



AFFECTIVE TACTILE GROUNDING ON PSYCHEDELIC-INDUCED STATES AND TREATMENT OUTCOMES IN KETAMINE ASSISTED PSYCHOTHERAPY FOR ADULTS WITH MAJOR DEPRESSION: PRELIMINARY EVIDENCE AND MEDIATORS OF IMPROVEMENT TO SUPPORT CLINICAL UTILITY

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Abstract

Sub-anesthetic ketamine — a noncompetitive N-methyl-D-aspartate (NMDA) glutamatergic receptor antagonist — has come into psychiatric use as a groundbreaking intervention for major depressive disorder (MDD). Recently, studies have found ketamine assisted psychotherapy (KAP) to be significantly more effective in reducing depression than ketamine alone, given the chronic, refractory nature of MDD. To date, neither treatment paradigm has explored the utility of *grounding* during a largely dissociative experience. Such ego-dissolving, mind-altering, and reality-detaching effects of ketamine — otherwise known as derealization-depersonalization — can evoke both therapeutic and non-therapeutic responses. In the latter, patients may experience negative emotions such as fear and anxiety, as well as fragmented self-structures of identity, values, beliefs, and perceptions (disintegration), which attenuate clinical benefit. Here, we aim to test whether a low-force, sensory-based technique for psychophysiological regulation, Affective Tactile Grounding (ATG), can improve psychedelic-induced states during serial KAP to mediate treatment effect for major depression. Mechanisms of improvement (dissociation, emotional stability, nondual awareness, and psychological detachment) will also be explored. Twenty-four patients with MDD will be randomly assigned to receive six sessions of KAP plus ATG or KAP alone (sessions will include preparatory psychotherapy (30 minutes) and intravenous KAP (0.5 mg/kg + psychotherapy over 40 minutes)) along with one pre-treatment counseling session (60 minutes). A patient-centered, non-directive, and positive approach to psychotherapy, using psychodynamic and humanistic techniques, will be applied throughout each session based on patients' previously discussed needs, self-concept, and goals for treatment. Using this approach, psychotherapists will guide the therapeutic process while attempting to minimize personal bias or interfering with a patient's course for self-discovery. KAP will be scheduled on a weekly interval (two sessions per week over 21 days), with patients completing self-report measures at baseline and one-week post-intervention, in addition to clinician-administered measures immediately following each session. It is anticipated that adjunctive ATG will be associated with improvements in psychedelic-induced states during treatment to mediate KAP's anti-depressive effect. This randomized experiment will provide the first clinical evidence that ATG can improve psychedelic-induced states and overall treatment outcomes for adults with MDD who participate in ATG plus KAP.

Keywords: Ketamine, Ketamine Assisted Psychotherapy, Depression, Dissociation, Emotional Regulation, Self-Structure