



**A Manual for MDMA-Assisted Psychotherapy  
in the Treatment of  
Posttraumatic Stress Disorder**

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staying present during these challenging experiences rather than attempting to avoid or escape from them. The therapists should let the experience unfold for the participant, being mindful not to present any unnecessary distractions. They should avoid using focused bodywork prematurely, in an attempt to resolve challenging emotions or their somatic manifestations before allowing participants to adequately experience, and process them. Therefore, the therapists must exercise judgment about when focused bodywork is indicated to help move the therapeutic process forward, as well as when it is preferable to allow the process to proceed at its own pace.

In preparation for the session, the participant should be asked to use the word “**Stop**” (or some comparable alternative word if it is preferred by the participant) if there is ever any touch she/he does not want. The participant should be told that this command will always be obeyed by the therapists unless the touch is necessary to protect the participant from physical harm. This convention will avoid confusion between communications that are meant to be directed to the therapists and statements that are expressions of the participant’s inner experience.

### 3.5 Use of the Breath

Elements of Holotropic Breathwork or other techniques utilizing the breath may be useful at different times in the therapeutic process. Diaphragmatic breathing should be used to aid relaxation (“stress inoculation”) near the beginning of the MDMA-assisted session if anxiety comes up during the onset of the MDMA effect. The therapists explain that some people feel anxious during this time and others do not. For those who do, the anxiety will be transient and it can be eased by use of the breath to release tension from the body and, as much as possible, to relax into the experience. Later in the MDMA-assisted session, if anxiety or any other intense emotion comes up, rather than trying to relax, it is often most helpful to use the breath to “breathe into” the experience and stay as present with it as possible in order to fully experience, process, and move through it.

Sensorimotor and somatic psychotherapy or other techniques can be used for “connecting psychological symptoms and physiological states” [24], the participant should be encouraged to work with her/his body to process trauma. Helping the participant become aware of what her/his body wants to do in reaction to traumatic memories, and encouraging the participant to allow that action, can be the beginning of liberating what was once a natural process (movement) and integrating the related experiences that are unprocessed. It is important to help the participant begin to befriend her/his body instead of regarding it as a source of danger and unpredictability. Describing emotions as being about fluid movement and trauma as being about frozen movement, the therapists help the participant move through and past the somatic consequences of trauma so that she/he can trust her/his body again. Therapists should inquire about participant’s bodily sensations and encourage release of pains, tightness or energy in the body through movement in whatever way feels appropriate to the participant.

### 3.6 Supporting Transpersonal Experiences

It is important for the therapists to be prepared for the possibility that, during experimental sessions, the participant may have transpersonal experiences [15] that might transcend conventional Western concepts of consciousness and its relationship to the physical body. Such “transpersonal” experiences that are common during MDMA-assisted therapeutic sessions extend beyond biographical memory and may include unusual sensations in the body, as well as perinatal and/or spiritual experiences. There may be perceptions that are felt to extend well beyond the usual sense of self, such as feelings of oneness in which the participant experiences an openness and enhanced connection to his or her own humanity and to the surrounding environment. Such experiences can be difficult to interpret and in some cases, may challenge the therapists’ own