Few people on this planet know more about nonordinary states of consciousness than Czech-American psychiatric researcher Stanislav Grof, M.D., Ph.D. Grof is one of the founders of the field of transpersonal psychology, the co-developer with his wife Christina of Holotropic Breathwork therapy, and has been a pioneering researcher into the use of non-ordinary states of consciousness for purposes of healing, personal growth, and spiritual transformation for over fifty years. He is also one of the world’s experts on LSD psychotherapy, and has supervised more legal LSD sessions that anyone else on the planet. Grof’s near-legendary work at the Spring Grove Hospital in Maryland--treating alcoholics and terminally ill cancer patients with LSD--is some of the most important psychedelic drug research of all time.

Although initially interested in film making, Grof received his M.D. from Charles University in Prague, Czechoslovakia in 1956, and he completed his Ph.D. (Doctor of Philosophy in Medicine) from the Czechoslovakian Academy of Sciences in 1965; he also completed a 7-year training as a Freudian psychoanalyst. Grof became the Principal Investigator of a program exploring the therapeutic and heuristic potential of psychedelic substances at the Psychiatric Research Institute in Prague. In 1967, he came to the United States as Clinical and Research Fellow at Johns Hopkins University School of Medicine and at the Maryland Psychiatric Research Center (MPRC) in Baltimore, Maryland. He went on to become Assistant Professor of Psychiatry at Johns Hopkins and Chief of Psychiatric Research at MPRC. It was during this time that Grof, Walter Pahnke, Sanford Unger, and others ran the studies at the Spring Grove Hospital in Maryland, treating alcoholics and terminally ill cancer patients with LSD. The results from these studies, which ran from 1967 to 1972, were extremely encouraging.

From 1973 through 1987, Grof was Scholar-in-Residence at the Esalen Institute in Big Sur, California. During this time, he and his wife Christina developed Holotropic Breathwork
therapy, as a non-pharmaceutical means to induce an LSD-like non-ordinary states of consciousness for self-exploration, personal growth, and therapy. They also founded the Spiritual Emergency Network (SEN), an affiliation of psychologists and psychiatrists who offer psychological help to people undergoing a psycho-spiritual crises. In fact, the Grofs coined the term “spiritual emergency to distinguish certain psychologically transformative episodes from schizophrenia and other forms of psychosis. This concept inspired the creation of a new category – Religious and Spiritual Problems - in the official Diagnostic and Statistical Manual (DSM-IV). In 1987, the Grofs founded the Grof Transpersonal Training (GTT) for the training and certification of practitioners in Holotropic Breathwork, and together they have presented workshops and lectures throughout the world.

Grof was the founding president of the International Transpersonal Association (ITA), which was founded in 1977, and he is the originator of some very compelling psychological theories. Grof developed a theoretical framework for understanding LSD experiences and spiritually transformative states of consciousness that is based upon a memory of one’s experience in the womb or a trauma with the birth process. This theory postulates four “basic perinatal matrices” (BPMs), that correspond to different stages in the birth process. He also described and mapped another new large domain in the unconscious that he calls transpersonal. These concepts are discussed at length in a number of Grof’s books. Grof is the author or coauthor of over twenty books, including Realms of The Human Unconscious, LSD Psychotherapy, Beyond the Brain, The Cosmic Game, When The Impossible Happens, The Ultimate Journey, The Stormy Search for the Self, and Spiritual Emergency (the last two co-authored with Christina Grof).

Grof is currently a distinguished adjunct faculty member at the California Institute of Integral Studies (CIIS) in San Francisco, where he teaches, and he continues to lecture throughout the world. Grof has had over 140 articles published in different scientific journals, and he served on the editorial boards of the Journal of Transpersonal Psychology, the Journal of Humanistic Psychology, the Re-VISION Journal, and others. Grof received the prestigious VISION 97
award, which was granted by the Foundation of Dagmar and Vaclav Havel in Prague on October 5, 2007. For more information about Grof’s work see: www.holotropic.com and www.stanislavgrof.com.

I interviewed Grof on March 23, 2007. I found Stan to be unusually elegant with words his ideas were simply mesmerizing. We spoke about psychedelics and creativity, the reality of encounters with otherworldly beings, what happens to consciousness after death, and the difference between a spiritual emergency and a psychotic episode.

David: What originally inspired your interest in psychiatric medicine?

Stan: When I was eighteen years old, I was finishing what we call “gymnasium” in Europe -- the equivalent of high school in America. I love to draw and paint and my original plan was to work in animated movies. I had already had an introductory interview with the brilliant Czech artist and film-producer Jiří Trnka, and I was supposed to start working in the Barrandov film studios in Prague. But that situation change radically when a friend of mine lent me Freud’s introductory Lectures to Psychoanalysis. I started reading the book that very evening and I couldn’t put it down. I read through the night and into the next day. Then, within a few days, I decided that I wanted to be a psychoanalyst and I let the animated movies go. I enrolled in the medical school and got in touch with a small group of people in Prague interested in psychoanalysis; it was led by Dr. Theodor Dosužkov, the only psychoanalyst who had survived the Second World War in Czechoslovakia. Most of the psychoanalysts were Jewish, and those who did not leave ended up in gas chambers.

David: How did you become interested in psychedelics and non-ordinary states of consciousness?
Stan: When I began my career as a psychiatrist, I was initially very excited about psychoanalysis, but then - when I tried to apply psychoanalysis in my clinical practice - I started seeing its great limitations. I was still very excited about the theory of psychoanalysis, but was increasingly disappointed with what you can do with it as a clinical tool. I was realizing that there was a very narrow indication range. You had to meet very special criteria to be considered a good candidate for psychoanalysis, and even if you met those criteria, you had to be prepared not for months, but for years. And I realized that, even after years, the results were not exactly breathtaking. I found it very difficult to understand why a system that seemed to explain everything would not offer some more effective solutions for emotional and psychosomatic disorders.

In order to become a psychoanalyst one had to first study medicine. In medicine, if you really understand a problem, you are usually able to do something quite effective about it--or if you can not, then you can at least understand the reasons for your failure. We know exactly what would have to change in relation to cancer or AIDS for us to be able to more successful in the treatment of these diseases. But in psychoanalysis I was asked to believe that we have full understanding of what’s happening in the psyche, and yet we can do so little over such a long period of time. So I found myself in a crisis, where I started to regret that I had chosen psychiatry as my profession. I was thinking back nostalgically about the animated movies, wondering if that would have been a better career choice.

At that time, I worked at the Psychiatric Department of the School of Medicine in Prague and we had just finished a large study of Mellaril, one of the early tranquilizers. This was the beginning of the “golden era of psychopharmacology.” The first tranquilizers and antidepressants were being developed and it was believed that most of the problems in psychiatry would be solved by chemistry. So we conducted a large study with Mellaril, which came from the pharmaceutical company in Switzerland called Sandoz. We had a very good working relationship with Sandoz, which meant the usual fringe benefits that psychiatrists get
from pharmaceutical companies: compensation for the trips to conferences where one reports about their preparations, supply of relevant literature, and free samples of various new preparations that they produce.

As part of this exchange, the psychiatric department where I worked received a large box full of ampoules of LSD. It came with a letter which said this was a new investigational substance that had been discovered in the laboratories of Sandoz by Dr. Albert Hofmann, who happened to intoxicate himself accidentally when he was synthesizing it. The letter described how the son of Albert Hofmann’s boss, Zurich psychiatrist Werner Stoll, conducted an early pilot study with a group of psychiatric patients and group of “normal” volunteers. He came to the conclusion that LSD could have some very interesting uses in psychiatry or psychology. So Sandoz was now sending samples of LSD to different universities, research institutes, and individual therapists asking for feedback if there was a legitimate use for these substance in these disciplines. In this letter they suggested two possible uses.

One suggestion was that LSD might be used to induce an experimental psychosis. It could be administered to “normal” volunteers and conduct all kinds of tests -- psychological, biochemical, physiological, electro-physiological -- before, during, and after the session. This would provide insights as to what is happening, biologically and biochemically, in the organism at the time when the mental functioning is so profoundly influenced by the substance. This could be a way of discovering what is happening in naturally occurring psychoses. The basic idea behind it was that it is possible that - under certain circumstances - the human body could produce a substance like LSD and that psychoses, particularly schizophrenia, would actually be chemical aberrations, not mental diseases. And if we could identify the chemical culprit, then we could also find another substance which would neutralize it. Such a test-tube solution for schizophrenia would, of course, be the Holy Grail of psychiatry.
So this was very exciting. The Sandoz letter also offered another little tip, which became my destiny. It suggested that this substance might also be used as a very unconventional training or educational tool for psychiatrists, psychologists, nurses, and students of psychology and psychiatry. The idea was that LSD would give these people a chance to spend a few hours in a world that would be very much like the world of their patients. As a result they would be able to understand them better, be able to communicate with them more effectively, and – hopefully - be more successful in treating them. So this was something that I wouldn’t have missed for anything in the world. I was in a deep professional crisis, feeling very disappointed with the therapeutic means we had at our disposal at the time. So I became one of the early Czech volunteers and had a profound experience that radically changed my life and sent me professionally and personally to a whole other direction.

David: How can LSD psychotherapy be helpful in overcoming traumatic life experiences, alcoholism, or facing a terminal illness?

Stan: We have done studies in all those areas. Psychedelic therapy revealed a wide array of previously unknown therapeutic mechanisms, but the most profound positive changes happened in connection with mystical experiences. We were very impressed with what you could do with very difficult conditions, like chronic alcoholism and narcotic drug abuse. But the most interesting and the most moving study that we did at the Maryland Psychiatric Research Center was the one that involved terminal cancer patients. We found out that if these patients had powerful experiences of psychospiritual death/rebirth and cosmic unity, it profoundly changed their emotional condition and it took away the fear of death. It made it possible for them to spend the rest of their lives living one day at a time. We also found out that in many patients LSD had very profound effect on pain, even pain that didn’t respond to narcotics.

David: Why do you think that holotropic states of consciousness have so much healing potential and do you think that psychedelics can enhance the placebo effect?
Stan: What do you mean by “the placebo effect” in connection with psychedelics?

David: The placebo effect demonstrates the power of the mind over the body. We know that placebos—or biologically inactive substances—can have a measurable healing effect simply because people believe in their power. Do you think that part of the healing potential of psychedelics comes from enhancing what we call the placebo effect in medicine?

Stan: Well, when you call something a placebo, you assume that there is no real biochemical effect.

David: I don’t mean placebos, I mean what’s been called “the placebo effect,” which one can measure. The whole reason that we use placebos in medical studies, when we’re testing a new drug, is because of the “placebo effect”—because our beliefs have the power to influence our wellbeing in measurable ways. We know that just believing that something will have an effect can create a measurable effect and neuroscientist Candace Pert’s research showed that positive emotions can effect the immune system and neuropeptide levels. Do you think that what psychedelics are actually doing, when they assist with healing, is enhancing that power of the mind to effect the body’s own natural healing system?

Stan: Well, I never thought about psychedelics as enhancing the placebo effect, because their psychological effects are so obvious and dramatic; one of the major problems we had in psychedelic research was actually to find a believable placebo for them. But I guess if you put it the way that you put it, you could see it as enhancing the placebo effect—because it certainly enhances the power of the mind over the emotional psychosomatic processes.
David: Can you talk a little about the relationship between certain psychological conflicts and the development of certain cancers, which you witnessed as a result of some psychedelic sessions that you ran?

Stan: We have never really systematically studied this. What I have written in the book *The Ultimate Journey* are mostly anecdotal reports of the insights that came from the patients themselves. For example, sometimes patients had the feeling that their cancer had something to do with their self-destructive tendencies, or that it had something to do with an energetic blockage that occurred in a certain part of their body as a result of traumatic experiences. Sometimes they actually made attempts during their sessions to find psychological ways to heal their cancer, but we never studied this systematically to the point that I could make any definitive statements about it.

Carl Simonton made a large study where he tried to demonstrate participation of emotional factors in the etiology of cancer. One finding was particularly interesting and constant - a pattern of serious loss eighteen months prior to the diagnosis of cancer. But I think that those cases are all really anecdotal, and I don’t think anybody has really shown this beyond any reasonable doubt.

One thing that I would like to add is that - because of my medical background - I used to doubt that cancer could have something to do with emotions. This was at a time when it seemed that the key problem in the genesis of cancer was what transforms a cell into a cancer cell. This changed radically when new research showed that the human body produces cancer cells all the time. So the problem is not what makes a cell a cancer cell, but what causes the immune system to fail destroying them. And it is certainly possible to imagine that psychological factors could cause a breakdown of the immune system, either generally or in certain specific parts of the body.
David: What kind of an effect do you think that psychedelics have on creativity and problem-solving abilities?

Stan: Oh, a tremendous effect. We have extensive evidence in that regard. In the 1960s, James Fadiman, Robert McKim, Willis Harman, Myron Stolaroff, and Robert Mogar conducted a pilot study of the effects of psychedelics on the creative process, using administration of mescaline to enhance inspiration and problem-solving in a group of highly talented individuals. In 1993, molecular biologist and DNA chemist Kary Mullis received a Nobel Prize for his development of the Polymerase Chain Reaction (PCR) that allows the amplification of specific DNA sequences; it is a central technique in biochemistry and molecular biology. During a symposium in Basel celebrating Albert Hofmann’s 100th anniversary, Albert revealed that he was told by Kary Mullis that LSD had helped him develop the Polymerase Chain Reaction. Francis Crick, the Nobel-Prize-winning father of modern genetics, was under the influence of LSD when he discovered the double-helix structure of DNA. He told a fellow scientist that he often used small doses of LSD to boost his power of thought. He said it was LSD that helped him to unravel the structure of DNA, the discovery that won him the Nobel Prize.

In his book “What the Dormouse Said: How the Sixties Counterculture Shaped the Personal Computer Industry,” John Markoff described the history of the personal computer. He showed that there is a direct connection between the psychedelic use in the American counterculture of the 1950s and 1960s and the development of the computer industry. Steve Jobs said taking LSD was among the two or three most important things he had done in his life." He has stated that people around him, who did not share his countercultural roots, could not fully relate to his thinking.

Willis Harman collected in his book Higher Creativity many examples of high-level problem-solving in non-ordinary states of consciousness. I think that studying the effect on creativity is
by far the most interesting area where psychedelics could be used. Offer them to people who are experts in certain areas, such as cosmology, quantum-relativistic physics, biology, evolutionary theory, and so on – individuals who hold an enormous amount of information about a particular field and who are aware of the problems which need to be solved. Several of my friends from the Bay area who are physicists, such as Fred Alan Wolf, Jack Sarfatti, Nick Herbert, and Fritjof Capra, have had some really interesting insights into physics in non-ordinary states of consciousness. Some had spontaneous experiences of non-ordinary states of consciousness and others psychedelic sessions. For example, Fred Wolf spent some time in South America doing ayahuasca.

David: Nick Herbert lives nearby and is a good friend. We’ve actually discussed the following question quite a bit. Many people report unexplained phenomena while under the influence of psychedelics, such as telepathic communication or uncanny synchronicities. What do you make of these types of experiences, which conventional science has great difficulty explaining, and seem to provide evidence for psychic phenomena?

Stan: The number of these seemingly unexplainable phenomena is growing, and it’s occurring in all kinds of disciplines. In astrophysics, you have the anthropic principle. In quantum physics you have a vast array of problems that cannot be explained, such as the Bell’s Theorem, which points to nonlocality in the universe. We can add some of the dilemmas that Rupert Sheldrake points out in biology, when he talks about the need to think in terms of morphogenetic fields and so on. Ervin Laszlo, in his book *The Connectivity Hypothesis*, actually looked at all these different disciplines and showed all the so-called “anomalous phenomena” that these current theories cannot explain. He also specifically discusses transpersonal psychology and all the challenging observations that cannot be explained by current theories in psychology or psychiatry. I think Ervin’s concept of the psi- or Akashic field is the most promising approach to these paradigm-breaking phenomena.
So I think that all this points to the fact that the current monistic/materialistic world view is seriously defective and that we need a completely different way of looking at reality. But there is tremendous resistance against the new observations in the academic world because the revision that is necessary is too radical, something that cannot be handled by a little patchwork, by little ad hoc hypotheses here and there. We would have to admit that the basic philosophy of the Western scientific worldview is seriously wrong and that in many ways shamans from illiterate cultures and ancient cultures have had a more adequate understanding of reality than we do. We have learned a lot about the world of matter, but in terms of basic metaphysical understanding of reality, Western science went astray.

David: What sort of lessons do you think a conventional western physician could learn from an indigenous shaman?

Stan: It would be above all the knowledge concerning the healing, transformative, and heuristic potential of non-ordinary states of consciousness. This would be especially true for shamans who are using in their practice psychedelic plants. They use these extraordinary tools that provide insights into the psyche and therapeutic possibilities that by far surpass anything available in Western psychiatry and psychotherapy. When I had my first psychedelic sessions and started working with psychedelics, I felt very apologetic toward shamans. The image of shamans that I inherited from my teachers at the university was very conceited and dismissive; it described them as primitives, riddled with superstitions and engaged in magical thinking. Our own rational approaches to the study of the human psyche, such as behaviorism or psychoanalysis, were seen as superior to anything the shamans were doing.

So, when I discovered the power of psychedelics, I saw the arrogance of this kind of attitude. The potential of the methods used by modern psychiatry did not even come close to that inherent in psychedelics or in various native “technologies of the sacred,” which induce non-
ordinary states by non-pharmacological means. Then I began understanding what had happened historically. Three hundred years ago, the Industrial and Scientific Revolution brought some important scientific discoveries, which spawned technological inventions that started radically changing our world. This led to glorification of rationality and intoxication with the power of reason. For example, during the French Revolution the Notre Dame Cathedral in Paris was declared the Temple of Reason. In its juvenile hubris, the Cult of Reason rejected without discrimination everything that was not rational as embarrassing leftovers from the infancy of humanity and from the Dark Ages. The overzealous reformers did not realize that not everything that is not rational is irrational; there exist phenomena which are transrational. The mystics are not irrational; they can be perfectly rational in everyday situations, but as a result of their experiences they also transcend the realm of the rational. We are now slowly realizing that in this historical process, the baby was thrown out with the bath water and are learning to make the distinction between the irrational and transrational.

David: What are your thoughts on the extraterrestrial encounters that many people report on high-dose psychedelics and do you think that the beings encountered on high-dose psychedelic experiences—such as DMT or ayahuasca—actually have an independent existence?

Stan: I have seen those experiences frequently. We have seen them in psychedelic sessions, in holotropic breathwork, and in some spiritual emergencies. I have spent a lot of time with my close friend John Mack, who conducted at Harvard extensive research of the alien abduction phenomena. Did you know John?


Stan: Unfortunately he was killed by a drunken driver in London and is not with us any more. Like John, I believe that these experiences belong to the category of “anomalous phenomena,” paradigm-breaking observations for which we do not have explanations within the current
conceptual frameworks. The kind of explanations that have been given by traditional researchers just are not satisfactory—that these phenomena are hallucinations, various meteorological events, new secret US spacecrafts, balloons, birds, satellites, planets and stars, or optical effects such as reflections, mirages, “sprites,” “sundogs,” and refractions caused by inversion layers in the atmosphere.

I think that these are painfully inadequate, and that there are significant aspects of the UFO abduction phenomena or even UFO sightings that simply cannot be explained within the current scientific world view. One possible explanation is that the source of these phenomena is the collective unconscious, as C. G. Jung suggested in his book *Flying Saucers: A Modern Myth of Things Seen in the Skies*. As Bud Hopkins and others have shown, people who have the UFO experiences often report very similar things, often with great detail, even if these observations occur completely independently and there is no connection between these people. One of the most astonishing examples was a sighting in Africa, which involved a group of school children and a teacher. The interviews with these witnesses were done by John Mack and resulted in a remarkable video.

In the past, similar things were described in The Bible, in the Book of Ezekiel, and other places. Jung has shown that these sightings have been described repeatedly in certain periods of human history. The collective unconscious certainly is a reasonable source of these phenomena. If something comes from the collective unconscious then individual people can have intrapsychic access to it but, at the same time, they can receive consensual validation from other witnesses in the same way in which consensus can be reached on visions of archetypal figures or realms from different mythologies. The distinction between the subjective and objective is transcended. Jungians refer to this realm as “imaginal” to distinguish it from the “imaginary.”

When I think about the collective unconscious, I see the parallels with the world that we have created with modern electronics. As we are sitting here right now, we are immersed in an ocean
of information. It’s coming from the different short wave radio stations around the world, from the television satellites, from the Internet, the i-phones, and so on on. So, if we had what it takes to access this information, we could have a vast array of experiences right here, where we are sitting, and it would not be your experiences or my experiences. We would be tapping into something that is objectively real, although under normal circumstances it is invisible. When different people tune into these programs, they can reach a consensus that they have experienced the same kind of thing. So, from this perspective, the UFOs would be phenomena that are not just intrapsychic or just objective in the usual sense, but would lie in the twilight zone in between the two.

David: Do you think that the archetypes and information that is stored in the human collective unconscious is of a genetic origin--that is, stored in our DNA--or do you see them as being more like a morphic field that permeates the biosphere and incorporates cultural as well as genetic information?

Stan: I don’t think it’s in the DNA or in the brain. I don’t think it’s in anything that we can consider to be material substrate, at least not in the ordinary sense.

David: So do you see it more like a morphic field?

Stan: Yes. The best model that we currently have is Ervin Laszlo’s concept of what he used to call a “psi field;” now he calls it the “Akashic field,”” In his last two books, *The Connectivity Hypothesis* and *Science and the Akashic Field*, he describes it as a subquantum field, where everything that has ever happened in the universe remains holographically recorded, so that under certain circumstances we can tune into it, and have the corresponding experiences. For example, in non-ordinary states of consciousness, we can have experiences of scenes from ancient Egypt or the French Revolution, because there’s an objectively existing record of these
events in that field, and people who tap that information can reach consensus that they experienced the same kind of things.

David: How does transpersonal psychology differ from conventional psychology, and could you talk a little about your involvement with it?

Stan: I was part of the small group that formulated the basic principles of transpersonal psychology, together with Abe Maslow, Tony Sutich, Jim Fadiman, Miles Vich, and Sonya Margulies. Transpersonal psychology was a reaction to a number of “anomalous phenomena” described by mystics of all ages, scholars of the great Eastern religions, anthropologists who had done field research with shamans and native cultures, and psychedelic researchers.

In the first half of the 20th century, psychology was dominated by two schools of thought -- Freudian psychoanalysis and behaviorism. In the 1950s, there was increasing dissatisfaction with the limitations of these two systems and Abe Maslow became the main spokesman for this increasing dissent. He and Tony Sutich launched humanistic psychology, which in a very short time became very popular in professional as well as lay circles. However, within the first ten years of the existence of humanistic psychology, Abe and Tony became dissatisfied with the field they had created, because it did not include important aspects of human nature, particularly the spiritual and mystical dimensions, creativity, meditation states, ecstatic experiences, and so on. When I met them, they were working on yet another new branch of psychology, which would incorporate the elements that humanistic psychology was lacking.

They originally wanted to call this new psychology “transhumanistic,” going beyond humanistic psychology. I brought into this group the data from ten years of my psychedelic research in Prague and a vastly extended cartography of the psyche that had emerged from this work. Part of this cartography was a category of experiences that I called “transpersonal,” meaning transcending the limits of our personal identity, of the body-ego. Abe and Tony liked
this term very much and they decided to change their original term “transhumanistic psychology” to “transpersonal psychology.”

The best way of describing transpersonal psychology would be to say that it studies the entire spectrum of human experience, including what I call “holotropic” experiences. This includes the experiences of shamans and their clients, of initiates in the rites of passage, in healing ceremonies, and other native rituals, of the initiates in the ancient mysteries of death and rebirth, of the yogis, Buddhists, Taoists, Christian mystics, Kabbalists, and so on. Transpersonal psychology includes all of these experiences.

David: What’s the difference between a spiritual emergency and a psychotic episode?

Stan: After we had had extensive experience working with psychedelic therapy and with the Holotropic Breathwork, it became increasingly difficult to see many of the spontaneously occurring episodes of non-ordinary (holotropic) states as being pathological. They included the same elements as the psychedelic sessions and the sessions of Holotropic Breathwork - experiences of psychospiritual death and rebirth, past life experiences, archetypal experiences, and so on. And if they were properly understood and supported, they were actually healing and often led to a positive personality transformation.

So it became increasingly difficult to see as pathological experiences, which a sample of “normal” people in our workshops and training would have after forty-five minutes of faster breathing. Moreover, if these experiences could be healing and transformative when they are induced by faster breathing and music, or by miniscule dosages of LSD, why should they be considered pathological when they occur without any known causes? So we coined for these spontaneously occurring episodes the term “spiritual emergencies.” It is actually a play on words, because it shows the potential positive value of these experiences. They certainly are a nuisance in people’s lives and can produce a crisis, an “emergency,” but - if correctly
understood and properly supported - they can also help these individuals to “emerge” to a whole other level of consciousness and of functioning.

Now, the question that you ask -- the question concerning “differential diagnosis” -- is difficult to answer for the following reasons: The concept of differential diagnosis comes from medicine, where it is possible to accurately diagnose diseases on the basis of what you find in the blood, in the urine, in the cerebral spinal fluid, on the X-rays, and so on. You can accurately establish the diagnosis, and if you make a mistake, another doctor can show you that you made a wrong diagnosis and - as a result - prescribed the wrong treatment. In psychiatry, this is possible only for those conditions that have an organic cause. There is a group of psychotic states, where this is the case – the so called “organic psychoses.” However, there exists a large group of conditions diagnosed as psychoses for which no biological causes have been found. These are called “functional” or “endogenous psychoses.”

Anybody familiar with medicine knows that this essentially means admission of ignorance wrapped in a fancy title (endogenous means “generated from within”). This is not a medical diagnosis backed by laboratory data. It is a situation characterized by unusual experiences and behaviors for which the current conceptual framework of psychiatry has no explanation. To make a differential diagnosis, we would first have to have a diagnosis established as rigorously as it is done in somatic medicine. Because that is not the case, we have to use a different approach. We can try to identify the criteria that would make the person experiencing a non-ordinary state of consciousness a good candidate for deep inner work. If they meet these criteria, we try to work with them psychologically to help them get through this experience, rather than indiscriminately suppressing their symptoms with psychopharmacological agents.

The first criterion there is the phenomenology of the individual’s condition. A positive indication is presence of elements that we see daily in participants in Holotropic Breathwork sessions or psychedelic sessions - reliving of traumatic memories from infancy or childhood,
reliving of biological birth or episodes of prenatal existence, the experience of psychospiritual
death and rebirth, past life experiences, visions of archetypal beings or visits to archetypal
realms. Additional positive indications are experiences of oneness with other people, with
nature, with the universe, with God.

The second important criterion is the person’s attitude. The individual in spiritual crisis has to
have some sense of understanding that this is a process with which is happening internally.
Very bad candidates for alternative psychological work are people who use a lot of projections,
who deny that they have a problem and that they are dealing with an internal process. They are
convinced that all their problems are caused by outside forces: it is the neighbor who is
poisoning their soup and placing bugging devices in their house; it is the Ku Klux Klan trying
to destroy them; it is a mad scientist attacking them by a diabolic machine, or the invading
Martians. So there is a tendency to blame that condition on somebody or something outside of
them and being unwilling to accept the possibility that there is something within their own
psyche that they can work on. So, unless that attitude changes, it is very difficult to do this type
of work.

David: Why do you think that the conditions surrounding one’s birth have such a lasting effect
on one’s outlook toward life?

Stan: Birth is an extremely powerful, elemental event that for many children is a matter of life
and death. This is especially true for those who were born severely asphyxiated - dead or half-
dead - and had to be resuscitated. In any case, it is a major trauma that has a physical as well as
an emotional dimension. The position of current psychiatry and psychology toward birth is
unbelievable – contrary to elementary logic, we see a massive denial of the fact that birth is a
major psychotrauma. The usual reason given for the fact that birth is psychologically irrelevant
– inadequate myelinization of the newborn’s cortex – is hard to take seriously. It is in sharp
contrast with data from both postnatal and prenatal life.
There exists general agreement among child psychiatrists that the experience of nursing is of paramount importance for the rest of the individual’s emotional life. Obstetricians and pediatricians even talk about the importance of “bonding” - the exchange of looks between the mother and the child immediately after the child is born – as the foundation of the future mother-child relationship. And extensive prenatal research of people like Alfred Tomatis has shown extreme sensitivity of the fetus already in the prenatal period. How should we reconcile this with the belief that the hours of life and death struggle in the birth canal are psychologically irrelevant?

It seems really bizarre that psychiatrists and psychologists believe that there is no consciousness in the child during the passage through the birth canal, but then suddenly appears as soon as the newborn emerges into the world. And the argument about the lack of myelinization of the newborn’s cortex violates elementary logic and doesn’t make any sense either. We know from biology that memory does not require a cerebral cortex, let alone a myelinized one. There are organisms that don’t have any cortex at all and they certainly can form memories. Several years ago, the Nobel Prize was given to Austrian-American researcher Eric Kandel for studying memory mechanisms in a sea slug called Aplysia. So it’s very difficult to imagine how people in the academic circle think, if they can accept that the sea slug can form memories but a newborn child, with an extremely highly developed nervous system and brain, would not be able to create a memory record of the hours spent in the birth canal.

David: What do you think of applying Konrad Lorenz’s notion of biological imprinting--as opposed to conditioning or learning--to the lasting psychological effect that psychedelic experiences often produce?

Stan: The term “imprinting” is most relevant here in relation to the very early situations in an organism’s development. As you know, ethologists have shown that the early experiences of
life are extremely influential. For example, there is a period of about sixteen hours in the early life of ducklings when whatever moves around becomes for them the mother. So if you walk around in red rubber shoes, they ignore their mother and follow the shoes. Psychedelics can induce deep age regression to the early periods in one’s life and offer the opportunity for a corrective psychobiological experience. This new experience then seems to have the same powerful influence on the individual’s life as the natural imprinting.

I ultimately don’t believe that the memories we experience in psychedelic sessions are stored in the brain, certainly not all of them. I think that many of them obviously don’t have any material substrate in the conventional sense – ancestral, collective, phylogenetic, and karmic memories, archetypal matrices, etc. Recently, there has been much discussion about “memory without a material substrate” – for example, Rupert Sheldrake’s morphogenetic fields or Ervin Laszlo’s Akashic field. So I don’t believe that what we experience is stored the brain. I believe that the brain is mediating consciousness, but does not generate it, and that it mediates memories, but does not store them.

David: Why do you think it is that the LSD experiences have such a lasting effect on people?

Stan: Isn’t that true about every powerful experience? The more powerful the experience is, the more of an effect it has. It is true even for experiences that we have forgotten, repressed, dissociated from consciousness. Everything that we experience in life is shaping us with a lasting effect. Some of these influences are more subtle, and some of them more dramatic, but certainly traumas that people experience in childhood can have tremendous impact. Events in human life can have everlasting impact of people.

David: What do you personally think happens to consciousness after death?
Stan: I have had experiences in my psychedelic sessions -- quite a few of them -- when I was sure I was in the same territory that we enter after death. In several of my sessions, I was absolutely certain that it had already happened and I was surprised when I came back, when I ended up in the situation where I took the substance. So the experience of being in a bardo in these experiences is extremely convincing. We now also have many clinical observations suggesting that consciousness can operate independently of the brain, the prime example being out-of-body experiences in near-death situations (NDEs).

Some out-of-body experiences can happen to people not only when they are in a state of cardiac death, but also when they are brain dead. Cardiologist Michael Sabom, described a patient he calls Pam, who had a major aneurysm on the basilar artery and had to undergo a risky operation. In order to operate on her, they had to basically freeze her brain to the point that she stopped producing brain waves. And, at the same time, she had one of the most powerful out-of-body experiences ever observed, with accurate perception of the environment; following her operation, she was able to give an accurate description of the operation and to draw the instruments they were using.

So what these observations suggest is that consciousness can operate independently of our body when we are alive, which makes it fairly plausible that something like that is possible after our body is dead. So both the experiential evidence from my own sessions and what you find in the thanatological literature, certainly suggest that survival of consciousness after death is a very real possibility.

David: What is your perspective on the concept of God?

Stan: When Jung was over eighty years old he had an interview with a BBC reporter. At one point this BBC reporter asked him “Dr. Jung, do you believe in God?” A smile appeared on Jung’s face and he said, “No, I don’t.” Any Jungians who are watching this tape cannot believe
it: “What? Dr. Jung doesn’t believe in God?” Then, after a dramatic pause, Jung says: “I know. I had the experience of being grabbed by something that was by far more powerful than I could even imagine.” Like Jung, I had experiences – actually quite a few of them over the years - of what I would refer to as God.

I have experienced in my sessions many gods – archetypal figures of many forms from different cultures of the world. But when I refer to God, I am talking about an experience, which is beyond any forms. What I experienced as God is difficult to describe; as you know, the mystics often refer to their experiences as ineffable. It could be best described as an incredibly powerful source of light, with an intensity that I earlier couldn’t even have imagined. But, it doesn’t really do it justice to refer to it as light because it was much more than that. It seemed to contain all of existence in a completely abstract form and it transcended all imaginable polarities. There was a sense of infinite boundless creativity. There was a sense of personality and even a sense of humor (of a cosmic variety).

The experience of God seems to be under certain circumstance available to all human beings. If you haven’t had the experience, then there’s no point in talking about it. As long as people have to talk about believing in God or not believing in God or, for that matter, believing in past lives or not believing in past lives, it is irrelevant because they do not have anything to go by. Their opinion doesn’t have any real basis; it reflects the influences of their parents, their preacher, or something they have read. Once you had the experiences, you know that the experiences were real and very convincing.

David: What types of research and therapies do you foresee for psychedelics in the future?

Stan: I think that the most interesting area waiting to be explored is to use psychedelics for enhancing creativity, as we talked about it earlier. It is something that would facilitate completely new ways of looking at various areas and generate extraordinary new insights into
the nature of reality. But I am afraid it will take some time before we see research of this kind. The most difficult challenge has always been to get permission to use psychedelics in populations where there is no serious clinical reason (e.g. terminal cancer, chronic alcoholism, etc.).

David: What are you currently working on?

Stan: Christina and I are writing a long overdue book on the theory and practice of Holotropic Breathwork. It will be a very comprehensive book, covering a wide range of topics from the history of the breathwork to the therapeutic use of breathwork sessions and its social implications. It will include the description how to prepare a session and how to run a session, as well as the complementary methods that you can use following the session. It discusses the therapeutic effects, the possibilities of developing a new worldview and new life strategies, as well as the possible importance of working with holotropic states as a means of alleviating the current global crisis.

David. Is there anything that we didn’t speak about that you would like to add?

Stan: One of the areas I am particularly interested in is the revolutionary development on various scientific disciplines and the emergence of the new paradigm. I firmly believe that we are rapidly moving toward a radically new worldview and that transpersonal psychology and spirituality will be integral parts of it. A worldview that will synthesize the best of science and the best of spirituality and would demonstrate that there is really no incompatibility between science and spirituality, if both of them are properly understood. The other area that I am very deeply interested has to do with the phenomenal digital special effects, which are now available in the movie industry.

David: Are you still interested in making animated films?
Stan: It is ironical, isn’t it? As I look at it, my career has not changed as much as I initially thought when I became interested in psychiatric research. Psychedelic experiences with their rich imagery are not that far from animated movies. But I am not interested any more in making animated movies; what I am interested in is the spiritual potential of these new special effects. I believe that the special effects are so powerful these days that they could not only portray mystical experience, but they could actually induce them in people if they were properly constructed. If we could combine what we know about the inner logic of these experiences with these new special effects, the results could be truly extraordinary. Unfortunately, the new special effects are being used mostly for portraying destructive movies scenes.

Hollywood movies portray with formidable power scenes reflecting what I call BPM III – the violent and sexual imagery associated typically with the final stages of birth. The destructive scenes are so boringly stereotypical that they are almost exchangeable from movie to movie; only the danger takes different forms – alien invaders, natural disasters, dinosaurs or other monsters, demonic beings, and all kinds of dangerous villains threatening to destroy the planet. Most of these movies end up in a situation where the enemy is overcome and people celebrate the victory on a trashed, devastated planet. What is missing is the shift to BPM IV, lifting the experience to the transcendental level, to spiritual death/rebirth experience. I don’t know if you know that Christina and I were consultants on the movie called Brainstorm, which was an attempt to portray a transcendental experience.

David: I had read that, and found that very interesting, as Brainstorm is one of my favorite films. I thought that there were a lot of fascinating ideas in it.

Stan: That was an effort to bring to the screen the transcendental aspects of the death experience. Unfortunately, the special effects were very compromised, because of the tragic death of Natalie would shortly before the movie was finished. MGM didn’t want to put any
more money into the movie; they believed that it was not viable, because there were three scenes of principal photography with Natalie that were still missing. Doug Trumbull convinced the MGM people that he could finish the movie. He did his best to put it together, but it didn’t really come out very well. If you watch the movie, it is not only the lack of the special effects, but there is a kind of a logical gap; you can tell that there is something missing. But I think that the topic of the movie is so interesting that it deserves a remake, as they are remaking all kinds of other movies. I think that this is one that deserves to be remade and done really well.