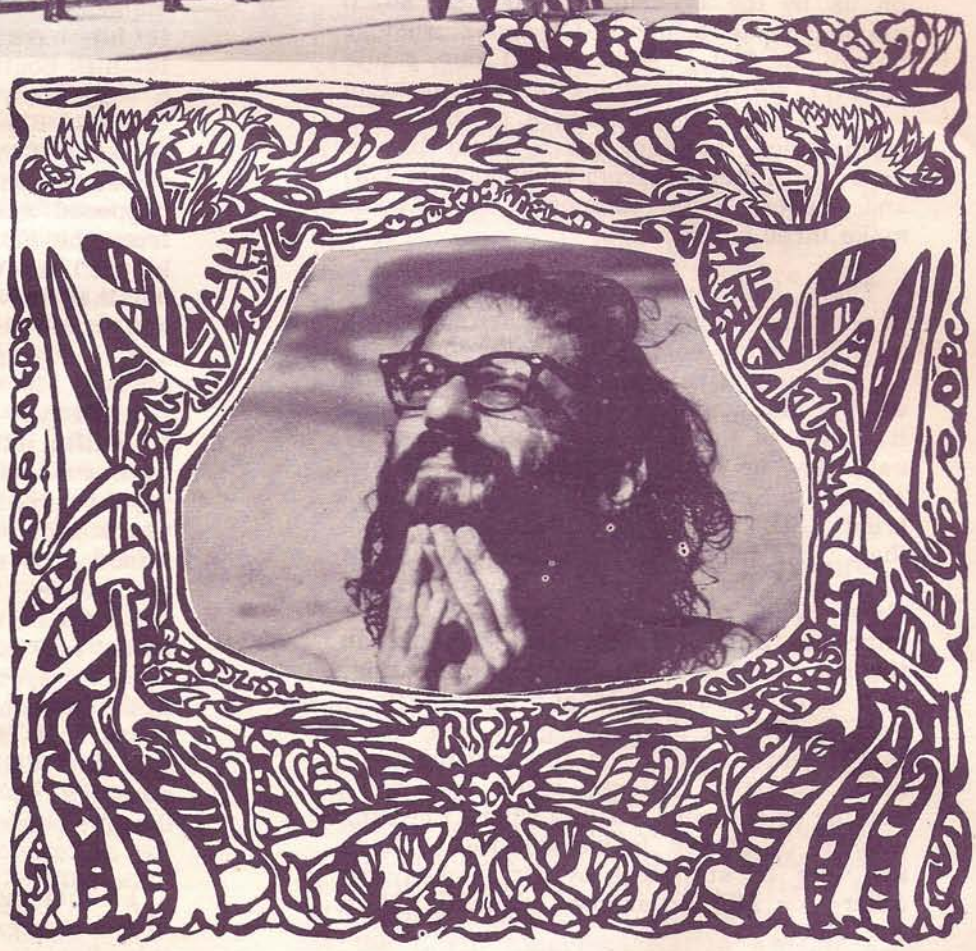
What Allen Ginsberg Said to Dr. Fox



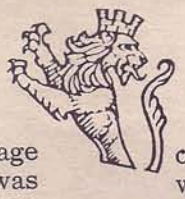
(The follc .ng is selected from the transcription of a tape recording of a debate between Dr. Irving Fox and Allen Ginsberg held before the annual convention of the National Student Association in August of 1966. In the course of this convention, the NSA adopted a resolution to repeal the present marijuana laws and to set up a "drug studies desk" within their organization. An application by the NSA for a grant with which to study drug use on campus is currently under consideration by the NIMH. -Ed.)

The main thing that I'm interested in is how come such a mass hypnosis has been foisted on the public for so long, how can such brainwashing be possible, despite the evidence of our own senses for those of us who have had the experience and, if marihuana all along has been a hoax, a marihuana myth that has been foisted on us, what of the other myths like the Viet Nam War. The marihuana myth was foisted on us by the Treasury Department so, if marihuana is a myth, I wonder what is money in fact. What of all our public reality? We're undergoing the same problem with LSD now where there's an enormous mythological buildup and I would like to pass for a moment from marihuana to LSD and present some documents on that and make three points.

There has been a very small incidence of permanent damage. There are no figures on LSD taking so that we really don't have any comparative statistics to determine what is the incidence of breakdown. Donald B. Luria of the New York Medical Society said that he estimates between 1,000 and 10,000 in New York City in 12 months tried LSD. I think it's much higher than that. It's probably more like 50,000, but if we take the mean of his figures we get about 5,000 people who took LSD, that's very low. 5 cases of semi-permanent care in the hospital to 5,000 people experimenting, or 1 in 1,000. The incident of semi-permanent breakdown then is a good deal lower than liquor drinking, driving, getting married, entering college, much less war-making or business activity where a healthy amount of stress is encountered. There are lots of statistics by Dr. Cohen and others on LSD breakdown. Usually, it is 1 in 1,000.

"Because of the growing abuse of LSD, the only legal manufacturer/investigator of the drug, etc."--the problem here is that 99.9% of the use of LSD is characterized as abuse. An "abuse control board", that's the only language they have to deal with it except in the very rare cases where they license their properly qualified investigators. Who are these investigators? There are about 12 people that are licensed to experiment on humans now. In the most rigorous institutional circumstances, normal doctors doing normal experimental work in psychotherapy doctors whose competence in the field is unquestioned by anybody, have their competence questioned by FDA. There is a very interesting report in the New Republic of what happened to Dr. Harold Abramson in New York. Abramson is an ideal case to deal with I think. It indicates the abuse of power that the FDA has been exercising. Here are Abramson's qualifications: he was selected by Sandoz to chair an international conference on LSD in Long Island in '64 or '65. He is editing a book of papers on the subject, he has written some 15-20 articles on LSD. In this article that I mentioned in the New Republic it tells what happened to Abramson. The FDA wouldn't let him have any more LSD, and they wouldn't let him continue his research. There was a very funny reference to it in the copy of the New Republic, it was a story by Tom Buckely of the New York Times, which was a survey on May 14. At any rate, what happened was this, Abramson got a letter from the FDA and it was so complicated, he had to take it to his lawyer to find out that he was being "cut off." Abramson should be the head of FDA dealing with LSD. Abramson is more qualified than anybody in the government to deal with it, and yet he is being judged by his scientific inferiors. Obviously, Leary has been cut off. I have been cut off. I was psychiatrized in San Francisco about 10 years ago, helpfully, I thought, and maintained good relations with my analyst over the years. I went back this December and said I would like, (he had subsequently taken LSD and I had) said that I would like to spend a day with you and take LSD and check back over the last ten years and check back over our psychotherapy. And so I and my doctor had to conspire in order to pursue the psychotherapy because he can't get a license either.

I would suggest the setting up in colleges of seminar groups where under supervision intradisciplinary groups might take LSD together under circumstances which would be protective. This is so far from the imagination of the FDA, that unless those who understand education as a search for wisdom begin to organize, you are going to find the government controlling possiblities of scientific and scholarly and personal research in this area. There are endless numbers of things that can be done. The one that I am most fond of would be a comparative study and correlation of the language and attitudes of various social groups according to their roles in reacting to LSD experience directly and indirectly. In other words, what kind of language do I use as compared with the kind of language that Dr. Fox uses? What kind of language does the policeman use to refer to the LSD experience? legislator? psychoanalyst? newsman? artists? theolo-



gians? marxists? The marxist language is interesting: in Czechoslovakia there was a lot of experimenting by Dr. J. Roubicheck who came to the conclusion that LSD inhibits conditioned reaction. This is very important in the Marxian, Pavlovian society, because what that means is that you have a way of wiping out brainwashing conditioned reactions. If you have someone who has been accused of having bourgeois tendencies, if he takes LSD he can then claim to have wiped out this conditioned reaction. It could eliminate an awful lot of dialectical bullshit in Marxist countries. What kind of language do college administrators use in dealing with the psychedelic experience? Indians, magicians, painters, the correlation would be useful in determining whether the terminology used by the different groups coincded in any respect, and in what respects they differ. Mainly what is necessary above all is straight research in gathering of data and how to handle LSD panic reactions. I talked with a doctor who worked in midtown Manhattan who says that she can't get a license to do experiments with LSD and said, "We need research to know what to do when people come in sick, doctors need to be able to work with it and get experience otherwise, it is hush hush like venereal disease and public and professional ignorance spreads." --a lady doctor head of the midtown Manhattan research section complaining that she can't get any LSD from the FDA. The FDA has blocked research, it may not be theFDA's fault because they are having to deal with the press, they are having to deal with an uncomprehending public, they are having to deal with Eddie Kennedy screaming at Leary, and attacking Goddard, saying why aren't you taking further action? But the FDA, I don't think understands the problems to begin with so there is an educational difficulty here that is very difficult to fill in, and will only be filled in if you go back to your universities and stick to your rights and not be hypnotized by pseudo-scientific language of self-appointed experts in the government.

Here the problem is going to be in the future who is going to be on that committee; is Timothy Leary going to be on that committee, is Allan Watts going to be on that committee, is Gerald Heard going to be on the committee; is Humphrey Osmond, the Head of the New Jersey Neuropsychiatric Institute and Osmond is the man who originally got peyote from the American Indians and gave mescaline to Huxley. He is the oldest and one of the most brilliant workers in the field. Will he be on that committee? Will Dr. Abram Hoffer who wrote the report which I was quoting, will he be on the committee, will I be on the committee? In other words, who is going to be the selector with the controls, the controller, and here we have got a 1984 problem because if Goddard has a great say and if Goddard is biased against aesthetic experience and against judgments of value which other people hold dear, then you are going to have a group composed of very hardnosed doctors or hypocrites. By hypocrites I mean people like, well in a sense Sidney Cohen is a hypocrite in the sense that he is constantly sitting on the fence. H e really doesn't believe in legislation against possession, but he testifies for it in California because the DA pushes him to, and says that they need it so that they can catch the pushers, they are going to have legislation against possessors too; you know you are going to have a very difficult problem on this level. That has been building up for many years, actually, who is going to control In fact, I have spoken to some doctors who think that it is inevitable that the major responsibility is going to rest with purely medical profession people, no rabbis, no philosophers, nobody of any common sense at all, just scientific people.

There are a million people thinking of LSD, not twelve. The problem here is you have an either/or set-up, like its either a bureaucrat or we must confide in the authorities, and I don't like that kind of totalitarian language, actually. There are other people besides the medical authorities who are qualified. There is Mr. Frank Takes Gun who is the chief of the North American Native American Church who I think is probably more qualified to be on such a board than any scientific authority you can find, actually. Yet he is the last person probably that would be called, so the either or shot which we are being presented here is driving our mind in a direction which we needn't go if we don't want to. We've got other things, we can just go out and take it ourselves.