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Entheogens: The Light and Shadow of Subtle Medicine

Enteógenos: Luces y Sombras de la Medicina Sutil

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Abstract

The prescription and ingestion of entheogens is most appropriately understood in a developmental context—catalyzing the emergence of a more integrated human being. Entheogens open access to subtle-state experience in a way that can potentiate ego transcendence and re-enchant a world diminished by the limitations of rationality and materialism. Healthcare practitioners and those who guide others in the use of entheogens must engage these "subtle medicines" with respect, embodied knowledge, and caution. In order to appropriately and safely prescribe entheogens, practitioners must be engaged in their own integral development. The hope is that entheogens utilized respectfully in a medical context will motivate a cultural appreciation of the subtle dimensions of human experience, leading to a deeper appreciation of the root causes of disease and suffering.

Keywords: entheogens, acupuncture, holistic medicine, integral theory, subtle medicine

Resumen

La prescripción y la toma de enteógenos se entiende más propiamente en un contexto de desarrollo, catalizando el surgimiento de un ser humano más integrado. Los enteógenos abren el acceso a la experiencia del estado sutil de una manera que puede potenciar la trascendencia del ego y volver a encantar a un mundo disminuido por las limitaciones de la racionalidad y el materialismo. Los profesionales de la salud y quienes guían a otros en el uso de enteógenos deben utilizar estas "medicinas sutiles" con respeto, conocimiento y precaución. Para prescribir enteógenos de manera adecuada y segura, los profesionales deben participar en su propio desarrollo integral. La esperanza es que los enteógenos utilizados respetuosamente en un contexto médico motiven una apreciación cultural de las dimensiones sutiles de la experiencia humana, conduciendo a una apreciación más profunda de las causas fundamentales de la enfermedad y el sufrimiento.

Palabras clave: enteógenos, acupuntura, medicina holística, teoría integral, medicina sutil

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Introduction

In this article I address the use of entheogens in the context of their growing popularity in culture at large and within a medical community that is increasingly recognizing their therapeutic potentials. As of this writing, 26 states have decriminalized or legalized marijuana; Denver has decriminalized psilocybin; and Oakland has decriminalized psilocybin, peyote, and ayahuasca. Evidencing therapeutic promise in psychiatry in the early 1960s, LSD was outlawed in 1968 as its use spread on college campuses. Currently, the DEA classifies all entheogens as Schedule I drugs, deeming them to have "no currently accepted medical use". This has hindered scientific and medical access to these substances.

Nonetheless, intriguing research has shown their promise in areas such as treating addictions, anxiety, depression, PTSD, and end-of-life care (Byock 2018, Tupper, Wood, Yensen & Johnson, 2015). In March of 2019 the FDA approved ketamine as a nasal spray for in-office administration to address "treatment-resistant depression" (U.S. Food & Drug Administration [FDAUS], 2019). Ketamine, MDMA, psilocybin, peyote, and LSD are growing in popularity and are administered legally and illegally under the broad umbrella of "therapy" by both licensed and unlicensed professionals.

Some of these substances—notably, psilocybin, peyote, and ayahuasca—are also ingested legally (exemption for their religious use has been twice upheld by the Supreme Court) and illegally in the context of ritual and healing circles. Here they are used as part of a more or less consciously held position in relationship to psychological, soul, and spiritual development. People have also begun micro dosing these molecules for extended periods of time under the auspices of self-medication or in the context of a directed psychological or spiritual practice. Others abuse these substances as drugs for their escapist and entertainment value.

It is my consideration that entheogens are best understood and engaged with as a branch of subtle medicine. Describing entheogens as subtle medicine, I am not implying that their effect is subtle. Rather, I am specifying the dimensions of the self that they provide access to on a continuum from the gross body (physical, lower mind) to the subtle body (soul, higher mind) to the causal body (atman, authentic self) to nonduality (emptiness, spirit). Entheogens provide access to subtle, causal, and nondual states, and each state in that continuum is more subtle than the previous one, so I am calling them subtle medicines. I will also be referring to stages of cognitive development from prerational (impulsive, magic, mythic) to rational (modern, postmodern, integral) to post-rational (psychic, intuitive, nondual) (Wilber, 2017).

In this article I consider the implications of entheogens for medicine and culture, elaborating on potential benefits as well as areas of concern. My central thesis is that all medicine has its person, place, time, and dose. Medicine that catalyzes evolution at one moment of life may cause regression or promote repression and stasis at another. Therapeutic context is predicated upon an integral assessment of the patient's state and stage development. My use of the word *integral*, as applied to the practice of medicine, implies the embrace of a developmental, holistic view that endeavors to leave no part of the self behind. My main reference points for the integral and evolutionary perspective in which this work is framed are based most significantly on the works of Sri Aurobindo (2010), Teilhardde de Chardin (2008), Jean Gebser (1996, 2018), and Ken Wilber (2017). *Development* implies deeper and higher integrity, presenting as the capacity to embrace and respond to greater complexity with increasing nuance and care.

What Is Medicine?

The term *medicine* can have very different meanings depending on the context in which it is being used (Jarrett, 1998, 2003). The practice of biomedicine is currently dominated by physicians who, as gatekeepers, are granted prescriptive rights. This medicine focuses on the gross physical dimension of the self and is primarily concerned with survival of the body. Relying on reference to quantitative standards of measurement, its perspective is materialistic and reductionist. Its main realm of efficacy is in critical lifesaving intervention, and its approach is generally symptomatic, palliative, and repressive. The further removed the application of this paradigm is from the context of critical care, the greater the morbidity of its side effects. Hence, morbidity associated with the use of medications to treat the psyche is substantial (Nelson & Spyker, 2017; Gøtzsche , 2017).

In contrast, authentic holistic approaches such as Chinese medicine, in addition to addressing the body, also embrace the subtle and causal dimensions of the self. Holistic medicine embraces

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a patient's physical condition as the tip of an iceberg reflecting an underlying ocean of subtle functional relationships. The concern of these medicines transcends survival of the body to embrace a developmental context, seeing the body mind as a vehicle for the evolution of the soul, itself a vehicle for the expression of spirit (consciousness). Their main realm of efficacy lies in prevention, long-term management, and catalyzing the emergence of a more integrated self.

Integral medicine, now emergent, aspires to transcend this complementarity, endeavoring to embrace both in a kosmocentric context (care for all manifest and unmanifest reality). Integral medicine strives to determine the state and stage appropriateness of modalities for each patient. Biomedicine takes precedence in life-saving intervention and subtle medicine in the context of prevention and long-term management.

Given these discernments, there are different contexts in which entheogens are currently being prescribed.

Traditional Medicine

Traditional medicine focuses significantly on the subtle body (the dream self), understanding symptoms as outer expressions of issues affecting the soul. Illness is held in an ancestral context and as a result of attack by evil influences, including spirits and spells. Medicine is often consumed in a ceremonial context under the guidance of a shaman, in a communal setting, and in the context of a teaching (Teacher, sangha, and dharma constitute the "triple gem" of Buddhism). The goal is to gain insight and guidance through communication with ancestral spirits, subtle beings, and the spirit of the plant itself. The general frame of this medicine is magic through mythic. The validity claim is that the participant reports, and the shaman and community discern, that the participant has healed ancestral, familial, and tribal relationships, resulting in the resolution of associated symptomatology. Typically, authentic shamans practice in a lineage and are wisdom keepers of their tribes' traditions. Note that in the Shipibo tradition of Peru the shaman ingested the medicine for the sake of clinical insight and the patient did not.

Allopathic Medicine

Allopathic medicine addresses physical pathology, and its perspective is restricted to the gross body (the waking self). In this context, entheogens are administered as drugs to relieve symptoms. There is little expectation that the provider administering ketamine in a billable 15-minute session will have the time or expertise to help a patient properly frame their experience in a way that might catalyze development. The general frame of this medicine is modern or modern-rational (Gebser, 1996). The validity claim is that the patient reports, and the physician discerns, that the symptom of depression has lessened. Beyond the value of symptomatic relief, there is no consciously held philosophical context shared between practitioner and patient. This approach is focused on giving hungry patients a fish, not on teaching them how to fish.

Postmodern Medicine

In a postmodern context, entheogens may be consumed individually or collectively in casual or formal settings. Transcendent experiences are pursued with expectations ranging from a desire for insight into specific issues to the search for enlightenment. The philosophical context of practitioner and patient tends to be eclectic, varying by individual interest. The frame of this medicine is pluralistic and relativistic. Validity claims often focus on "what is meaningful to me". Emphasis is often placed on experience itself with a casual expectation of change in relationship to experience.

Integral Medicine

Integral medicine values the evolution of the individual and collective. State and stage development of the patient and their culture is taken into account relative to the medicine prescribed. Settings can range from solitary to communal use in a ritualistic or clinical setting. The expectation is that higher-state experience reveals potentials that are to be enacted to catalyze higher-stage development. The goal of medicine transcends and includes overcoming the past through "healing" to embrace the evolution of the self, culture, and kosmos (the manifest and unmanifest universe). *Integral* implies the embrace of a more complex

worldview, a more objective relationship to the self, and a more nuanced and wholesome capacity to respond to life.

These are not strict delineations. There is an emerging class of practitioners trained in holistic medicine and bioscience who have also studied extensively with indigenous healers. Such people may synthesize these worldviews, helping carry the wisdom of traditional use into modern, postmodern, and integral contexts.

What Makes a Molecule a Drug or a Medicine?

Whether or not a specific molecule is thought of and acts as a traditional medicine fostering communion with spirits, a repressive symptomatic medicine, a recreational drug, or an integral medicine that catalyzes evolution depends on the shared intention of patient and practitioner. Intention delimited by worldview sets the context for ingesting the substance and relating to its effects. I use the term *drug* to refer to the use of a substance for the purposes of self-medication, symptomatic repression, or entertainment. When I use the term *medicine* in relationship to entheogens, I refer to their use in a consciously held context of transcendence and evolution.

As of this writing, the word *entheogen* is not included in Merriam-Webster's dictionary. Wikipedia defines entheogens as "a class of psychoactive substances that induce any type of spiritual experience aimed at development or sacred use. The term *entheogen* is often chosen to contrast recreational use of the same drugs" (Entheogen, 2019). The use of entheogens in a biomedical context is significant in that it is a rare, or perhaps even singular, example of the application of medicine with potentials beyond palliative care and symptomatic repression. One may wonder to what extent the materialist worldview of biomedicine is at odds with the capacity of entheogens to address issues of the subtle self. This raises the question, is biomedicine philosophically equipped to safely and effectively prescribe entheogens? My read of the evidence is that it is not.

For example, the treatment of depression with ketamine in a biomedical context is likely to be viewed by both physician and patient no differently than the administration of a drug for symptomatic relief. Any subtle dimensions of the patient's experience are likely to lack sufficient context to catalyze development in a way that might promote sustained well-being. Thus, we may question the long-term benefit of the approach as well as its possible negative side effects.

In integral medicine the practitioner's integrity, and shared intention in the therapeutic relationship, sets the foundation for a developmental context (Jarrett, 2018, 2019a, 2019b). While the biomedical context for administering ketamine symptomatically tends to lack such values, it is possible that the patient might engage with other healers who provide a relatively more enlightened context for framing the patient's subtle experience. However, this option is relatively more available to those who are better educated, well-off, and perhaps less likely to pursue biomedicine for care to such matters.

The use of these potentially powerful medicines as drugs in the context of recreational use or biomedical prescription poses risks to health through ignorance of, or a casual relationship to, their potential function as catalysts of change. Due to the potency of the substances in question, insight that leads to development is possible, though less likely, absent right intention and philosophical context. Respecting the developmental potentials of entheogens as medicines of the soul and gateways to the subtle states seems imperative. Failing to frame their use in a developmental context has the potential to do harm in ways I discuss below.

We may also distinguish between natural plant medicines that have evolved along with us for millions of years according to the principles of dependent origination and molecules created in laboratories that have no natural resonance with humanity. Plant medicines have been used for thousands of years in the context of the naturalistic worldviews of indigenous cultures with their use guided by skilled practitioners.

Interior Mechanisms of Action

From a functional perspective, entheogens work to dissolve the boundaries between self and other that are delimited by ego as the separate-self sense. Ego as the I-sense can be understood as both a stage and a line of development. As a stage, the consolidation of ego allows us to locate the self in time and space through the storage and retrieval of memories in the form of thought, feeling, sensation, and emotion. Ego brings the disparate parts of the self under one central authority. The mental-ego has the ability to suppress lower impulses while empowering rationality as a basis for self-actualization. As a stage of development, self-

actualization of ego is the foundation for healthy transcendence.

As a line of development, ego can be looked at in two ways. From a psychological perspective, ego development can be mapped from the infant's first recognition of "other", to its appearance in the temper tantrums of a two-year-old, to the mental-ego, to the transpersonal stages, and beyond. From a spiritual perspective, ego can be taken as the resistance to wholesome integrative change wherever it appears in the developmental spiral. From an integral perspective, ego transcendence does not imply mythic notions of "ego death" but rather its relegation to being merely a part of the self-structure. No longer being the sole focus of identification can certainly feel like death to the ego!

Temporary dissolution of ego boundaries, especially when experienced in a collective context, can cultivate a greater sense of "we". Increased awareness of the intersubjective field of consciousness and a sense of oneness with the kosmos tends to be congruent with the emergence of greater care. As powerful as this experience may be while on the journey, the sustenance of it requires cultivation through enacting such insights in daily life.

Does Entheogenic Experience Alone Heal and Transform?

Subtle vision deconstructs waking life to reveal influences that are foundational in forming the structure of the mind and ego. Looking through subtle eyes, we may see through the illusion of separation. Many seekers hold the belief that mere experience of the transcendent dimensions of the self will liberate them from suffering within the inherently limited confines of the ego. While experience can provide insight and inspiration, it's the meaning we find in it, and our enaction of it, that catalyze evolution. Intention is the foundation of development and is actualized when we discover the imperative, and consequences, of changing our lives to become living reflections of the revelations found in altered states (Jarrett 1998, 2003). Learning from the sacrifices required to embody higher values, we cultivate the humility, compassion, and wisdom to help others navigate their own suffering.

Recognizing a context of oneness challenges us by revealing the aspects of self that sustain the illusion of separation. This is the face of ego as pride, separation, and superiority. It is when we set our intention on greater integrity that we meet those parts of the self-committed to maintaining the status quo. This places consciousness squarely between the competing motives of evolution and inertia as they vie for attention and identification. What we attend to grows in consciousness, engenders identification, and is ultimately enacted in the world to reinforce root motivation. Thus, experience alone, no matter how inspiring or insightful, doesn't necessarily engender lasting change. It is the nature of our relationship to experience, as set by will, philosophical context, and ultimately action, that is most important.

Set and Setting

Entheogenic research has emphasized the importance of both "set" and "setting" in establishing the proper context for engaging with these medicines. *Set* refers to mindset, the general state of mind of the individual engaging with the medicine, and *setting* refers to the ambiance of the location where engagement is taking place. Set might be expanded to include state and stage development as well as the individual's intention for engaging with the medicine. Set and setting must be consciously influenced by the practitioner, who must model clarity of intention regarding the responsibility of the participant/patient to respect the medicine by enacting meaningful change in relationship to what is revealed. The practitioner must help the patient cultivate this foundation through physical conditioning (exercise and diet), philosophical context (reading and discussion), and goal setting (appropriate to their place in their journey). The notion of setting might be expanded beyond the mere locale of engagement to an appreciation for the culture and societal structures that define the greater context in which it is occurring.

Cautions and Concerns

Ideally, under the guidance of a qualified guide, subtle insight is afforded in accordance with the degree of engagement and progress made by the traveler (patient, student) as deemed suitable on an individual basis. The practitioner makes key discernments regarding person, place, practice, time, and dose to help the traveler each step of the way. This is very different from a biomedical context involving the administration of ketamine

symptomatically by a physician or in the casual contexts in which entheogens are consumed for their entertainment value. Simply put, using potent medicines as a rocket sled into the subtle states without proper physical, psychological, emotional, philosophical, and intentional preparation poses all sorts of risks to the body, mind, and soul in ways that can introduce distortions, thus compromising them as vehicles for spirit/consciousness.

Ideally, higher-state experience occurs under the guidance of a teacher who has traveled the terrain and has a significant measure of victory regarding stage attainment in the face of the demands of higher-state realization. Traditionally, such guidance occurs in the context of a teaching and a community. Absent such guidance, a proper philosophical basis, and a community of shared values, higher-state experience can lead to stagnation, regression, depersonalization, and even decompensation in those with insufficient ego development. As my teacher, acupuncturist and psychiatrist Leon Hammer, has always emphasized, "One must have an ego before they can transcend it". Because gates open two ways—toward origin and future potentials—partaking in practices that open these portals can lead to either regression or evolution depending on the condition of the individual taking them.

There are medicines for navigating the subtle states that are more gentle, nuanced, and gradual than the ingestion of entheogens (which are generally *not* subtle in effect!). Meditation, yoga, qigong, tai chi, acupuncture, herbalism, homeopathy, and transpersonal psychology, for example, all offer the opportunity for transcendence and development in the subtle dimensions of the self.

However, it bears repeating: medicine is state and stage appropriate. Medicine serving one individual can harm another, and that which is developmental at a specific moment in life can cause stagnation or regression at an earlier or later time. For example, meditation is one of the most effective practices for the sake of waking up; yet if a person with weak ego formation engages in meditation, they can regress. I testified as an expert witness in a case where an acupuncturist had suggested Sufi meditation techniques to a patient with borderline personality disorder with unfortunate consequences.

This illustrates the important principle that, while we may have higher-state experiences far above the gravitational center of our actual development, to integrate that higher state as a ground for stage development will require an integral approach entailing physical, emotional, intellectual, and ethical training. The ethical line of development is imperative because the complementary risk to decompensation in light of poor ego development is ego inflation. This manifests in the wake of higher-state experience when the individual concludes that their experience of transcendence means something special about them. Many teachers have fallen prey to pride, blinded by the light of transcendence to the suffering caused by denial of their shadow. In an evolutionary context, "final enlightenment" as the "end of development" is a myth. The ego is always present, learning from every insight we have and using it for its own purpose. Entheogens open a portal to the subtle states, and the sudden influx of light and energy can greatly inflate the ego's power in its quest for dominion over the self and others. Thus, regression and inflation are two perils on the path.

The function of a guide through higher-state experience is both necessary and potentially fraught with difficulty. It is easy to project upon the guide, blinded by the light of transcendence to their shadow. It seems necessary, but not sufficient, for a practitioner of entheogens to have substantial experience with them. It is imperative that the practitioner has substantial stabilization in the subtle self as well as in ethical development. From the perspective of integral development, this means waking up (state attainment), growing up (stage attainment), and cleaning up (ethics).

Subtle-state experience deconstructs waking life into a flow of symbolic imagery and metaphor. What is revealed in the subtle states will reflect the quality of mind and the state and stage development of the patient and practitioner perceiving and interpreting it. A shaman (magic-mythic) practicing this medicine in the context of an indigenous tradition, a physician (modern-rational) administering a drug, a postmodern practitioner (pluralistic-relativistic) conducting therapy or fancying themselves a shaman, and an integral practitioner (vision-logic) will all hold their experience in different contexts. Each will generate a story with potential meaning for a specific patient at a given moment in life, and each can speak with authority to different states and stages in the archeology of the self-structure.

Ideally, the practitioner of subtle medicine should have a top down perspective on the nature and content of the subtle realm. As dreamtime deconstructs waking life, we may ask, "from the perspective of deepest sleep, where are our

dreams?". Subtle medicine may rectify the soul's condition to render it a more efficient vehicle for the transmission of spirit with greater fidelity. Yet the light of conscious spirit, when turned back upon the subtle realm, sees through it back to its own source rendering apparent complexity, in the sense of Gebser, "translucent". It is imperative for the practitioner to recognize and communicate to the patient that, on the one hand, the acupuncture points, the chakras, the condition of the soul as revealed through subtle medicine are knots that must be untied and, on the other hand, nothing is in the way. Healing and finding are at once a process and they don't take time, the path and the goal are one.

It is this recognition, born of the light of spirit that is the best torch through which to navigate the subtle realm. Mythic consciousness tends to create and literally interpret myth in relationship to subtle experience. Modern-rational consciousness tends to negate this domain, seeing it as a byproduct of brain chemistry or relegating it to psychology. Postmodern consciousness in its deficient mode tends toward the pre/trans fallacy: confusing post personal stages of development with pre personal stages of primary process. In its efficient mode, postmodernism is the stage at which re-enchantment commences. Ideally, the integral practitioner is able to hold all these views contextually in regard to the patient.

Without an integral perspective, one risks getting lost in what Aurobindo terms the "intermediate zone".

The Intermediate Zone

The subtle state—as distinct from the causal and nondual—is recognized as an intermediate zone in many traditions. Aurobindo elaborates:

> This is in fact an intermediary state, a zone of transition between the ordinary consciousness in mind and the true yoga knowledge. One may cross without hurt through it, perceiving at once or at an early stage its real nature and refusing to be detained by its half-lights and tempting but imperfect and often mixed and misleading experiences; one may go astray in it, follow false voices and mendacious guidance, and that ends in a spiritual disaster; or one may take up one's abode in this intermediate zone, care to go no farther and build there some half-truth which one takes for the whole truth or become the instrument of the powers of these transitional planes—that is what happens to many sad haks and yogis. (Aurobindo, 1972)

The fetus, infant, and young child exist in states and stages of pre personal simplicity; the sage attains stages of post personal simplicity. Between the two there is a journey through apparent personal complexity and a lifetime of cultivation.

While entheogens may engender higher-state experience demonstrating future potentials, these are only embodied through enactment requiring clear intention, sacrifice, hard work, and proper philosophical context. Such work entails facing our shadow, motives, values, and resistance to making our lives a living reflection of the higher truths that have been revealed to us (such as the constructed nature of ego). Necessarily this involves facing the ego's resistance to relinquishing it as the sole source of identification. Like a child with a new sibling, the ego that had been the center of attention rebels by doing whatever it can to maintain its place. New and higher values are a threat to its sense of supremacy and autonomy. The ego locates itself in time and space through fixed relationships to people, things, thoughts, beliefs, and behaviors. When values change, relationships change, and this is perceived by the ego as a threat. Thus, the ego, having access to the body and contents of the mind, arouses thought, feeling, sensation, and emotion in a desperate effort to contract perspective and preserve the status quo. Generating doubt, cynicism, pride, and physical symptomatology, ego endeavors to contract perspective back onto the fears and desires of the personal sphere (Jarrett, 1998).

If we are to become a living representation of higher values, then the relationships that tether us to the known will be threatened, and this is terrifying to ego as the separate-self sense that maintains the illusion of boundary by keeping its focus on the known, the contents of consciousness. The ego represses what is seen in the higher state on a continuum of repression from convenient forgetting to outright cynical denial. It can also deny by continuing to consume experience under the auspices of needing *more proof*, *more time*, and *not being ready yet*. Waking up may take time, but ego, as the habituated momentum to preserve the separate-self sense, is the part of us that *wants* it to take more time and never be *now*.

The step from the personal into the transpersonal is so radical that one has the experience of stepping into a parallel universe and looking through a different pair of eyes. A common error is that people impressed by the difference between the gross-waking realm and subtle-soul dreamtime mistake it for nondual, "final" enlightenment. Such realizers as Aurobindo, Liu Yiming, and Patanjali caution against infatuation with its seductive powers. Hence Patanjali, author of the Yoga Sutras, warns, "These experiences resulting from *samyama* [control of the mind] are obstacles to samadhi, but appear to be attainments or powers to the outgoing or worldly mind" (Miller, 1996). Liu Yiming is adamant regarding false paths and delusions regarding attainment. He states, "The primordial basic essence is called the elixir. In the furnace of the eight trigrams it is forged into a pill. The deluded throughout the world vainly seek external medicines. By taking these, they wrongly imagine they can ascend to the clouds" (Cleary, 1986).

High intuition, foresight, and psychic capacity (what are called *siddhis* in yoga) are all attributes of awakening to the subtle realm. As advanced as these capacities may be relative to average development, they are mere substitute gratifications for wholeness when they define the goal of development. I have seen practitioners of qigong, for example, become enamored of "energy" and their capacity to receive, experience, and transmit it. For the sake of health and healing, the capacity to sense and work with qi is significant. But it's not an end in and of itself, and far greater insights into the human condition are afforded by the views of subsequent states and stages. Like money, qi is a resource that serves values, having no inherent value itself. Cultivating qi merely provides more resources to work in the world for better or worse.

There are three great risks in traversing this subtle, yet intermediate, terrain. The first is that for lack of sufficient stability in the stage development of early structures we may decompensate in the face of subtle realization. Cessation of repression opens gates two ways: toward the past we have hidden from ourselves and toward future higher potentials. The conflation of lower-stage primary process with the influx of higher-state experience offers much to sort out and can cause profound confusion (Jarrett, 1998, 2003). I've had two colleagues leave messages on my clinic voice mail informing me they had been enlightened, only to find out they had decompensated and been hospitalized (Grof & Grof, 2017).

The second risk is that one will become enthralled consuming subtle experiences rather than transforming in relation to them. As nirvana is endless, so is samsara. Use of entheogens, psychoanalysis, qigong, and seeded meditations over the long term can foster habitual identification with the subtle realm that impedes evolution. The orientation of "now I'm working on this, now I'm working on that" can waste precious time. The point of subtle experience is to deconstruct the ego's concretized self-image for the sake of understanding one's self as a soul evolving through a process. While archaic patterns of function and higher potentials may be revealed, our imperative is to transform our lives now in relationship to them, not to watch the same movie repeatedly. When we fail to transform in the face of subtle practice, the practice itself begins to reinforce stasis. Such practices are meant to rectify the soul for the sake of conducting light; the experiences they engender are not a final destination.

The third risk is that the work needed to rectify the soul that is to be done in the subtle realm is bypassed for the sake of blissful experience. As the soul is a vehicle for spirit, the subtle realm is the gateway to the causal witness and the nondual. In higher causal-state experience we may glimpse the clear light of heaven that shines from "on high". We may even take this experience into dreamless sleep, where ego is absent, and the soul is revealed to be nothing more than a construct. Thus, we may contemplate, "Where am I in my deepest sleep?". Attracted to the bliss and one-pointed simplicity of nondual clear light, many focus on "absolute" practices that afford access to these higher states. The issue is that witnessing and nondual bliss, as significant as they are, can merely represent disassociation, if the hard work to rectify the soul/psyche's early distortions has not been taken on through sincere engagement in the subtle domain. In this case, experiences of the absolute tend to inflate earlier unfaced pathologies rather than to purify them. We have seen this with heartbreaking consequences in the fall of so many teachers.

Thus, on the one hand, the top-down perspective of spirit is needed to illuminate navigation of subtle experience, and on the other hand, that very light can be used to avoid grappling with the issue of rectifying soul and psyche, a confrontation that is necessary as a foundation for the healthy emergence of spirit and integration of the self.

Having spent one's life entrained to ego, one's entry into the subtle realm can be exhilarat-

ing, terrifying, and potentially liberating. Impressed with the potency of the subtle world space that entheogens reveal, one might confidently make the statement, "The subtle realm is every bit as real as the concrete gross realm experienced during waking life!". And they would be absolutely correct. Yet through the perspective of the causal spirit that lies beyond it, the subtle world, as a source of personal identification, is also every bit as *unreal* as waking reality. This is to say that, like physical objects encountered in the gross realm, subtle objects (thought, feeling, emotion, sensation, and beings encountered in the subtle state) also have no self-nature from the perspective of witness consciousness. The subtle realm is a terrain that must be integrated for the sake of the emergence of the integral self. However, it is not a final destination, and the risks of not making enough of it are perhaps equal to the risks of making too much.

Subtle Pathologies

The access afforded by entheogens into soul depths and spiritual heights is not free. The dissolution of the boundary between self and Self results from the temporary disinhibition of the heart (fire) from the control of the kidneys (water). The resulting expansion of awareness is commensurate with temporary dissolution of the boundaries that allow the ego to locate itself in time and space. Excessive indulgence in the use of these molecules has the effect of depleting kidney *jing* (essence, potential) and "scattering" the heart *shen* (mind, spirit). This disturbance of the "heart-kidney axis" manifests in symptoms such as compromised boundaries, concentration, memory, dissociation, depersonalization, anxiety, panic attacks, and diminished motivation and will. Physical symptoms can involve poor hearing, weakened bones, vision, heart palpitations, and disorders of the nervous system (Jarrett, 2003).

Symptomatology can represent the somatization of the struggle between ego and soul. Physiologically, more energy is released than one's degree of cultivation can accommodate. In yogic illness as described by Aurobindo, the great intensity of subtle energies overload lower circuits, manifesting as allergies, intestinal issues, and heart problems (Wilber, Engler & Brown, 1988). Chinese medicine is perhaps the most evolved medicine for working with such subtle pathologies.

Subtle pathology can entail a "dark night of the soul" where strong experiences of the transpersonal cause conflict with vestiges of ego not adequately transcended. People can evidence split-life goals—"Should I live in or leave the world?". Recoiling from development here can lead to cynicism and rejection of higher truths that have been seen. There can also be psychic inflation as initial transcendent experiences convince the ego that *it* is enlightened.

It is my experience that a little bit of these powerful medicines should go a very long way. However, for them to do so, they must be consumed in an appropriately respectful context of soul development, with the deeper and higher meanings of the experiences they engender taken seriously through enactment and embodiment. Proper respect implies to me an understanding of the principle that "the door is narrow, but we must go deeply inwards". If intention is clear, and we take what is revealed seriously, just a single taste of transcendence can suffice to catalyze a lifetime of change. On the other hand, repeated consumption for the sake of entertainment, or failing to change in relationship to the insights afforded by subtle medicine for whatever reasons, may be construed as a form of disrespect. Such inappropriate indulgence tends to generate pathology and cause stasis, twisting and distorting the soul/psyche rather than liberating it.

The Practitioner

A basic tenet of integral medicine is that the practitioner's integrity is the foundation of efficacy with theory, knowledge, and technique serving that. The practitioner strives to be a living example of integrity to such an extent that it defeats the patient's cynicism regarding their own capacity to realize higher potentials. The gravitational force of the practitioner's integrity speaks for itself, catalyzing through resonance an alignment of the upright influences within the patient. This alignment compels a clear distinction in the patient between their assertion and the forces of cynicism, doubt, repression, resistance, and inertia. The practitioner of subtle medicine diagnoses and works with the conflict that arises between the upright influences and the force of ego that resists them. Fundamentally, we have two methods available to us as healers: eliminating the false and strengthening the presence of the real. The pres-

ence of the real flowers within manifests as the true, the good, and the beautiful (Jarrett, 1998).

In a subtle context, medicine is part of the living relationship between patient and practitioner and is not a "thing" given to treat a specific symptom and yield a predictable result. Rather, the process is an ongoing journey for both with the practitioner, having already traveled the terrain, just ahead on the path removing obstacles as they arise so that the patient experiences a natural flow of progression toward greater integrity. It is the practitioner's job to recognize imminent but as yet unrealized potentials within the patient whose identification with ego confines their sense of self to the personal sphere of biographical experience, restricting their sense of possibility. The practitioner's expanded view challenges the patient's repression of emergent potentials, and this can generate resistance as the status quo is threatened, as the patient begins to question identification with rules and roles internalized during early development.

Most people have a relatively superficial relationship to themselves as they identify with the biographical self. Many have little to no cultivated relationship to transpersonal or subtle dimensions of the self, including emptiness, the authentic self, soul, and spirit. Most cannot distinguish the conscience as the authentic voice of the soul from that of the superego as the internalized voice of early authority figures. While all dimensions of the self—gross, subtle, causal, and nondual—are always present, most tend to interpret experience through a strictly personal lens. A significant part of the healer's job is to help patients reframe their experience in deeper, higher, more nuanced ways for the sake of cognizing and responding to experience with increased complexity and from a more wholesome motive.

The Chinese character *ming* (明) depicts the sun and the moon having the outer meaning of clarity and the inner meaning of enlightenment. The sun may be taken as an emblem of the apparent reality of waking life, while the moon symbolizes sleep and the flow of symbolic content while we dream. Another character *ming* (名) depicts the moon on the left over a mouth on the right and means name. At night when the moon is out, our face (as a metaphor for ego) cannot be seen, and thus we must identify ourselves by name. From the perspective of the higher states, our waking life as typically viewed through the perspective of the ego is deconstructed into a flow of multivalent symbols. In waking life a pen is a pen, a car is a car, and a snake is a snake. But in the higher states there are no "things". Rather, all appearances are symbolic, having multiple faces reflecting content pregnant with meaning.

For the practitioner of subtle medicine, the patient's demeanor and the conscious and unconscious content of their words evokes a steady stream of symbols, as the solidity of the treatment room surroundings gradually softens. Images from the names of acupuncture points, herbs, herbal formulas, and Yijing trigrams and hexagrams impress themselves upon me at key points in the dialogue. A spoken metaphor or recounted dream image may have several faces of gross, subtle, and causal reflection throughout a patient's life. The emergent image is the basis of the medicine that is then enacted with speech, gesture, needle, herbal prescription, and life-style recommendation. Central to the enactment of healing is a metaphor that captures the dynamic, multivalent face of the patient's condition and experience, both conscious and unconscious.

Just as the plant spirit in an entheogenic journey may reveal hidden themes and patterns of events throughout life, the practitioner may fulfill this function of providing subtle reflections. Insight into these patterns is afforded by mastering the many systems of correspondence elaborated in Chinese medicine. We should help those we are guiding gain perspective on the constructed and dysfunctional nature of how they frame meaning in a way that perpetuates unnecessary suffering to self and others. Helping to reframe experience in a more creative and less victimized light is a central role of the practitioner of subtle medicine.

The Gatekeepers: Who Controls Access to Higher States?

As entheogens go mainstream, it is imperative that the public is educated regarding their appropriate use, risks, and potential benefits. This raises the issue of who will be designated as the gatekeepers to these medicines and deemed worthy as a guide to the subtle dimensions of the self. The systems of education, standardized testing, and credentialing in the US that arise from the modern-rational and materialistic worldview hardly seem suitable to establishing a class of higher-state practitioners. Given the politics of consciousness and existing prohibitions against direct higher-state experience, can the government or medical establishment be trusted to make such discernments?

The tendency in culture is to repress new thought until it can be commodified, streamlined, contained, regulated, and bankrolled into profitability, often under the auspices of "raising standards". The sanitization of rock and roll by iHeart Media is but one example and, sadly, this is happening in the profession of Chinese medicine and holistic healthcare in general under the auspices of "integrative medicine" (Jarrett, 2015).

Seeking and finding a traditional practitioner of integrity (or any practitioner for that matter) is a process fraught with dangers from financial scams aimed to separate tourists in consciousness from their money all the way through sexual assault, a phenomenon that is now well documented (Sinclair & Labate, 2019). Further, there is the issue that traditional healers who are interpreting their experience in the context of a magic-mythic world space are not likely to be able to adequately translate the transcendent experiences of those at modern, postmodern, or integral stages of development in a way that might catalyze sustained transformation.

Designating physicians as gatekeepers to higher states of consciousness seems an unlikely way for individuals and culture at large to reap the substantial benefit that these medicines have the potential to offer. Framing entheogens as though they are repressive drugs that yield predictable results for specific symptoms and designating a professional class of providers (physicians, specifically) appears more likely to do harm than good. Physicians practicing in a reductionist, materialistic worldview simply don't have the depth, breadth, and height of understanding or life experience (let alone the clinical time) to meaningfully guide patients to navigate the subtle states of the self. It seems unlikely that all but the rarest physician will hold a philosophical context and have a high enough developmental center of gravity to appropriately contextualize higher-state experience for patients in a way that might lead to long-term benefit.

Culture at present has no agreed-upon standard of soul- or self-development appropriate to defining the role of one who might administer entheogens with integrity to their higher potentials. Rare, authentic traditional shamans from indigenous cultures are likely to embrace value systems that conflict with those who exist in modern, postmodern, and integral cultures. Physicians trained in a reductionist and materialistic approach to medicine focusing on symptomatic expression of the gross body lack the transpersonal values and development necessary to contextualize subtle dimensions of experience. Postmodern practitioners exist on a continuum from those who have apprenticed extensively in a traditional tribe under a shaman to psychotherapists with varying degrees of training and depth of insight to those who merely fancy themselves as "healers". People at an integral stage of development are rare, and those who practice medicine more rare. Many more people have a cognitive understanding of integral theory than have actualized that stage across a broad range of capacities and lines of development. Suffice it to say that the higher stages beyond integral are present in a small percentage of the population.

Despite this bleak assessment, progress is being made. The California Institute of Integral Studies (CIIS) has a certificate program in Psychedelic-Assisted Therapies and Research. The program's aim is to serve "a growing need for the training of skilled therapist researchers who will ideally seek advanced training for future FDA-approved psychedelic-assisted and entactogen-assisted psychotherapy research" (CIIS, 2019).

A process of dialogue among the various stakeholders in entheogenic medicine might prove helpful. A well-articulated consensus statement on the goals, efficacy, and ethical considerations in the practice and use of entheogens with ongoing and well-moderated comment by the public and various stakeholders could lay the groundwork for the next phase in the evolution of the medicine as it goes mainstream. In this regard a conference of stakeholders might also be of benefit.

Conclusion

Entheogens are a potent medicine for working in the subtle states, a dimension that for many of us represents a significant developmental step as we take responsibility for the rectification of our own souls, the soul of nature, and of humanity. Given the potential downsides, we should take care not to make too much of entheogens; yet in light of the repression and materialism that ails society today, we should also not make too little of them.

If the benefits that entheogens promise to a disenchanted world are to be realized, practitioners of this medicine who have developed through and beyond the subtle realm will need to emerge. Such practitioners must demonstrate a soul depth and uncommon integrity sufficient to guide others

through the process of self-authorship and transcendence. Approaching entheogens as drugs to be prescribed symptomatically according to the materialistic approach that prevails in medical culture appears at worst to be dangerous and at best to be merely scratching the surface of the benefits that these medicines might afford.

Both commodification of these medicines under the auspices of corporatism and a too-casual approach by many users threaten to undermine their appropriate use as medicines of the psyche and soul. Nonetheless, it seems the cat has gotten well out of the bag, and various stakeholders in subtle medicine bear responsibility to represent how entheogens might be used wisely and responsibly.

Beyond the potentials these medicines may hold for individual and cultural healing and evolution, it is the embrace of an integral perspective that values evolution of the self as a medical imperative that is most significant. Entheogens are merely one means to an end in the practice of subtle medicine. It is the valuation of human soul development with sensitivity to individual and cultural context that I find most compelling.

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