





ABOUT ME

- financial manager & trained psychedelic facilitator through Laura Dawn
- over 6 years of profound experience in psychedelics for embodied strategy and personal transformation
- co-founder of Psychedelic Society Madeira and facilitator in transformative retreats
- MAPS trained for psychedelic harm reduction
- Somatic Institute for Women trained for shadow work
- author of Psychedelic Wisdom, a user guide for safe and responsible journeys
- ambassador of the Pataxó tribe in Brazil

PSYCHEDELICS HELPED ME HEAL

"Many clinical trials ran under an unspoken assumption that the only difference between women and men was their sexual and reproductive organs.

Women were, in essence, considered small men." —

Dr. Regine Douthard

UP UNTIL THE LATE 1990s WOMEN WERE EXCLUDED FROM CLINICAL RESEARCH IN EUROPE.

Review

J Urol. 2005 Oct;174(4 Pt 1):1189-95. doi: 10.1097/01.ju.0000173639.38898.cd.

Anatomy of the clitoris

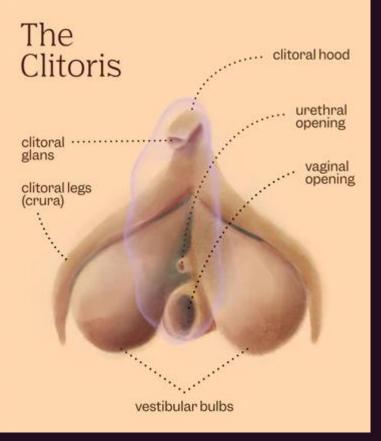
Helen E O'Connell 1, Kalavampara V Sanjeevan, John M Hutson

Affiliations + expand

PMID: 16145367 DOI: 10.1097/01.ju.0000173639.38898.cd

Abstract

Purpose: We present a comprehensive account of clitoral anatomy, including its component structures, neurovascular supply, relationship to adjacent structures (the urethra, vagina and vestibular glands, and connective tissue supports), histology and immunohistochemistry. We related recent anatomical findings to the historical literature to determine when data on accurate anatomy became available.





- First medication approved for erectile dysfunction for men in 1998
- First medication approved for women in 2015 (17 years later)



Environment International

Volume 190, August 2024, 108849

Full length article

Tampons as a source of exposure to metal(loid)s

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Women's hormonal & sexual health has not been a priority in the medical field.

GIVING BIRTH CONTRACEPTION MENSTRUAL PAIN DEPRESSION MENOPAUSE **VAGINISMUS** LOW LIBIDO EATING DISORDERS ANXIETY PTSD (TRAUMAS)



The Global Drug Survey 2020 reports that women cite depression, anxiety, relationship issues, trauma, and PTSD as their main reasons for using psychedelics.

More women report self-treating with psychedelics than men.

THE TRUTH ABOUT PSYCHEDELICS

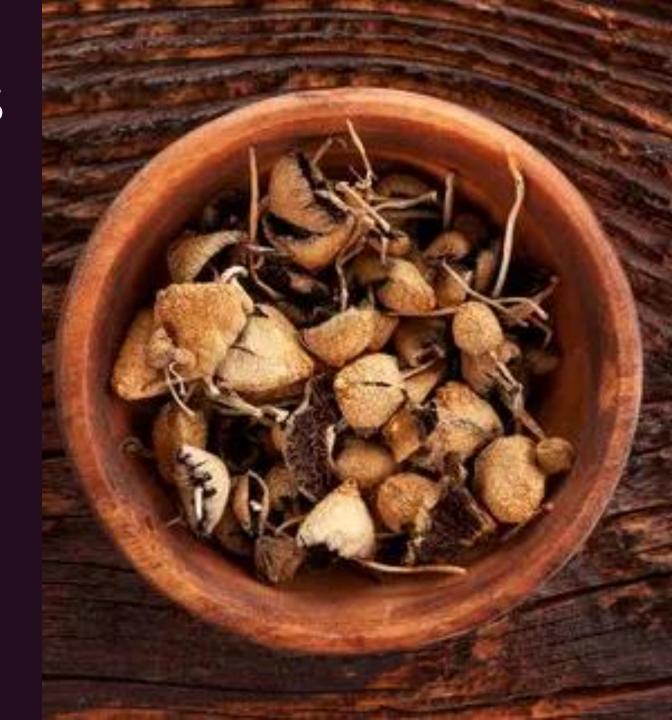
RESEARCH SHOWS THAT **PSYCHEDELICS OFFER A PATHWAY OF HEALING** IN TREATING DEPRESSION, CHRONIC PAIN, POSTPARTUM MOODS, PTSD, ANXIETY, ADDICTION, OCD, EATING DISORDERS, LIFE-END FEAR, AND CLUSTER HEADACHES. ESPECIALLY FOR THOSE WHO HAVEN'T RESPONDED TO TRADITIONAL TREATMENTS.

PSILOCYBIN MUSHROOMS & TRUFFLES



PSILOCYBIN MUSHROOMS

For millennia (7000 BC),
Indigenous communities
have used psilocybin
mushrooms in
celebrations, healing
rituals, and religious
ceremonies.



PSILOCYBIN MUSHROOMS

Psilocybin is a naturally occurring tryptamine and the psychoactive compound found in magic mushrooms.

There are over two hundred fungi species that produce this compound.

Psilocybin is one of the least toxic recreational drugs (on par with cannabis)



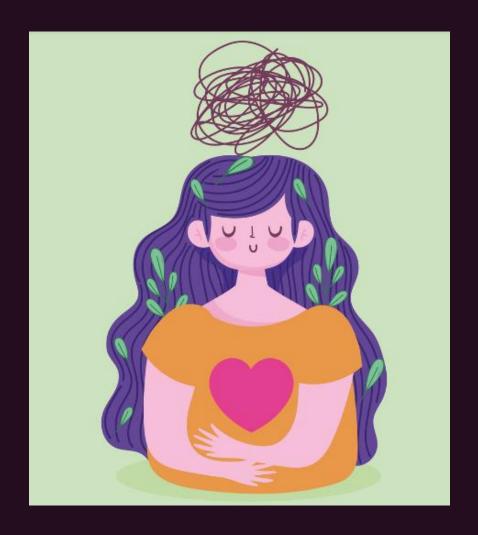
PSILOCYBIN MUSHROOMS





SEROTONIN REGULATES

- Happiness & Stable Moods: depression & anxiety
- Menstrual Cycle: PMS symptoms
- Pregnancy & Post-Partum: Post-Partum depression
- Sleep Quality: disturbances
- Appetite Control: cravings
- Stress Response: burn out & anxiety
- Cognitive Function: brain fog
- Sexual Function: libido
- Pain Perception: chronic pain
- Menopause Symptoms: alleviation
- Social Interactions

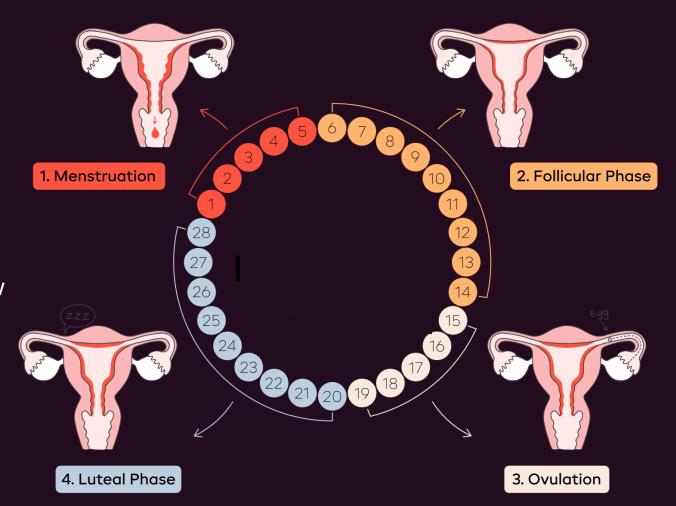


Understanding the role of serotonin in our cycle can help women manage their physical and emotional well-being throughout different life stages with psychedelics.

The Female Cycle



- high progesterone levels make Gaba receptors more reactive: more slow & negative thoughts
- Second peak in estrogen triggers cortisol (stress hormone) -> Stress response



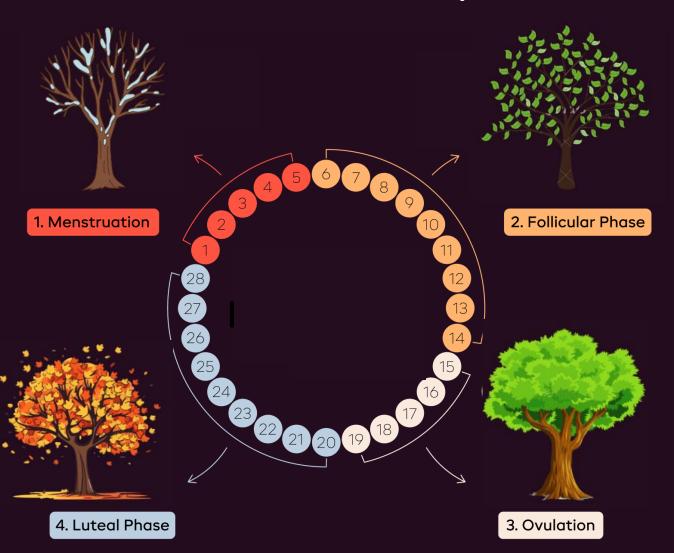


- High estrogen levels make serotonin receptors more reactive: more energy levels available in body
- Peak in estrogen triggers ovulation

The Female Cycle



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- High estrogen levels make serotonin receptors more reactive: more energy levels available in body
- Peak in estrogen triggers ovulation



The Female Cycle and Psychedelics

We lose a lot of energy during a psychedelic journey, if you have low energy levels, it is better to do high-dose journeys in the ovulation period (summer) with more glucose in your body. To avoid low moods in your luteal phase.

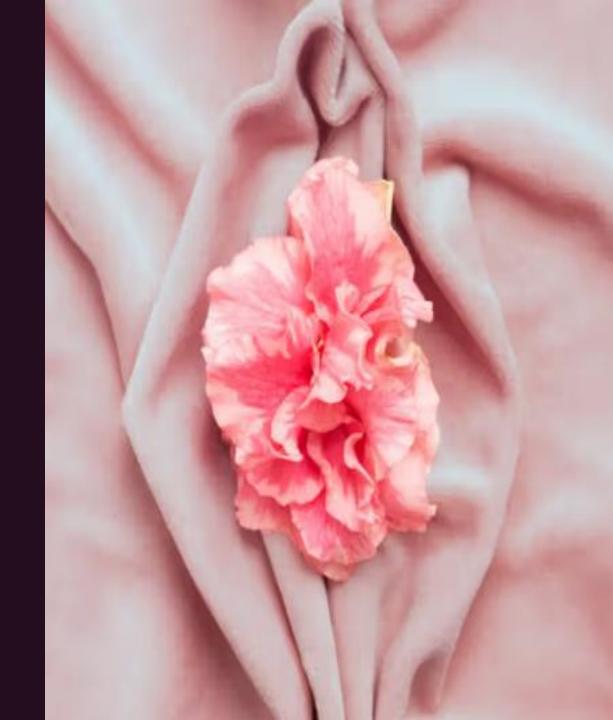
Hormonal changes around ovulation and luteal phase (fall season) are often what cause premenstrual symptoms.

How can I alleviate my PMS with Psilocybin?

- psilocybin can help in regulating PMS through microdosing in the luteal phase (fall season)
- if 1 hormone regulates, it will also have effect on other hormone regulations
- psilocybin inhibits the production of inflammatory proteins (cytokines)
- psilocybin (serotonin) regulates the <u>stress response</u> of our body

Sexual Dysfunction

- 40% of women of reproductive age endure sexual dysfunction (libido, enjoyment of sex, reaching orgasm, trauma)
- low libido can be linked to depression
- trend to substitute antidepressants with Psilocybin
 - does not suppress libido



How can I support sexual dysfunction with Psilocybin?

- high-dose journeys to overcome deep sexual trauma
- microdosing for: mood elevation, improved communication with partner, acceptance for oneself, self-discovery, amplified sensations during sex & cuddling, sex as spiritual experience, healing full body orgasms
- practice psychedelic sex with yourself first and ONLY trusted partners (do you have evidence that you are in a holding relationship?)
- psilocybin is not an aphrodisiac

What about Psilocybin in pregnancy, breastfeeding & motherhood?



PREGNANCY & BREASTFEEDING

Depression During Pregnancy

Pregnancy was once believed to provide some protection against depression due to shifting hormones, but research has not supported this theory. ^[1] In fact, the opposite may be true: Women with a history of anxiety or depression may be *more* at risk for depression when they are pregnant. ^[2]

Biaggi A, Conroy S, Pawlby S, Pariante CM. <u>Identifying the women at risk of antenatal</u> <u>anxiety and depression: A systematic review</u>.

PREGNANCY & BREASTFEEDING

- some groups of Indigenous women intentionally use mushrooms while they are breastfeeding, and their babies are healthy
- there is no evidence for harm of the foetus or baby nor is there evidence for absolute safety
- research of drugs in pregnancy is limited to all substances, not only psilocybin



PREGNANCY & BREASTFEEDING

- depression, anxiety & PTSD can negatively impact someone's ability to attach to their baby
- women taking ADHD meds have to stop them which makes pregnancy and early motherhood very difficult
- some women prefer to microdose a couple of times during pregnancy, instead of falling back into old addiction patterns (alcohol)



PSILOCYBIN & BREASTFEEDING

- microdosing while breastfeeding can be timed
- half-life of psilocybin is roughly 3 hours, your dose will have reduced by 50% by this time. Example:
 0,1 gram microdose will be reduced by 0,05 gram at around 3 hours
- after 3,3 half-lives of a drug 90% is eliminated.
 After 5 half-lives 98% is eliminated
- source: Infant risk center report, Thomas Hale "Drug entry into human milk"



PSILOCYBIN IN MOTHERHOOD

- to overcome birth trauma, elevate mood, to be more empathic with own children, be more present, show yourself compassion for the process of raising a child
- heightened neuroplasticity: learn your child, inhabit their world better, imaginative play
- rule: substances should never impair a parent from protecting and caring for their child in a way that otherwise puts their child at risk!
- higher dose journeys as self-care

www.momsonmushrooms.com





WHAT ABOUT PSILOCYBIN IN POSTPARTUM DEPRESSION?

- 21% of women experience postpartum moods
- giving birth can significantly reshape a woman's identity, priority and sense of self
- current treatments: SSRIs, talk therapy, total suppression of menstrual cycle (early menopause)
- microdosing: helps with hormonal issues and takes off filter of negativity
- helps people feel more present and connected to themselves and their babies

HOW CAN I SUPPORT MENOPAUSE WITH PSILOCYBIN?

- slow changes start in mid-30s, start supporting hormones from 40s on
- symptoms: fatigue, loss of muscle mass, decrease in bone density, depression, joint pain, low libido, lowered immunity, insomnia, hot flashes and vaginal dryness



HOW CAN I SUPPORT MENOPAUSE WITH PSILOCYBIN?

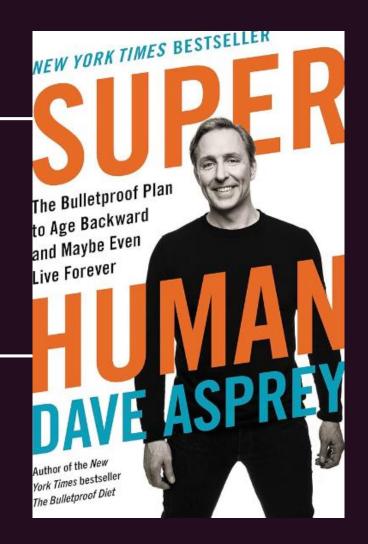
- in menopause estrogen levels declined by half compared to reproductive years
- leads to less serotonin receptors resulting in low moods
- microdosing enhances the activity of those receptors and help stabilize the mood
- BDNF is lower after menopause because of decline in hormones



PSYCHEDELICS & LONGEVITY

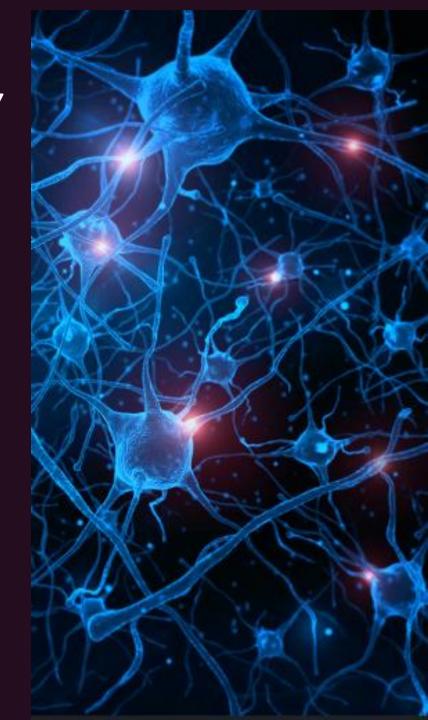
LONGEVITY = BIOHACKING, BIOLOGICAL ANTI AGING

Living beyond your life expectancy in a healthy way



PSYCHEDELICS & LONGEVITY

- throughout age our brain produces less BDNF (neuroplasticity)
- every decade we lose 5% in brain volume
- 24% of women have dementia (¼)
- 66% of people have cognitive brain diseases

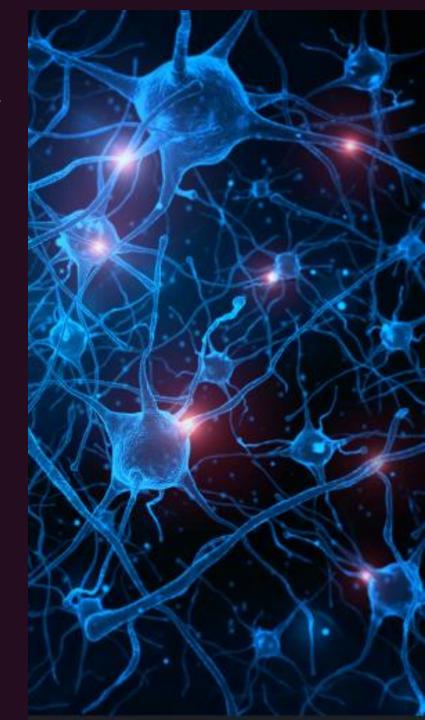


PSYCHEDELICS & LONGEVITY

Rejuvenation of the mind

- psychedelics impact on openness, curiosity & personality traits
- psychedelics increase BDNF which strengthens our synapses
- some psychedelics support neurogenesis
- they act anti-inflammatory

People with depression & anxiety have a higher biological age. Psychedelics reduce these through serotonin balance, accelerated emotional processing and less stress.

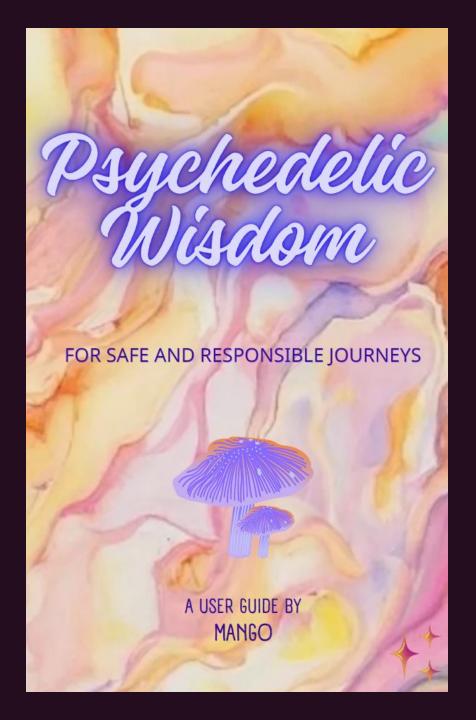


MICRODOSING BASICS

- about 1/10 of a full dose, take it in the morning instead of coffee
 - Mushroom dry: 0,1 0,3gr | Truffle fresh: 0,5 1gr (use accurate scale)
- should feel almost non-perceptual, feeling light, positive, activated, in tune with oneself
- 2 main protocols for microdosing:
 - Fadiman protocol: 1 day on 2 days off, for 4-8 weeks
 - Stamets protocol: 4 days on 3 days off, for 4 weeks with Niacin & Lion's Mane
 - followed by 2-4 weeks of rest
- Intuitive microdosing: experiment with own protocols

CONTRAINDICATIONS

- history of psychosis, schizophrenia, or bipolar disorder
- people with severe anxiety disorders
- people with cardiovascular conditions
- when on medications like antidepressants or lithium
 - Tapering off antidepressants is necessary before starting to work with psychedelics



INTRODUCTION PSYCHEDELICS

