Psychiatry's Biggest Paradigm Shift Is Happening Now #ibogaine #psychedelicmedicine #ptsd #therapy Transcript

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Paradigm Shift in Psychiatry and Addiction Medicine

There is a big picture shift. We're in the middle of a paradigm shift in psychiatry and addiction medicine. So, y'all, this is not fringe anymore. This is structured, state-supported medicine in development.

Seriously, the real deal is that this no longer theoretical.

Federal Momentum and State Programs

We now have active federal momentum, multiple state-level programs already live, and states like Louisiana building the next wave focused specifically on addiction and severe psychiatric illness.

And this is one of the strongest signals that we've seen in psychiatry in decades, certainly in my career. Because if this becomes a legitimate treatment, we can't rely on stripping a rare plant from Central and West Africa to meet a global demand.

Now, pharmacologically, Ibogaine is very different from other psychedelics. It's what we call polypharmacologic.

Ibogaineu2019s Unique Pharmacology

it works across multiple systems. And honestly, this multitude of efficacy is part of the beauty of whole plant medicine. And this is where one of strongest arguments for the legislation is something that we are super excited about.

We need pharmaceutical-grade synthesis, standardized production, regulated clinical environments.

Need for Standardized, Ethical Production

So when we talk about Ibogaine, we're really talking about three simultaneous challenges. clinical efficacy, which is quite promising, medical safety, not something to sneeze at, and sustainability and ethical production, absolutely essential for the future.

Why Delaying Treatment Can Be Dangerous

The biggest mistake I'm seeing right now is patients, providers and the general community thinking, I'll just wait for psychedelics because they're on their way, right?

Be sure, though, that delay can be dangerous.