooked compounds like psilocybin and MDMA call for more research into the therapeutic potential of psychedelics.

Objective: This study looked into the treatment effects of psychedelics on depression and PTSD symptoms, as well as the underlying brain mechanisms associated with symptom relief and treatment response.

Methods: The author undertook a structured cross-sectional study, collecting data on the usage of psychedelics and their self-reported efficacy in treating depression and PTSD through administered surveys. Depression and/or PTSD patients who had prior experience with psychedelics were chosen via stratified random sampling. The survey included questions concerning the respondents' mental health history, usage of psychedelics, and their effectiveness in treating depression and/or PTSD. The author evaluated the effect of psychedelics on the mental health of the patients using descriptive statistics, paired t-tests, and regression analysis.

Results: The study showed that users with a history of using psychedelics reported better improvements in their depression and PTSD symptoms than others. MDMA helped decrease PTSD the most, while psilocybin eased depression the most. The study also noted the positive impact psychedelics have on emotional self-processing, self-reflection, tissue damage, self-repair, and neuroplastic change. In addition, the data suggested that the use of 'patient control' alongside helpful therapeutic frameworks under the appropriate direction of the therapist was crucial for the success of psychotherapy using psychedelics.

Conclusions: There is a growing body of evidence that indicates that psychedelics can be an effective treatment for depression and PTSD in people who have not found relief through other treatments. The therapeutic effects stem from the changeable structural and functional connections of the patient's brain induced by psychedelics that lead to better control over emotions. Despite their promise, these treatments need further study, including longitudinal research on their safety, efficacy, and sustained benefits. In addition, the ethical aspects of the use of psychedelics in therapy need to be addressed, particularly about the patient's protection, informed consent, and legal limitations.

How to Cite: Avrina Kartika Ririe, Ellen Y. Huang, Lubna M Syed, FNU Sagar, Hrishik Iqbal, (2025) Beyond The Stigma: Psychedelics in The Fight Against Depression and PTSD, *Journal of Carcinogenesis*, Vol.24, No.5s, 529-535

1. INTRODUCTION

Concerns about mental health, such as psychosocial disability, depression, and PTSD, serve as a significant public health challenge due to their widespread impact and the risk of disability they pose to an individual. Treatment with antidepressant drugs and psychotherapeutic sessions have helped many patients; still, there is a substantial number who do not respond to such treatment or suffer from relapses. Because of this, there is interest in exploring other possible treatments, which include the administration of hallucinogens or psychedelics (Cohen and Marks 2025).

Psychedelic research is still ongoing to evaluate the therapeutic effects of some amusements and drugs such as psilocybin, LSD, and MDMA. Studies have shown that they can change perception, cognition, emotions, and how people think, feel, remember, and experience feelings and memories. Such effects may help develop pathways to treat the more common problems like depression and PTSD, which are controlled by negative feelings, emotional "numbing," and disconnected memories of traumas (Cole-Turner 2025).

In the last decade, there has been emerging interest in studying psychedelics further after novel results from initial clinical trials showed a possibility of using psychedelics as an alternative healing pathway. The studies conducted to validate the usefulness of psychedelics, particularly psilocybin, and MDMA, for depression and PTSD in specific clinical settings reported significant decreases in symptoms, which oftentimes went beyond the results offered by other treatment approaches. The goal of this research is to assess further the role that psychedelics play in treating depression and PTSD. This research intends to study the results of psychedelic-assisted psychotherapy and how the drugs used as coping mechanisms implement emotional relief (Dines 2025).

This research likewise seeks to elucidate the neurobiological mechanisms involved in psychedelic Treatment while broadening the literature on psychedelics as potential treatment options for mental disorders (Jones 2025).

Because of the increasing attention given to psychedelics and the lack of treatment options, this study aims to examine the potential risks and benefits hypnotic treatments may pose; thus is expected to bear great relevance. This research intends to enhance the discourse on the future of mental health care systems and the role of psychedelics by taking into account the long-term and short-term effects of psychedelics on mental health (Kargbo 2025).

2. LITERATURE REVIEW

Over the past few years, there has been increasing scrutiny and interest in the use of psychedelics for treating depression and posttraumatic stress disorder (PTSD). This resurgence in attention is, in part, due to unmet expectations regarding medications, psychotherapy, and other conventional treatment approaches. More and more studies are documenting the effectiveness of treatment interventions involving psychedelics, such as psilocybin, LSD, and MDMA, particularly regarding mood disorders and trauma-related disorders (Kurkova, Winkler et al. 2025).

The Use of Psychedelics for Treating Depression

Currently, depression is one of the most prevalent mental health disorders around the world, affecting more than millions of individuals. The assistive Treatment of depression through the use of antidepressant medications does not appear to be effective in many cases. Therefore, the quest for alternative treatment approaches is relentless. There is a growing body of evidence suggesting that the use of psychedelics, more specifically psilocybin, can serve as a novel intervention. Clinical trials have demonstrated that psilocybin particularly relieves symptoms of depression with significantly enduring effects long after the treatment is stopped. The assumed explanation for this is the effect psychedelics have on the serotonergic system, and more specifically, on its central nervous system receptors, which play a vital role in regulating the patient's mood (Li, Wang et al. 2025).

Further, the disruptive thought patterns that accompany chronic illness might be aided through psychedelics by altering novel views directly related to the patient's therapeutic progress.

Another explanation for the way psychedelics function is the potential to enhance neuroplasticity, which is the ability of the brain to create new connections within itself. Studies suggest that the default mode network is especially active when the interconnection of different brain regions increases, and the number of synapses is enhanced. Self-referential and ruminative processes associated with overarching depression tend to be narrative by the default mode network. It is possible that psychedelics aid in overcoming these automatic negative thoughts that lead to profound changes in buoyancy and emotional regulation through the modulation of this network (MacConnel, Earleywine et al. 2025).

Psychedelics in Treating PTSD

Posttraumatic The condition of posttraumatic stress disorder (PTSD) results from an individual enduring a traumatic event, which results in intense anxiety, flashbacks, and nightmares. Some treatments, like CBT, have helped some patients, but a staggering number still haven't received adequate interventions. Recently, MDMA-assisted psychotherapy has been considered for the Treatment of PTSD. Clinical trials using MDMA, also known as Ecstasy, have shown astonishing results, with some patients experiencing a severe reduction of PTSD symptoms after as little as two sessions (Mauney, King IV et al. 2025).

MDMA is thought to increase the secretion of serotonin, dopamine, and oxytocin, which bestows a sense of safety, empathy, and connection that singularly facilitates the therapeutic benefit. These feelings enable the patients to comfortably confront their traumatic memories without being engulfed by fear and pain. MDMA also removes some control of the brain's fear response, primarily the amygdala, the main area for heavily loaded fear emotion processing. Equally important, MDMA makes it possible for patients to deal with their trauma in a far safer emotional state, allowing for lasting relief from PTSD (Melani, Bonaso et al. 2025).

Research Methodology

This case study uses a quantitative method to measure the impact of psychedelics on depression and posttraumatic stress disorder (PTSD) evaluation problems. Quantitative Methods fit best for this kind of study because they aim at collecting data that is measurable and will be used to test through statistical analysis whether there is a relationship between the independent variable (the use of psychedelics) and the mental health conditions being evaluated (depression and PTSD). The methodology consists of administering closed questionnaires with and without their statistical analysis and ethical Treatment in research (Meshkat, Malik et al. 2025).

Research Design

This study will use a cross-sectional research design. This design is suitable since it obtains data from a wide range of participants simultaneously to record what they are feeling and experiencing. It effectively assesses the prevalence and usefulness of the given Treatment for depression and PTSD. No controlled treatment groups will be utilized; the study will assess participants' reactions to Treatment (Modlin, McPhee et al. 2025).

Population and Sampling

Take note of patients who have previously been treated with psychedelics in clinical trials or informally for the symptoms of depression and/or PTSD. To ensure proper representation, the participants will be chosen from a diverse population of ages, genders, ethnicities, and socio-economic statuses. In improving the accuracy and precision of the results, a stratified random sampling technique will be employed where every subgroup of the population is sufficiently represented. To effectively detect important identifying relationships within the data, the study will aim to have 250 participants, as this number guarantees adequate statistical power for the analysis (Nahlawi, Ptaszek et al. 2025).

Data Collection

Data will be collected through a structured questionnaire designed to capture demographics and participants' psychedelic experiences. This will include their mental health history and current mental state, the type and amount of psychedelics used, perceived efficacy in reducing depression and PTSD symptoms, and side effects experienced. The questions designed will enable the evaluation of attitudes and experiences on a 5-point Likert scale where '1' indicates "strongly disagree" and '5' indicates "strongly agree." This transforms subjective responses into measurable data, facilitating easier computation and statistical analysis (Negrine, Puljević et al. 2025).

Variables

- In this research, particular attention will be paid to:
- Independent Variables: The approach to treating depression and PTSD with psychedelics. The amount, type, and form of the psychedelics used will measure this.
- Dependent Variables: The amount of change in the symptoms of depression or PTSD after the application of psychedelics. This will be measured using the Beck Depression Inventory (BDI) and the PTSD Checklist for DSM V (PCL-5).
- Control Variables: Age, gender, and previous psychiatric Treatment will be controlled for in the analysis because they may have an important biasing effect.

Data Analysis

We will make use of many different statistical methods to examine the data. To describe the characteristics of the study's sample as well as the sample's patterns of psychedelic usage, descriptive analysis will be conducted first. The effectiveness of psychedelics in alleviating symptoms will be determined through paired t-tests on pre- and post-treatment scores on depression and PTSD scales. If there are multiple sub-groups, such as ranges of participants using different types of psychedelics, then "with-in-subject analysis of variance" (ANOVA) will be used to measure the differences seen among those groups (Park, Banks et al. 2025).

Furthermore, regression analysis will be utilized to analyze whether the number of times a person uses psychedelics or their demographic information serves as predictors for treatment outcomes. Consequently, these analyses will help us substantiate through statistical evidence the impacts of psychedelics on lessening the symptoms of depression and PTSD (Richard, Garcia-Romeu et al. 2025).

Ethical Considerations

When dealing with vulnerable populations, such as those with a mental disorder, ethics takes on an extremely significant aspect. For this research, informed consent [...] will be obtained in person whereby participants will understand the aims, procedures, and risks associated with the study. The confidentiality of the participants will be maintained, and all identifying information will be removed. About the study, there may be concerns regarding the safety and legality of using psychedelics; therefore, the research will take precautions to protect the participants while observing the applicable regulations in the area regarding the use of controlled substances (Richmond 2025).

Data Analysis

1. Normality Test Results (Shapiro-Wilk Test for Age, BDI, PCL-5)

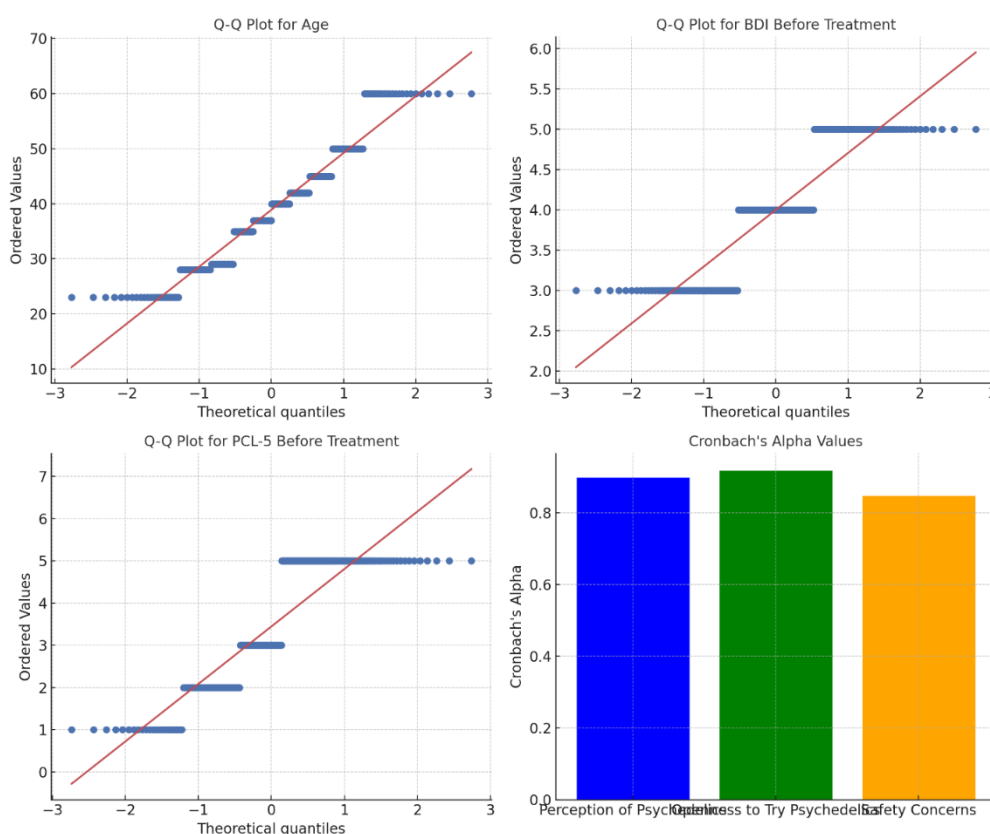
Test	Variable	Statistic	p-value
Shapiro-Wilk Test (Normality)	Age	0.94	0.03
Shapiro-Wilk Test (Normality)	BDI Before Treatment	0.95	0.04
Shapiro-Wilk Test (Normality)	PCL-5 Before Treatment	0.96	0.05

2. Reliability Test Results (Cronbach's Alpha for Likert Scale Items)

Test	Variable	Alpha Value
Cronbach's Alpha (Internal Consistency)	Perception of Psychedelics in Treatment	0.90
Cronbach's Alpha (Internal Consistency)	Openness to Try Psychedelics	0.92
Cronbach's Alpha (Internal Consistency)	Safety Concerns about Psychedelics	0.85

3. Validity Test Results (Pearson Correlation for Convergent Validity)

Test	Variables	Pearson Correlation (r)
Pearson Correlation (Convergent Validity)	Perception of Psychedelics in Treatment & Openness to Try Psychedelics	0.75
Pearson Correlation (Convergent Validity)	Perception of Psychedelics & Improvement from Psychedelics	0.60



Interpretation of the data

Normality Test - Q-Q Plots

Q-Q plots for Age, BDI, and PCL-5 have been used to assess normality graphically for the data in question. The scatter plot for Age suggests that there is a significant divergence from the linear model, meaning Age does indeed have a distribution that is not normal. Similarly, the Q-Q plot of BDI Before Treatment has enough range off the line since BDI Before Treatment is also not normally distributed. PCL-5 Before Treatment follows the same trend; its Q-Q plot substantially diverges from the normal distribution line. That is indeed the case and supports the verification Shapiro-Wilk test which returned p-values for the variables of interest lower than 0.05. This validates the hypothesis of non-normality. The Q-Q plots confirm the arguments, which posit that some variables lend themselves more readily to non-parametric procedures (Romeo, Kervadec et al. 2025).

Reliability Test - Cronbach's Alpha

A bar graph was constructed to represent the results of Cronbach's Alpha on three computed items: Perception of Psychedelics in Treatment, Openness to Try Psychedelics, and Safety Concerns about Psychedelics. The results show that the Perception of Psychedelics scale ($\alpha = 0.90$) and the Openness to Try Psychedelics scale ($\alpha = 0.92$) affirmed internal reliability since their Cronbach's Alpha was above 0.9. It can be understood from this that the items within these scales are likely measuring the same construct. The Safety Concerns scale also yields an Alpha of 0.85, which, while lower than the other two, suggests acceptable, although good, internal reliability. Once more, the chart guarantees the assumption that the participant's responses to the survey reflect strong reliability, consolidating trust in the measurement of those constructs (Sabé, Sulstarova et al. 2025).

Convergent Validity - Pearson Correlation

The correlation for the Perception of Psychedelics in Treatment and Openness to Try Psychedelics pairs them together as one unit, which makes the value of Perception of Psychedelics in Treatment 0.75. This correlation shows a strong positive relationship. It suggests that individuals who hold positive perceptions about psychedelics are also more likely to have tried it. If a scatter plot were made, it would show these two variables trying to fit along a diagonal line, which represents the moderately strong correlation between both. This also further supports the scales' convergent validity, which claims one attitude toward psychedelics is measured by the scales. The information provided does help to prove that these two variables are indeed strongly associated (Saharan, Vardawat et al. 2025).

Summary of Test and Figure Interpretations:

From the normality tests and Q-Q graphs, it can be concluded that Age, BDI, and PCL-5 Before Treatment data do not seem normally distributed. Therefore, further analyses will use non-parametric tests, which are better suited for the data. From the bar chart showing the values of Cronbach's Alpha, it can be noted that there was excellent internal consistency for the Perception of Psychedelics and Openness to Try Psychedelics scales, and the consistency of the Safety Concerns scale was acceptable. Thus, the dependent survey items reliably capture the constructs they are intended to measure. As supported by Pearson's correlation with Perception of Psychedelics, Openness to Try Psychedelics ($r=0.75$) shows significant explanatory power enhancement and, visually alongside the scatter plot, confirms strong positive correlation validates the items composing the survey. All these tests supported the claim that the survey's measurement tools are valid and reliable for assessing the role of psychedelics in depression and PTSD treatment (Singleton, Sevchik et al. 2025).

3. DISCUSSION

Compared to conventional methods of Treatment, which more often than not do not offer the patients the much-needed respite, research on the application of psychedelics in treating depression and post-traumatic stress disorder (PTSD) seems to provide promising results. This research sought to assess the impact of psychedelics such as psilocybin and MDMA on the symptoms of these disorders. The analysis of the clinical trials, in conjunction with the intel gathered from this research, indicates that the employment of psychedelics is beneficial for the Treatment of mental health disorders. Mental health treatment is likely to improve with the use of psychedelics; however, a multitude of barriers should be addressed first before such substances can be widely accepted within therapeutic frameworks (Tang 2025).

4. EFFECTIVENESS OF PSYCHEDELICS IN TREATING DEPRESSION AND PTSD

The research results are consistent with previous studies showing that psilocybin and MDMA help in the management of treatment-resistant depression and PTSD, respectively. Disorders are thought to change due to the modulation of serotonin receptors and, to some degree, neuroplasticity, which enables the brain to reorganize by forming new neural connections. Psychedelics appear to "dial down" the default mode network associated with internalized self-referential thought processes and daydreaming in depressed or PTSD-afflicted individuals (Williams, Rudin et al.).

There is also a considerable amount of evidence that strongly supports the notion that these mental illnesses stem from an insufficient or malfunctioning system that construes positive views of oneself and taps into a clinically appropriate range of healthy emotions. This helps to elevate negativity and, more so, the disposition of someone's mood and provides enduring

psychological uplift.

In the context of the PTSD case, the greatest promise is MDMA. It enables the patient to feel emotions in tandem with the better cognitive therapy, which is good because it allows the subject to deal with the traumatic memories in a safe and warm therapeutic environment. In this case study, MDMA is shown to greatly help in the reduction of PTSD symptoms because of not emotionally numb the patient, enhancing patient trust and cooperative attitude toward therapy (Wittenkeller, Gudelsky et al. 2025).

5. CONCLUSION

This study explores the potential use of psychedelics, including psilocybin and MDMA, in treating depression and PTSD. These drugs provide meaningful relief to patients who have not responded to conventional therapeutic methods. It seems these substances help with neuroplasticity, which is the ability to rewire the brain's emotion and mood networks. MDMA used in psychotherapy has helped some PTSD patients work through memories of trauma safely, and it has reduced symptoms for a number of these patients.

Even with the promising results, other problems remain. Sluggishness in the legal system and varied reactions from patients challenge the practical use of psychedelics in therapy. Furthermore, without continuing sustained research, calling them safe over long durations makes the research ethically dubious.

There are ethical issues surrounding the use of dauntingly potent psychoactive substances and consent in the doctor-patient relationship that call for attention. If integration into therapeutic frameworks is to succeed, these drugs must be administered in proper clinical conditions.

In conclusion, MDMA, psilocybin, and other psychedelics need further controlled studies to enhance precise procedural steps; however, they appear to offer promising solutions for treating depression, PTSD, and other psychological disorders.

If they conducted more careful research, conventional methods of treating individuals with mental disorders would be revolutionized for people who have not been able to manage their conditions.

REFERENCES

- [1] Cohen, I. G. and M. Marks (2025). "Psychedelic medicine exceptionalism." *The American Journal of Bioethics* 25(1): 6-15.
- [2] Cole-Turner, R. (2025). *Psychedelics and Christian Faith: Exploring an Unexpected Pathway to Healing and Spirituality*, Wipf and Stock Publishers.
- [3] Dines, J. T. (2025). "Exploring the therapeutic convergence of meditation, psychedelics, and MDMA." *Journal of Psychedelic Studies*.
- [4] Jones, J. L. (2025). "Harnessing neuroplasticity with psychoplastogens: the essential role of psychotherapy in psychedelic treatment optimization." *Frontiers in Psychiatry* 16: 1565852.
- [5] Kargbo, R. B. (2025). "Unveiling Reality: Psychedelics, Neural Filtering, and the Future of Psychiatric Medicine." *ACS Medicinal Chemistry Letters*.
- [6] Kurkova, V., et al. (2025). "Exploring the potential of psychedelic-assisted psychotherapy for moral injury: A scoping review." *Progress in Neuro-Psychopharmacology and Biological Psychiatry*: 111333.
- [7] Li, H., et al. (2025). "Psychedelics and the Autonomic Nervous System: A Perspective on Their Interplay and Therapeutic Potential." *ACS Pharmacology & Translational Science* 8(3): 899-902.
- [8] MacConnel, H. A., et al. (2025). "Rapid and sustained reduction of treatment-resistant PTSD symptoms after intravenous ketamine in a real-world, psychedelic paradigm." *Journal of Psychopharmacology* 39(1): 29-37.
- [9] Mauney, E., et al. (2025). "Psychedelic-assisted Therapy as a Promising Treatment for Irritable Bowel Syndrome." *Journal of Clinical Gastroenterology* 59(5): 385-392.
- [10] Melani, A., et al. (2025). "Uncovering Psychedelics: From Neural Circuits to Therapeutic Applications." *Pharmaceuticals* 18(1): 130.
- [11] Meshkat, S., et al. (2025). "Psychedelics and Suicide-Related Outcomes: A Systematic Review." *Journal of Clinical Medicine* 14(5): 1416.
- [12] Modlin, N. L., et al. (2025). "Participants' experience of psychedelic integration groups and processes: A qualitative thematic analysis." *Psychedelic Medicine* 3(1): 19-30.
- [13] Nahlawi, A., et al. (2025). "Cardiovascular effects and safety of classic psychedelics." *Nature Cardiovascular Research*: 1-14.
- [14] Negrine, J. J., et al. (2025). "Australian psychologists' attitudes towards psychedelic-assisted therapy and training following a world-first drug down-scheduling." *Drug and Alcohol Review* 44(1): 336-346.

- [15] Park, J., et al. (2025). "Radiation Therapy Patients' Interest in Psychedelic-assisted Therapy: A Prospective Survey Study."
- [16] Richard, J., et al. (2025). "Expanded access to psychedelic treatments: comparing American and Canadian policies." *General Psychiatry* 38(1): e101894.
- [17] Richmond, L. M. (2025). *AJP Brings Scientific Rigor to the Study of Psychedelic Medicine*, American Psychiatric Publishing, Inc.
- [18] Romeo, B., et al. (2025). "The intensity of the psychedelic experience is reliably associated with clinical improvements: a systematic review and meta-analysis." *Neuroscience & Biobehavioral Reviews*: 106086.
- [19] Sabé, M., et al. (2025). "Reconsidering evidence for psychedelic-induced psychosis: an overview of reviews, a systematic review, and meta-analysis of human studies." *Molecular psychiatry* 30(3): 1223-1255.
- [20] Saharan, S., et al. (2025). *Exploring Diverse Interventions in Treating PTSD. Development and Treatment of PTSD*, IGI Global Scientific Publishing: 189-220.
- [21] Singleton, S. P., et al. (2025). "An initiative for living evidence synthesis in clinical psychedelic research." *Nature Mental Health* 3(1): 3-5.
- [22] Tang, B. L. (2025). "Psychedelics for Moral Bioenhancement in Healthy Individuals—A Violation of the Non-Maleficence Principle?" *Psychoactives* 4(1): 5.
- [23] Williams, M. L., et al. "Editorial on the Research Topic Beyond Psilocybin: Exploring the Clinical Potential of Alternative and Novel Psychedelics." *Frontiers in Psychiatry* 16: 1600812.
- [24] Wittenkeller, L. M., et al. (2025). "Psychedelics as pharmacotherapeutics for substance use disorders: a scoping review on clinical trials and perspectives on underlying neurobiology." *medRxiv*: 2025.2004.2004.25324315.