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Beyond the breakthrough: The practical hurdles of psychedelic therapy

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To the Editor,

The renewed investigation into psychedelic-assisted therapy (PAT) has yielded extraordinary outcomes for refractory conditions such as major depression and PTSD, providing significant optimism. As these treatments get closer to getting regulatory approval and being used in real life, the conversation needs to go beyond just how well they work. We write to bring attention to the difficult but solvable problems of standardization and scalability that must be solved in order to safely add PAT to our healthcare systems.

The absence of standardized therapeutic protocols constitutes a substantial obstacle. PAT is a complicated treatment that combines drugs with psychotherapy and the "set and setting" (Reiff et al., 2024). This is different from standard pharmacotherapy. At present, there is considerable variability in the duration of preparatory and integration sessions, the specific therapeutic modalities utilized, and the number of therapists in attendance. For the safety of patients and consistent results outside of controlled trials, the field must come together around evidence-based, standardized models of care that can be reliably put into practice.

The existing PAT model also has a huge problem with scalability. Having two trained therapists spend eight or more hours with one patient is very expensive, both in terms of staff and money (Bird & Daws, 2025). This makes us immediately think about the capacity of the workforce. We just don't have enough clinicians trained in these specialized techniques to meet the expected demand. Without new ways to deliver PAT, it could become a niche treatment that only a few people can get, which would not have a big effect on public health.

Health equity is directly related to the problem of scalability. The current PAT model is expensive and takes a lot of time, which could lead to a two-tiered system of mental health care that makes existing differences worse (Williams & Se-Lah, 2024). We need to actively look into more scalable methods, like supervised group therapy models for the integration phase, and create strong, accredited training programs to make a diverse and culturally competent workforce (Noorani et al., 2023). From the very beginning, making sure that everyone has equal access must be a top priority, not an afterthought.

In conclusion, the potential of psychedelic-assisted therapy is clear, but we won't be able to use it to its full potential until we figure out how to make it work in real life. Research and policy must now concentrate

on the creation of standardized, scalable, and equitable delivery systems. We can only turn the deep hope of PAT into a clinical reality for the millions who will benefit if we all work together to build the necessary infrastructure.

Sincerely,

CRediT authorship contribution statement

F.N.U. Shahzaib: Conceptualization, Data curation, Formal analysis, Funding acquisition, Investigation, Methodology, Project administration. **Tariq Mehmood:** Conceptualization, Data curation, Formal analysis, Writing – original draft, Writing – review & editing. **Arifa Arifa:** Software, Supervision, Validation.

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Declaration of competing interest

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