

## THERAPEUTIC POTENTIAL OF PSILOCYBIN-ASSISTED THERAPY IN HOSPICE AND PALLIATIVE CARE

### *POTENCIAL TERAPÊUTICO DA TERAPIA ASSISTIDA POR PSILOCIBINA EM HOSPICE E CUIDADOS PALIATIVOS*

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#### **Abstract**

Psilocybin-assisted therapy (PAT) has gained recognition as an innovative intervention in hospice and palliative care, demonstrating potential in mitigating the psychological, spiritual, and existential distress experienced by patients with serious illnesses. This article explores the role of PAT within these care settings, emphasizing its influence on various dimensions of human suffering, as supported by recent research and the Theory of Self-Transcendence. Administered in a controlled environment, psilocybin facilitates transformative experiences, contributing to anxiety reduction and fostering acceptance of mortality. Studies suggest that these therapeutic effects are closely linked to mystical experiences induced by the substance, which enhance one's sense of connection and meaning. Furthermore, the Theory of Self-Transcendence provides a conceptual model for understanding how PAT can support personal development and well-being, even in contexts of vulnerability. It underscores that wellbecoming extends beyond merely alleviating suffering, representing an evolving process of

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transformation and acceptance. Despite its promise, PAT's clinical application remains constrained by ethical, regulatory, and cultural challenges. Addressing these obstacles necessitates collaborative initiatives, specialized training for professionals, and expanded research efforts to develop standardized, safe, and effective protocols. Ultimately, PAT emerges as a valuable therapeutic approach capable of bridging science and spirituality to enhance patients' quality of life during periods of profound vulnerability. By integrating this modality, hospice and palliative care can extend their scope beyond traditional biomedical treatments, offering relief from suffering in the context of serious and terminal illnesses.

**Keywords:** Palliative Care. Hospice. Psilocybin. Self-Transcendence.

**Resumo:** A terapia assistida por psilocibina (TAP) ganhou reconhecimento como uma intervenção inovadora em cuidados paliativos, demonstrando potencial para mitigar o sofrimento psicológico, espiritual e existencial vivenciado por pacientes com doenças graves. Este artigo explora o papel da TAP nesses ambientes de cuidados, enfatizando sua influência em várias dimensões do sofrimento humano, conforme apoiado por pesquisas recentes e pela Teoria da Autotranscendência. Administrada em um ambiente controlado, a psilocibina facilita as experiências transformadoras, contribuindo para a redução da ansiedade e promovendo a aceitação da mortalidade. Estudos sugerem que esses efeitos terapêuticos estão intimamente ligados a experiências místicas induzidas pela substância, que aumentam o senso de conexão e significado da pessoa. Além disso, a Teoria da Autotranscendência fornece um modelo conceitual para entender como a TAP pode apoiar o desenvolvimento pessoal e o bem-estar, mesmo em contextos de vulnerabilidade. Ela ressalta que o bem-estar vai além do mero alívio do sofrimento, representando um processo evolutivo de transformação e aceitação. Apesar de sua promessa, a aplicação clínica da TAP continua limitada por desafios éticos, regulatórios e culturais. Para enfrentar esses obstáculos, são necessárias iniciativas de colaboração, treinamento especializado para profissionais e esforços de pesquisa ampliados para desenvolver protocolos padronizados, seguros e eficazes. Em última análise, a TAP surge como uma abordagem terapêutica valiosa capaz de unir ciência e espiritualidade para melhorar a qualidade de vida dos pacientes durante períodos de profunda vulnerabilidade. Ao integrar essa modalidade, os cuidados paliativos podem estender seu escopo além dos tratamentos biomédicos

tradicionais, oferecendo alívio do sofrimento no contexto de doenças graves e terminais.

**Palavras-chave:** Cuidados paliativos. Cuidados de fim de vida. Psilocibina. Autotranscendência.

## Introduction

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The suffering associated with serious illnesses and end-of-life stages is a complex experience that extends beyond physical dimensions to encompass emotional, social, and spiritual—ultimately existential—dimensions. In this context, palliative care emerges as an essential approach aimed at alleviating the suffering of individuals with life-limiting illnesses, as well as their families and caregivers. Despite advancements in this field, many individuals with severe illnesses still face significant challenges, such as anxiety, depression, spiritual distress, and existential suffering, which often remain inadequately addressed by the therapeutic approaches most widely used and accepted in traditional clinical practice.

In recent decades, psychedelic substances have gained prominence as potential therapeutic options in hospice and palliative care. Recent studies suggest that, when administered in a controlled environment and under specialized supervision, psychedelics such as psilocybin can promote transformative experiences, reducing psychological and existential suffering and facilitating the acceptance of unavoidable conditions such as death (MAIA; BEAUSSANT; GARCIA, 2022; SCHIPPER et al., 2024). These findings have sparked the interest of the scientific and clinical communities, highlighting the need to explore their application in various healthcare settings.

This text provides an overview of the therapeutic potential of psilocybin (through Psilocybin-Assisted Therapy - PAT) in hospice and palliative care, based on recent studies and the theoretical framework of the Theory of Self-Transcendence (REED, 2024). The aim is to offer a critical and evidence-based

perspective on how this substance can be integrated into the care of patients with severe illnesses, promoting well-being during moments of intense vulnerability.

## The concept of Total Pain

Palliative care is defined as a holistic and active approach focused on alleviating the suffering of individuals facing serious illnesses, particularly in advanced or end-of-life stages. According to Radbruch et al. (2020), the primary goal of palliative care is to improve the quality of life for individuals enduring severe health-related suffering (especially those nearing the end of life), as well as their families and caregivers, addressing the multifaceted dimensions of human suffering: physical, psychological, social, and spiritual.

Palliative care and hospice care share the common goal of relieving suffering and improving quality of life, but they differ in their timing and focus. Palliative care is a comprehensive approach that can be initiated at any stage of a serious illness, regardless of prognosis, and can be provided alongside curative or life-prolonging treatments. It addresses physical, emotional, social, and spiritual suffering. Hospice care, on the other hand, is a part of palliative care. It is designed to meet the needs of individuals in the end-of-life phase, typically offered when a patient has a life expectancy of six months or less (HUI et al., 2014). The focus shifts entirely to comfort, symptom management, and dignity in the final months or weeks of life. While all hospice care is palliative care, not all palliative care is hospice, as palliative care extends beyond end-of-life scenarios and can be integrated early in the disease trajectory.

A central concept in hospice and palliative care is “total pain,” introduced by Cicely Saunders, a pioneer of the modern hospice movement. Total pain describes the complex and multifaceted experience of suffering at the end of life, which extends beyond the physical symptoms of illness to include emotional distress, social challenges, and spiritual dilemmas (JULIÃO et al., 2020; RATTNER, 2023). This perspective acknowledges that pain and

suffering are influenced by interconnected factors, such as social isolation, fear of death, loss of meaning in life, and existential challenges.

Managing total pain in hospice and palliative care requires an interdisciplinary and integrative approach that combines traditional clinical interventions with strategies tailored to the individual needs and specificities of each patient. However, even with these advancements, many individuals continue to experience various types of suffering, including spiritual and existential distress, which can be profoundly debilitating and difficult to alleviate through conventional biomedical approaches. Existential suffering manifests as anguish and uncertainty arising from efforts to understand and cope with one's existence and its implications. According to Sullivan and Palitsky (2018), these issues involve reflections on mortality, the need for connection, uncertainty about the future, and the exercise of individual freedom. Such concerns are often associated with the search for meaning in life, which may be grounded in either religious or secular worldviews (PALITSKY et al., 2023). Spiritual suffering is a type of existential distress linked to disconnection from essential elements such as purpose, meaning, hope, and transcendence. It frequently arises in situations of conflict between spiritual beliefs and critical events or when spiritual needs, such as trust and hope, are unmet. In hospice and palliative care, interventions that foster reconnection with spiritual values and self-transcendence, such as psychedelic-assisted therapies, have shown promise in alleviating this type of pain (GARCIA; MAIA; REED, 2024).

Within this context arises the need and interest in innovative interventions, such as psilocybin-assisted therapy. Studies have demonstrated that psychedelic substances, when used appropriately, can address deeper aspects of total pain, promoting psychological, spiritual, and existential relief.

## **Psilocybin-assisted therapy in Hospice and Palliative Care: current evidence**

Psilocybin-assisted therapy (PAT) has garnered increasing attention as a potential therapeutic intervention to alleviate psychological and existential suffering in patients with serious illnesses. Recent research has explored its effects in hospice and palliative care settings, demonstrating significant benefits across multiple dimensions of the human experience.

Scientific evidence has highlighted psilocybin's therapeutic potential for treating individuals with severe illnesses, particularly in relieving symptoms of anxiety, depression, and existential distress. A pivotal early study in this field was conducted by Grob et al. (2011), who investigated the impact of psilocybin on anxiety reduction in patients with advanced cancer. This study, the first in over 35 years to explore the therapeutic use of psilocybin, underscored its effectiveness in cases of cancer-related anxiety. A significant advance followed with the work of Ross et al. (2016), which demonstrated substantial reductions in anxiety, depression, and existential distress in patients with advanced cancer. These benefits, lasting up to 6.5 months, included improvements in spiritual well-being and quality of life, mediated by the mystical experiences induced by psilocybin. Griffiths et al. (2016) compared the effects of low and high doses of psilocybin in advanced cancer patients, highlighting that higher doses led to significant improvements in mood, quality of life, optimism, and reduced death anxiety. Six months post-treatment, 80% of participants reported clinically significant reductions in depression and anxiety, alongside enhanced self-esteem, relationships, and spirituality. More recently, Schipper et al. (2024) conducted a systematic review of randomized clinical trials on psychedelic use for treating anxiety, depression, and existential distress in individuals with serious illnesses. The findings suggest that substances such as psilocybin and LSD are effective for symptom relief, with good tolerability and no reports of severe adverse events.

These findings position psilocybin as a promising therapeutic option for the care of patients with severe illnesses, paving the way for new research and clinical applications. However, despite these promising results, significant challenges remain, including ethical and regulatory barriers and the need for further research to establish safe and effective protocols. Addressing these

obstacles is critical to making PAT an integrated and accessible option in hospice and palliative care.

## **Psilocybin-assisted therapy and alleviating suffering in patients with severe illness: the Theory of Self-Transcendence**

The Theory of Self-Transcendence, developed by Pamela Reed (2024), posits that individuals, especially those in vulnerable situations such as severe illness or aging, possess an intrinsic potential to expand their personal boundaries to find meaning, purpose, and well-being. This expansion can occur in four primary ways: internally (through introspection and heightened awareness of values and beliefs), externally (through interpersonal and environmental connections), transpersonally (through spiritual or religious experiences), and temporally (by creating meaning in the present while connecting with the past and future) (REED, 2024).

The theory emphasizes that self-transcendence is a crucial mediator of “wellbecoming”, a concept that transcends traditional notions of well-being as a static state or mere absence of suffering. Instead, it views well-being as a dynamic, continuous, and evolving process, particularly relevant in situations of vulnerability. In hospice and palliative care, the Theory of Self-Transcendence offers an approach that highlights “healing” (transformation and personal growth) in contrast to “curing” (biological recovery or functional restoration) (STEINHORN; DIN; JOHNSON, 2017). While the biomedical model often focuses on curing diseases and restoring physical function, healing acknowledges that well-being can be achieved even in the absence of physical cure (STEINHORN; DIN; JOHNSON, 2017).

Self-transcendence aligns with healing by proposing that individuals facing severe illnesses can expand their perceptions, find meaning, purpose, and acceptance. This transformation allows suffering to become an opportunity for growth and resilience, enabling patients to achieve inner peace and well-being, regardless of the possibility of physical recovery.

The theory provides a framework for understanding how therapeutic interventions, such as PAT, can promote self-transcendence, thereby alleviating suffering and fostering well-being even in challenging circumstances. PAT has emerged as a promising therapeutic tool to facilitate self-transcendence. According to scientific literature, patients undergoing PAT often report transformative experiences, frequently described as mystical, that foster a sense of connection to something greater than themselves. These experiences can help reduce fear of death, increase acceptance of inevitable circumstances, and provide a new understanding of life and suffering.

It is argued that psilocybin's effects are consistent with the central elements of Reed's theory, stimulating exploration of existential and spiritual questions while fostering a broader perspective on life. Furthermore, the controlled and safe therapeutic environment provided during PAT sessions helps patients integrate these experiences, enhancing emotional resilience and spiritual well-being. Thus, psilocybin acts as a catalyst for self-transcendence, aiding patients in achieving psychological, spiritual, and existential well-being even in the face of vulnerability. By integrating the Theory of Self-Transcendence as a conceptual foundation, PAT can be understood as a holistic approach that enhances comprehensive care for patients with severe illnesses. The integration of traditional clinical practices with innovative therapeutic approaches offers new possibilities for alleviating suffering and improving quality of life for individuals with severe illnesses.

## Challenges and opportunities

Despite the growing interest and promising evidence regarding the use of PAT in hospice and palliative care, its integration into clinical practice faces significant challenges that must be overcome for this approach to become a safe and accessible reality. Among the main challenges are ethical, legal, cultural, and scientific issues, which demand careful attention and interdisciplinary collaboration.



From an ethical and legal perspective, the use of psilocybin remains heavily restricted in many countries, including Brazil, due to strict regulatory classifications that categorize it as a controlled substance. This limits the conduct of clinical research and the development of therapeutic protocols. Overcoming these barriers requires a joint effort from scientists, healthcare professionals, policymakers, and society, fostering dialogues grounded in scientific evidence and patient safety.

Culturally, the stigma associated with psychedelic substances poses another obstacle. Psilocybin is often mistakenly associated solely with recreational use, hindering its acceptance as a therapeutic tool. Public education campaigns and the dissemination of rigorous research findings are essential to demystify its use and highlight its therapeutic potential in hospice and palliative care.

Scientifically, there is an urgent need to expand research on PAT to establish more robust evidence regarding its safety and efficacy. This includes conducting large-scale clinical trials, defining standardized administration protocols, and understanding the mechanisms by which psilocybin promotes psychological, spiritual, and existential changes. Furthermore, exploring best practices for integrating this approach into clinical contexts, while considering each patient's individuality, is crucial.

One of the main challenges for the safe and effective implementation of PAT (and psychedelic-assisted therapies in general) is the need for proper training of professionals to serve as therapists in this field. These interventions require specific skills beyond traditional therapeutic practices, including guiding sessions in altered states of consciousness, providing emotional support during intense experiences, and facilitating the integration of post-session insights (MAIA; BEAUSSANT; GARCIA, 2022; GARCIA, BONIFÁCIO; MAIA, 2024). Investing in training programs that combine theoretical foundations, supervised practice, and patient-centered approaches is essential to ensure that professionals are prepared to deliver qualified, ethical, and safe care, maximizing therapeutic benefits while minimizing potential risks.

On the other hand, the opportunities are vast. PAT offers an innovative model of care that transcends the limits of conventional interventions by addressing the suffering associated with severe illnesses in an integrated and profound manner. This approach has the potential to transform palliative care by providing relief to patients whose needs are not fully met by current therapies. Additionally, the integration of psilocybin can open doors for new collaborations across disciplines such as healthcare, psychology, spirituality, and ethics.

Finally, Brazil, with its rich tradition of integrative practices and cultural knowledge of medicinal plants, could play a prominent role in this field. The development of local research and policies that balance scientific innovation with cultural sensitivity could position the country as a global leader in the therapeutic application of PAT in hospice and palliative care, offering relief and hope to individuals in extreme vulnerability.

## Final considerations

PAT represents an innovative and promising approach to alleviating the existential, psychological, and spiritual suffering of patients in hospice and palliative care. Initial evidence from scientific research indicates significant impacts on quality of life, promoting acceptance, reducing fear of death, and fostering a renewed sense of meaning and connection to life. When associated with the Theory of Self-Transcendence, PAT emerges as a therapeutic possibility that extends beyond symptom management, offering an integrated perspective that values the entirety of the human experience during moments of profound vulnerability.

However, ethical, regulatory, and cultural challenges must still be addressed for its therapeutic use to become a widespread reality. Progress in this field requires collaborative efforts among scientists, healthcare professionals, policymakers, and society as a whole, as well as the expansion

of scientific research to establish the safety and efficacy of psilocybin in clinical contexts.

Looking ahead, PAT has the potential to broaden therapeutic options for alleviating the suffering of individuals with severe illnesses, addressing aspects of distress that often remain unresolved by traditional biomedical approaches. PAT could represent an important step in the pursuit of solutions to alleviate human suffering, contributing to a more compassionate (GARCIA; BONIFÁCIO; MAIA, 2024), integrated, and effective model of care. By prioritizing this pursuit as a society, psilocybin holds the potential to bring hope and dignity to life's most challenging moments.

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