

Fear Me Out Podcast

Episode 47

Hosted by Clinical Psychologist - Dana P. Saperstein PhD.

Guest Speaker

Psychedelic Therapy - Michael & Naomi Sparrow

Kim Fauskee 00:01

So what we're going to talk about today is deeply personal to me. We're welcoming into the podcast studio today, Michael and Naomi Sparrow, who are guides in terms of taking people on psychedelic journeys. I was lucky enough to be able to do one with them about four weeks ago. And I also want to put out the context that is not promoting the use of hallucinogens. Here, in terms of recreational use, but this is a conversation about the use of hallucinogens for therapeutic use, and in a healing journey, I had done probably a year and a half's worth of research, in terms of psychedelics in the use of caring, PTSD and depression. And so I didn't go into this lightly or blindly. I had a lot of counsel and discussions with my co host here in terms of wanting to do this, and how it would potentially help me. So anyway, this is a conversation I've been looking forward to having for the last month. So Michael and Naomi, welcome. Hi. And so I think we'll first start off by talking about for people who may not follow the news, follow social media, follow psychology follow psychiatry, in terms of how the use of psychedelics now and how you'd be to have augmented these journeys with people in terms of healing, specific psychological traumas, and anxieties and depressions.

Dr. Dana 01:53

So as we get started, I just wanted to mention that I've known Michael for a long time. And when you mentioned to me that you wanted to do this, I knew the right person to send you to,

Kim Fauskee 02:02

you sent me to the right people. Yes. So anyway, so how did you to get started in doing this?

Michael Sparrow 02:11

I'm in my 70s and I started using psychedelics as a teenager. And I I didn't do a lot of psychedelics recreationally. I was introduced after my first LSD trip, which was definitely recreational. To a workbook that Timothy Leary wrote with Ralph Metzner, in which he, it was, it was a guidebook for somebody using LSD. And it compared and contrasted the stages of ego dissolution or death, the available with LSD to the bottos in Tibetan Buddhism, and I was already interested in Eastern religions and mysticism. And so I grabbed that, and that, from that moment onward, I I was doing LSD virtually every week and following the guidelines in this book. And so I, back in my late teens and early 20s, I did what today would be considered an unhealthy amount of psychedelics of every kind that were available then. LSD, psilocybin, MDA, all kinds of mixtures of those. And, and I think it formed me in lots of ways. When I met my wife, she had been working with people already. This was about six years ago. And

when we got together, she asked me to join her in the practice. Now, I had a background as a psychotherapist, I had practice for a number of years as a transpersonal. Psychologist, mostly dealing with existential kinds of issues within a therapeutic context. And so it was quite natural for me to join Naomi and was working with,

Naomi Sparrow 04:48

okay, so I was kind of a corporate wife and three kids and I didn't do anything from the age of 19 till I was 54 or, and I, my son was 24/7 alcoholic and I was looking for he was not doing well in any of the rehabs you put them in and I was looking for anything that was new. And I came across some metadata studies that aggregated small studies from the 50s and 60s into one larger study of using LSD for abatement of alcoholism, and they were having ridiculous results 60 70%. And I thought, well, that's interesting. I then looked for a program that I could get him into, because there were a couple, but he wasn't old enough to be 25. And so I began, I had done psychedelics. As a teenager, I stopped doing everything when I was 19, because I was on a spiritual path, and I wanted to get there naturally. And I'd been out of my body without the assistance of psychedelics anyway. So I just let her, I had let her all go down. But if I knew I could handle it, but I wanted to understand how it was being presented in a therapeutic manner. I had by this time had a degree, a master's in spiritual psychology from University of Santa Monica. I wasn't using it, I wasn't intending to be a therapist. But as I looked into the community that was available and want to go to South America and want to sit with somebody that I didn't have the same language with, it just was not the way I was going to do it. So I looked around and found people in low lying places that might help me find to connect with these folk. And eventually I did, and the rest is history, I fell in love with the medicines. I was not struggling personally. But it took me to just an incredible place very quickly, where I could see my happiness was growing, my self confidence was growing. And I saw it as a real healing tool, my first MDMA group experience, I ended up holding a woman for an hour and a half, while we laughed and cried, she cried mostly, and I was just very happy to be of assistance in any way that I could, I was high as well, we were both having a good time with the idea of healing. And what I've noticed about MDMA is that in this group, every and every time that I would do a group experience, I watched people drop into their core issue with a smile on their face. I thought this is very interesting. This is a tremendous tool for psychology purposes. And I began to I also did ayahuasca and then LSD and all of them. And each one of them had a tremendous gift of healing for me, that, you know, I won't get into here, but it really motivated me to work with others. And I began by with friends, and then that became referrals. And I just fell in love with the process of helping people to find their heart and be present to their life and find joy. This was before getting together with Michael, this was before. Okay. And when we met, I put that on hiatus because he was not mean about exactly, I mean, I did a few journeys, I would go to LA to do them and work with people that I'd worked with before, but the pandemic came, and here we are, after the pandemic, during that time, he decided that I mean, he's so good at.

Kim Fauskee 08:34

So for those that are listening right now, that may not be familiar with these acronyms, MDMA. Probably a lot of people know what LSD is. Psilocybin and kind of the current list of psychedelics can you talk about a little bit before we continue on the conversation about each one of those and how they work and what they do?

Michael Sparrow 09:01

Well, MDMA which is known by the street name of ecstasy and Molly became very popular when there were a lot of raves happening. And the Madison was caught in most cases with a disproportionate amount of and Fadiman which is why people would spend be still doing hours and hours and hours at three o'clock in the morning or four o'clock in the morning. But it is an an empathetic, empathetic. It puts the subject into a very much state of empathy with whatever they're around human beings, animals, furniture design. You have this sense of connection. And one of the great advantages of MDMA is the amygdala retreats. So the flight or fight response is gone. And it allows the subject to look at difficult historical and old present circumstances, from a much more from a non reactive and more expanded state. And, and for that reason, it's almost ready to be approved by the FDA, as a result of the work that's been done by maps for treatment. In clinical settings for PTSD. It's very different from the street that when we say MDMA, we make a distinction between that and Molly and ecstasy. And as much as that the kind of MDMA that's used therapeutically, has been thoroughly cleansed of as much of any amphetamine reaction as possible. So it's much easier on the body, the duration of a journey, two to three hours for a single dose, although in a therapeutic environment, when typically would give two doses, a single dose, and a booster dose about half the original LSD. LSD is versatile of all, without a steam, you're not ingesting anything, it's it's essentially like taking a homeopathic medicine. In fact, we we administer it with one single drop in some cases of other liquid. So it is immediately and very relatively quickly enters the brain. And of course, it's famous for creating distortions and vision and hallucinations. But after depending upon the dose, after a relatively short time, maybe an hour, it tends to initially take the individual into something of a struggle. And the struggle is between the movement of Madison asking you to, to surrender to it. And the mind that refuses to let go of control. And this is, of course, a perennial struggle. It is a struggle in every part of life, not just under the influence of LSD. But under the influence of LSD. It's it's a big struggle for a lot of people, you know, we humans don't want to let go do we do not want to let go. And part of our job is to create a safe enough and trusting enough environment where we can help somebody surrender to the medicine, because once they do surrender to the medicine, it gets very, very fun and exciting and deep and revelatory. We can talk more about that. Psilocybin is a good alternative to LSD. The difference being is that you are ingesting material in most cases into your digestive system, although some synthetic psilocybin is starting to become available as being used in research anyway. Typically, subjects will take psilocybin either ground up and served in some yoga or some juice

Kim Fauskee 14:25

and we're talking about magic mushrooms here.

Michael Sparrow 14:30

Psilocybin mushrooms, of which there are well over 100 Different species, but there are you know, certainly some popular ones that everybody knows about. Pina, the SAM V golden overlay and so on and so forth. And a typical therapeutic dose of mushrooms is going to for most people start off at around three grams. We talk about museum doses. So we will just talk about that with LSD, you can take a museum dose of LSD or museum dose of psilocybin mushrooms. And that reason it's called a museum does is if you happen to be at the Museum of Modern Art, and you are able to go and do the whole museum and experience it in a very different way, but you're able to navigate you you're not out of control, your mind is still pretty much engaged. And it can be very pleasant. therapeutic doses, for

most people are larger than that. So with psilocybin mushrooms, they're going to be initially probably three grams, although we always due diligence on how people respond to over the counter medicines, coffee and a variety of other things. And body weight can also have a significant impact upon dosing. So it's very, very important. If somebody is not having the response that is typical, after about an hour to an hour and a half, there's a window in which you can give them another dose. And that that'll vary depending upon where they are. And after three hours, you can't do this anymore. So you've got to kind of do it in that hour and a half to two and a half hour window. So psilocybin behaves in a similar way to LSD, it tends to be more physical, people experience more body related sensations. And in many cases, more hallucinations because there's a closer connection with nature. And, and we find that people that are quite emotional, who's more emotionally polarized rather than mentally polarized, really like psilocybin and people who are more mental tap people in tack for example, it just people who have that kind of a brain, they do better with LSD. So those are the three most popular read, do really well with LSD, artistic people, autistic people. Ayahuasca to manifest a real quick question. When I was young peyote was a huge part of the hallucinogenic community of drugs. Yeah. Is that not part of the situation anymore? Absolutely. It is. Yeah, it's absolutely, but it's not part of the journeys that are readily available that DOD buttons prepared to take 20 years to grow. And so there's conservation in fact, it's intentionally left out of a lot of the legalization efforts, or, or they call it criminalization efforts, because they want to control the indigenous aspect. But if you ask me, it's not worth vomiting. I'd rather do Ayahuasca than peyote.

Dr. Dana 18:19

Okay, I do remember that part, too. And so

Michael Sparrow 18:23

it's a long journey. Yeah. You know, it's like 910 hours. Yeah.

Dr. Dana 18:31

It was super fun when I was young.

Michael Sparrow 18:33

Oh, yeah. It's a very, very, can be a very fun experience. It's very nice.

Dr. Dana 18:40

I'm sorry to interrupt. No, no, it's not at all.

Michael Sparrow 18:43

So I WASC us become very, very popular. And it

Naomi Sparrow 18:50

and it's a specialty to serve, we don't serve it,

Michael Sparrow 18:53

we do not apply it. First of all, it's almost always done in groups, some of them large groups of people. It can purge, not only physically a person purges, physically most people throw up or have excessive

bowel movements, with losco but once once kind of moved through that uncomfortable experience. The medicine presents the subject with a sort of a whole psychological emotional history to clean up. You mean you can really stop seeing and working and releasing a lot of, of the difficult material, historical material. And for some people It will take them into an experience of the Divine. The divine is transmitted through the energy field of the iOS Casca entity. And for most people, that experience is as powerful and as meaningful as any ecstatic experience that mystics have had, without there being an influence of any medicines at all. So it's very powerful. And it can definitely help people affirm their connection to spirit. And that can be a beautiful thing.

Dr. Dana 20:54

So why is it from your perspective Naomi that you decided not to use that in your practice with people?

Naomi Sparrow 21:01

Because you really need to really study both how to make, I would want to make the material I certainly want to, I'd want to know who was making it. Okay, a part of that, but it's long considered something that you would need to master in procurement of the material and administration of it.

Michael Sparrow 21:24

Most, most people who organize these groups, you know, bring a South American shaman in with his medicine, oh, can they mix it and see 10 charmed and their native tongue and, and set up the ritual and they're, you know, there are some American shamans that have been in South America and and trained and have learned how to do it. But mostly, there are, you know, celebrity shamans who travel around the world and, and sit in Iowa Oscar ceremony.

Kim Fauskee 22:10

I'm sure they'll have their own reality show soon.

Dr. Dana 22:15

So, Kim, I'm imagining that our audience is really curious about your experience with Naomi and Michael.

Kim Fauskee 22:22

Well, I was gonna get to that. But I was going to ask them one question first, that kind of goes back to Michael describing the modes and that they use in their practice is when, even though I had done research on what I thought was the right thing that I wanted to do for me, how many people that seek out your services know what they want to do? And how many are looking for your recommendation? Or how many people will actually think they know what they want to do? And you're like, Yeah, I think you should try something else.

Michael Sparrow 22:55

It's fairly common that people come to us with a prescribed idea, because they've read it. Well, they've watched Michael or Michael Pollan's book, which is wonderful, and the new documentary is terrific. The best thing I've ever seen on the subject. But you know, they, they think they want to do psilocybin and, and we may well know about the benefits of MDMA. And

Naomi Sparrow 23:38

there are very few people that don't benefit from MDMA, or physically,

Michael Sparrow 23:41

frankly, our preferred way of working. We get a lot of our clients from out of town. So they come in for two days. And on the first day of Friday afternoon, we will serve MDMA. And the nice thing about working with MDMA first is they can very often engage with and manage any psychological issues on the MDMA, and find themselves hopefully in the place of compassion and forgiveness and self love and they feel great. In fact, most people say I've never felt so good. And that's about a four to five hour experience. Some we give them two doses. I go to bed and they wake up in the morning and they're happy campers. They feel stable. They're in a good place, which is a wonderful platform to take a serious look at Allah Crom.

Naomi Sparrow 25:00

And by then they are very comfortable with us. And they trust

Michael Sparrow 25:03

us by that time, and we've already developed quite an intimate relationship or Yeah, right. And then they, they take the medicine and the next day and they don't have to deal with trauma and a lot of the more difficult material in their past second really embrace the the medicine. So that's our preferred approach. Some people come out, I like to come and do mushrooms with you, and we'll talk to them, we'll find out who they are, I will say, Well, have you considered the possibility of doing LSD instead of mushrooms? And well, why are you making that suggestion? And we'll tell them why. And then they can make a choice. I mean, it's 100% up to them. But we will advise

Dr. Dana 25:57

is there an intuitive quality to how you approach meditation with people? Oh, well, probably. Oh, yeah.

Michael Sparrow 26:06

Well, I mean, there's two components to it. First of all, we typically, even though we've generally spent half an hour 45 minutes on the phone with people, we've given them an intake form that is relatively revealing.

Kim Fauskee 26:25

Yeah, I'm glad you're saying that because it, I don't want to call it an arduous process. But you guys spent time with me. I think we spent an hour on the phone, and then your intake form as well, you know, kind of getting to know me medically, psychologically, you know, so on and so forth. So I don't want people to think that this is like a conversation. Here's your Medicaid, Here's your medicine now and go on your journey. So this is an involved process.

Michael Sparrow 26:52

Well, it is it is with us. I mean that you know, which I appreciate. Right. But I mean, you know there I'm sure California is populated with lots of 30 year old shamans. Absolutely no life experience. You know,

we've done some drugs, and they're in the game now of making a living, guiding people, you know, we're not that we don't, we don't hold ourselves out as shamans. But we have had a lot of spiritual experience. No, I Where do we go with that question? I'm sorry, I lost you.

Dr. Dana 27:38

Well, the question was whether you guys also have an intuitive Oh, yeah, well, we spend a lot of time

Michael Sparrow 27:43

when somebody arrives. really drilling down, because the way any of these medicines work, and there are a couple more I'm going to mention, of course, there were two more prominent ones that I should mention. Well, three actually is the intention. You know, and most people don't understand how intention works. Very often, folks will come along with an intention of what they don't want to have happen in their life. And we have to coach them into turning it into a positive intention, and recontextualizing. But even then, there's more. Because we know that the true intention that everybody who walks into our home has, is to feel love. Absolutely, to feel that big love, right, in living and existing inside them. And so we want to coach them towards an intention that's going to take them into that open space. And so that's where we stop.

Naomi Sparrow 29:06

We poke around in their psychology that just happens as a natural as a matter of course, because we're asking some very, you know, personal questions and,

Michael Sparrow 29:14

and we, we have a philosophy. If you want our philosophy, it's very simple. We will assume that everybody who shows up is showing up with a default pattern. And their default pattern is based upon the past. And our goal if you say we have a goal is to them to leave us with a new default pattern. Well, that's a healthier default pattern. If that happens, we've done our work successful. We typically will set holding space for all 5689 In hours, one of us will be present the whole time, most of us most of the time, both of us will be fully present. And sometimes it's four to five hours of nothing. I mean, nothing for us. I mean, we're just holding space being silent, feeling into the psyche of the person in front of us, making sure they have water, blankets, pillows, connecting with them, but there's nothing interactive. Other times. It's quite interactive, and it's a dialogue going on at different stages of the journey. So,

Dr. Dana 30:47

and you guys are not under the influence yourself. But you're not really influenced yourself? Oh, no, not

Michael Sparrow 30:52

at all. Okay, that's

Dr. Dana 30:53

what I thought I just want to make sure that was clear to the people that are listening, that it's the, it's the person that's,

Kim Fauskee 30:59

they're not going on the journey with you. Right? In that context. You're going on the journey, but but but not in your experience, not ours,

Michael Sparrow 31:08

we want to be very grounded in our bodies, okay. And, and the way that we can feel into people is through our bodies, right? So we are very sensitive, and we can sense what's happening.

Dr. Dana 31:24

So that's where the intuition part comes in. That's where the intuition part comes into picture. And

Michael Sparrow 31:28

sometimes you can see somebody's laboring. And in almost every case, when somebody's laboring, they've got caught in a mental spiral. And sometimes that spiral is going down into, you know, more and more confusion. So we then step in, and change this state. And that that's intuitive.

Naomi Sparrow 31:57

It might be touching their shoulder or their foot, or it might be saying, why don't we go outside?

Michael Sparrow 32:02

Alright, or, you know, it might be depending on how well they can talk. Because sometimes you can't talk right? What are you struggling with? And if they can answer that question. It's very easy to shift them. Have you looked at it this way? No, I've never thought of it that way. But oh, wow. And that challenge goes away. So it's one one's mind is very porous, you know, a under the you can influence the direction quite easily with most people when, if they trust you, that is,

Dr. Dana 32:54

when you came into their home distort your experience. You weren't sure about the MDM, the MDM a part of

Kim Fauskee 33:04

so. So again, I want to reiterate that I went into doing this being fully informed. Right? Again, I had done my own research, I had talked, I had spoken with Michael and Naomi at length, about my intent. And what I was hoping to get out of this in terms of continuing, do we heal myself, to love more deeply and hopefully, to get I don't know if there were answers, but maybe they were answers to, you know, my biological mother and why I was given up for adoption in there. So when I talked to both Michael and Naomi originally, I had talked to them because of my research and LSD and and, you know, I had been invited on numerous Ayahuasca trips and things like that. I just never felt that that was the right thing for me, pretty much based on what you said about ayahuasca. That was, you know, I've had friends that have had very positive ayahuasca experiences and multiple ones. I've had people that have known people that have had positive and negative experiences with Ayahuasca. I just didn't think it was for me. I think Michael, when you spoke you talked about LSD, the breaking of that familiar pattern, that unhealthy, familiar pattern. And that was important for me to hear because in my research with LSD, that's what I was hoping to achieve. There. You did speak i i believe or aspect I know that we spoke about the use of MDMA as an Augment to the LSD which I think is the reverse candy flip. The candy

flip is the drug terms as LSD fall, bam, da MDMA. But you had talked about MDMA, followed by LSD in that way in that you thought that I was A good candidate that would actually enhance my experience. I had no problem with LSD. Because I had done the research on it, I felt that was the right thing for me. Dana dancer, your question, I think the jury was out on for me. But in sitting in counsel with both Michael and Naomi and talking to them at length, prior to starting the journey, I felt comfortable that they were giving me the right advice that the experience that I was going to have would probably be better if I took the MDMA with it. So I know that you have a little bit of a differing opinion about the use of MDMA, which we can talk about later. But I can start describing a little bit about my journey with Michael and Naomi. And again, they can fill in the blanks. That either I don't remember things that you observe, that I don't talk about, that you think are important in my journey, or for people to hear here. But so we started out with a dose about two in the afternoon with a dose of MDMA. And that was a you can you were talking about dosing earlier. But that was a a larger than normal dose, or therapeutic dose? I don't want to get no

Naomi Sparrow 36:26

I think, well, yes, it was a therapeutic dose. Okay. And our best guess based on your,

Kim Fauskee 36:31

my height and weight, six foot four 210 pound frame. Exactly. And I think I had that experience that you were talking about, and I was where you were talking about MDMA and what people get from that. I didn't want to I didn't want to use the word euphoria. But there was this kind of mix of euphoria and relaxation. At the same time, I believe I was sitting in your living room, I was cognizant enough to continue having a conversation with YouTube, but it was like, I feel so relaxed, you know that. I don't want to say nothing mattered, but everything just kind of just was great. At that point. I believe it was probably two hours into the MDMA. And we still were conversing that you thought it was the right time to begin the initial LSD dose. And I'm gonna have you talk about the initial dose that you gave me, which I believe was, I want to say three tabs. But I but I believe that it's usually one to three micrograms per kilogram,

Naomi Sparrow 37:37

it depends on what you're buying. Oh, you're talking about dosing? Yeah.

Kim Fauskee 37:39

dosing on that LSD.

Naomi Sparrow 37:42

It's not about weight. Okay. It's me, okay. Because I've had people with a very small take very large doses of it, people that are very large take very small doses. So you just can't predict that in some respects that way. But generally speaking, what we gave you is about 240 220 240. Mike's okay. Yeah. And that's a healthy dose for the average person. That's a therapy, what we would call a therapeutic dose. Yeah, that's not the museum. Museum dose can be under 100. Okay. 50 To 70 to one of those

Kim Fauskee 38:12

little. Okay. And so I think it was, we were talking about timeframes, again about second dosing. And I think within that hour, hour and a half timeframe, you asked me how it was doing, and I didn't think that I was experiencing what I was hoping to experience at that point. And I believe you gave me another.

Michael Sparrow 38:33

We gave you another 240 mics. Yeah.

Kim Fauskee 38:37

So I don't want I don't want to use other podcasters' terms, but they call that the heroic dose now. And I hate that term. But

Naomi Sparrow 38:47

it's a big dose. But here again, what we're finding in our practice is and is really quite at the bell curve in our practice. And it might be because we get certain profiles of people, maybe with histories of SSRIs for him, perhaps and we don't know what serotonin, what's happening to serotonin over the long run for those things.

Kim Fauskee 39:08

And again, I think, for people that haven't heard me speak about this before I do suffer from PTSD and depression, and have taken SSRIs before but not currently, on ones

Naomi Sparrow 39:19

that are practice, we see just a lot of people on the edges. And so you know, that take a lot, a lot a lot. It's not unusual for somebody to take six altogether. And that probably next time you came in, we reckon if you wanted to go there, we would probably recommend five straight up. But when you take it second, it's it you need more material, and you do the initial.

Kim Fauskee 39:45

So at some point you lose track of time, personally, right. I didn't, you know, it seems like you've been there 24 hours a week, two weeks a year or something. So I don't know when that second day actually kicked in whether that was in minutes, or that was an hour while you were sitting there. But I still remember us. Yeah, it was cognizant enough for us to consider or to understand our conversation. And I remember the first vision I had was me as the adult, as I am now, standing over me as probably a two or three year old child bathed in this beautiful warm orange light. And I remember the feeling of I know this feeling. I couldn't place where I knew this feeling from. But it was this feeling that I had. And after talking about it, it was the same feeling that I had, as a young child that was trying to get away from the abuse in my house. And I would seek solace inside my closet, and I draped all the clothes over me. And not knowing as a child, about your intuition, or not knowing about faith or not knowing about God, but I understood while I was in the closet that I wasn't alone. And I had that same comforting for that exact feeling. And that initial vision there. I remember, at some point, we had transition outdoors. And I started to have the shakes, which you said or normal under the influence of high dose LSD. And there's an actual clinical term for that, I believe, Michael,

Michael Sparrow 41:29

what I perceived you are having was wanting in yoga, or in kundalini yoga, a call criss cross correct, where the muscles of the body can sort of go through ripples of contraction, as energy is getting Shake, shake, shook loose, and

Kim Fauskee 41:52

release. So when you mentioned that earlier, about, you know, getting people through this blockage and getting them to, you know, release the control. This is when that point happened for me. And it was a it was a brief moment of panic for me when I felt like what it felt like was a seizure was coming on. And I remember both of your voices saying, It's okay, it's okay, you're fine. This is the normal process. This is the bad energy, the blocked energy coming out of you. And I think it probably happened 234 more times, if I remember correctly. And again, I had lost track of orientation of time, it seemed like it was happening over a long period of time, but I'm sure it wasn't. And I remember you both saying, Remember the feeling, remember this feeling. And I remember probably the third time I started shaking, I could feel the energy in and dripping from my fingertips. And that energy was black, that was coming out of my fingertips. The next thing I remember was after the energy dripping out in that release that I finally had of letting go was this brilliant flash of bright light. And then appeared, at least what I presumed was God didn't say anything. Just Oh, welcome me into this voluminous white room where I floated for what seemed like days years decades through this white room and then found myself in this idyllic blue space and yeah, it just it was it was colors and clarity that I had never seen before there and it was probably the most peaceful and relaxed feeling I've ever felt in my life there Oh, I'm home yeah, it was it was insane and I've talked about this before and and in talking about it since this journey a month ago you know, I've always believed in God and I think I told you guys I believed in God and but I think I always had one foot out the door was yeah, you know, I believe in this high higher spiritual being God. But I'm not sure so sure how much he plays a role in my life and then him being there and showing me to the other side. They're brought that other foot in the door for me.

Dr. Dana 44:55

So it sealed the deal for you.

Kim Fauskee 44:57

It sealed the deal for me, unlike you who eats oxtail. Apparently he didn't have to talk to me. He just had to show his face momentarily there. Show me into this space there. And that was enough at that point. Yeah, I remember, I think it was really important. And I still remember this and talking to friends about this journey is that the thing that you kept saying to me is remember the feeling. Remember the feeling here, because that's what you're going to have to come back to is the feeling on that

Naomi Sparrow 45:32

you want to go back to where you were where you want

Kim Fauskee 45:34

to go back to, in a couple of things. I mean, those are kind of the highlights. I mean, if you guys can remember some of the other things, and I think this went on from 2pm to midnight, something like that, at that point. And remember, when you were talking about the museum dose versus a high dose of LSD, you know, I remember knowing where I was and knowing how to get to the bedroom, but asking

you like, Yeah, I know where it is. But I don't think I can get there on my own at that point. Some interesting things have happened since this journey. One was that people that knew that I had done this, and people that I didn't know that I had done this, said there's something physically different about me. A couple people that had said that, that knew that I had gone on this journey before had said that there was a kind of this renewed clarity, maybe not a renewed clarity, but this new clarity about me. And other people just said, I don't know how to explain it to something physically different about you now. Yeah, so the other thing, post journey, there was a couple of dreams that I had. One being that I had gone to bed with some level of anxiety, I had a couple of anxiety laden dreams. And then suddenly, I saw that bright white light again, God didn't appear this time, or who I thought was God didn't appear this time. But I did go back into that voluminous white room and seemed to float there for a period of time. And I was thinking to myself, wait, I think I'm dreaming, Am I dreaming this, I don't think I'm dreaming this. This is actually happening. And I woke up with complete peace and calm. And about two weeks later, I had another dream. I was standing with my back toward the ocean in the ocean, and somebody yelled out, Hey, watch out behind you. And I turned around, and a large wave was breaking on top of me and I dove under it. And when I came out from underneath the wave, I was in that idyllic blue room again. And, again, I had that thing like, I think I'm dreaming this but I think this is actually really happening. And then I woke up again, with that complete feeling of peace and calm. At that time. I was also telling you before we started recording that I had an instance also, since we've had this journey that got the hamster in the in the the wheel one day for for a few minutes there and was able, for the first time in my life not to let it affect my whole day or the next three days or the next three weeks, but was able to bring myself back to center for the first time in a matter of minutes. And stop that hamster from turning the wheel. So they're not only that, that kind of spiritual awakening that I've had, but I've been able to maintain this peace and calmness within my life. And like I was telling you before, everything seems more amplified sounds sights seem more amplified to me. Like we're like I was talking about before when people sense that change about me. I definitely have more clarity. So I'm interested because I you know, it's it's only been a month, and it's still new to me. You know, in three months and in six months, because, you know, we were talking about, you know, is it? Is it healthy? Is it possible, you know, that you need to continue to do these type of journeys, or is it a one and done type thing? And I think, you know, at least for me personally, I think the jury's still out on that. I think I need to spend you know, some more time processing and going through the things that are naturally happening to me right now. People ask me, would you do it again and I said I don't think that's the question. The question is, why would I do it again? If I had, and I think you guys describe to me, maybe I'm misstating this, but I had a five out of five, journey, LSD journey on that, that, you know, I hit all the major points. And I think it's important to mention also that you and the three of us had this discussion because I had done countless hours and years of psychotherapy, and countless hours and years of hypnotherapy, I had done the back work before going on this journey. So I think that significantly helped me get to where I was hoping to get with this. And again, my intent, intent wasn't to be enlightened, my intent wasn't to, to find some answers that I didn't have my intent was to continue the healing journey. And I think it did just that.

Dr. Dana 50:58

So can What about the idea that you have a deeper relationship with God as a result of this experience, and that not being lazy about that by exercising that relationship on a regular basis to keep it moving along? Because I think that part of what you guys are talking about is this notion of if you get lazy and

you just sort of think that one experience is going to change your life forever, and you don't capitalize or, or keep moving along in that direction, then of course, it's going to go away, you have to have a

Michael Sparrow 51:28

structure, I would say that. And this is almost universal for us, with every client. Every client recognizes at least one, if not half a dozen bad habits. Right? Right. And the integration work after a journey where you become aware of these bad habits, is to start changing them. Exactly. You know, if you don't, if you don't engage in a practice to change the habits, that you know, are not loving you and not supporting you in being full of love. You know, you're not going to be happier.

Dr. Dana 52:22

Well, you know, Michael, and I tried to keep it as simple as possible, because I'm maybe just because I'm a simple person, but I exercise my relationship with God on a 24 hour a day basis. And the reason that I do that is because I think that faith is not a blind concept. I think that the more that you feel that connection, the more it reinforces itself, and just becomes an automatic part of your life. Right. And so, you know, Kevin has joked with me sometimes about the fact that God talks to me, but that's mostly because I'm talking to God all the time. Now, I don't do it out loud. Because I think that that number wouldn't be a little bit annoying. And I think it would also, people would look at me, like, how come that guy's talking to himself. He's not on his phone. So

Michael Sparrow 53:09

we know people like this.

Dr. Dana 53:12

But part of what I was hoping more than anything for him, because he's a very dear person to me, is that he would feel more connected in a way that feels personal to him. Yes. Because it can't be my way. Everybody has to find their own path to it. But every time he describes a dream to me, he lights up. And I light up because I think oh my god, I'm so happy this is happening for him. Because as long as you exercise your spiritual muscle, I think it's just going to become more just a part of your life. And in a easy way, it gets easier. Yeah. Because I think we weigh over the complicated things.

Kim Fauskee 53:51

So to answer your question, yes. I've had more discussions with God than I've had in the past. Okay, knowing that he's listening, because he's reminded me in my dreams that he's listening.

Dr. Dana 54:02

And that you're not alone in that, and then I'm not alone, and you're gonna be cared for. Exactly. Yeah. So that's a part of that i i just find endlessly fascinating, and I'm really happy for you.

Michael Sparrow 54:14

And that presence, is you. Absolutely. It's not some

Kim Fauskee 54:22

external that No, I'm not some sixth dimension. Now. It's,

Michael Sparrow 54:25

it's you. It's just another deeper part of you.

Kim Fauskee 54:30

Yeah, I certainly feel that whatever was still blocking or myself blocking or some bad energy that was still back there. It certainly knocked that around. And like I said, that whole dripping of the energy out of my fingertips. It certainly seems like there's a lot more space in my head now. For more positive things on that

Dr. Dana 54:58

I'm only smiling because If you didn't finish the sentence there's more space in my head. Yeah, there's

Kim Fauskee 55:03

more space in my head now. Yeah, right. With more positive space in my head. Yes. Michael had mentioned before I got on my personal story there was three other hallucinogens that we haven't mentioned that are maybe popular or maybe in use.

Michael Sparrow 55:19

Well Ibogaine is a medicine that comes out of Africa. And it's a pretty intense process. But I believe that there is a center now in Utah that is helping people with Ibogaine and its particular use has been in helping people get over opioid addiction. And it's, you know, unfortunately, there's no real research yet, but there's a lot of anecdotal data that indicates that people who go through the Ibogaine process which is, as I understand it, quite rugged, are able to free themselves

Naomi Sparrow 56:12

some days to three days of flood dosing for opiate addiction,

Dr. Dana 56:16

how would you spell that? Ibogaine? Yeah, do you know

Naomi Sparrow 56:20

IB o GA? I n, I believe? Yeah. Or maybe an AMA that was an E on the end. And

Kim Fauskee 56:28

thank goodness for Google. Yeah, right.

Michael Sparrow 56:30

Okay. Thank you. Yeah, but very interesting. Madison

Naomi Sparrow 56:34

typically have to have a checkup before medical checkup, you have to have an EKG they have medical staff typically on

Michael Sparrow 56:41

Yeah, we always have a doctor president. I mean, it's, it's pretty intense in

Naomi Sparrow 56:45

answer to, you know, doesn't cure whatever got them in that. The first place sometimes gives them a lot of insight, but it does Absolutely.

Michael Sparrow 56:56

Get through the addiction, physical addiction. I

Naomi Sparrow 56:59

have no physical addiction at the end of three days, which quite remarkable,

Michael Sparrow 57:02

remarkable. Okay. So that's an interesting medicine that I'm sure we'll learn much more about, you know, DMT DMT is the active ingredient in LSD, psilocybin and ayahuasca and it's IT people make it and you can essentially inhale it using a vape pen. Typical vape pen this use cannabis oil. And it provides a 1510 minute 15 minute transcend DMT DMT one

Naomi Sparrow 57:54

and then DMT

Michael Sparrow 57:56

stuff at 5am. Yeah, no, no five year Mia. We're gonna talk about that.

Naomi Sparrow 58:00

About five or 10 minutes. Yeah.

Michael Sparrow 58:03

And explain what your experience of it is.

Naomi Sparrow 58:07

Oh, it's just fractals so nn DMT is very short. And I don't know that I've been able to inhale enough to get really blown out. But I've had several five Meo DMT experiences that absolutely had me out

Michael Sparrow 58:26

different so the DMT is short acting fast transcendental experience. Fun five Mao DMT, which they call a god molecule.

Kim Fauskee 58:42

Is that the same one that the secretions of the frog die? Okay,

Michael Sparrow 58:47

exactly. The toxin from the frog is in total, maybe 30 minutes, but the intense part of it is maybe 10 or 15 minutes and it completely dissociates you from the body. And you're in a in a state, infer most people full of love and godly experiences, sit without any experience of body, and then you come back into the body and you get whatever you get from that for most people, it gives them a confirmation of the existence of there being an other reality a spiritual reality, a god reality that's behind their lives, I think for most people, and very affirming for people. And then there's ketamine

Dr. Dana 59:52

and you're saying five ma oh five

Michael Sparrow 59:54

me a no M EO Meo DMT Oh, Okay. And that is also inhaled. Right? Generally speaking from a pipe, or from a CA device, like a dabbing devices use cannabis. And then there's ketamine, of course, which is illegal anesthetic, that some people are having very good results at getting relief will be it relatively temporary. So the theory behind ketamine treatment is that after taking it, you lose awareness of your body or in, you lose all sense of being depressed or anxious. You essentially disassociate from everything physical, which gives you the relief, and you return to physical reality in 15 minutes or thumb depending on how much you're given and how much of a dose you're had. And then what's recommended is fairly intensive psychotherapy, four or five sessions before you do your next journey, so it's quite expensive for people to go through this process. It definitely has given some people relief and other people is had very little effect on. So it's not reliable in that sense. And

Kim Fauskee 1:01:48

surprising, since it's the only legal one administered by physicians, right.

Michael Sparrow 1:01:52

And it's dissociative. And ultimately, we have to come back to live in our bodies and deal with what's going on in our emotions and our bodies. And so I think it has some relatively short term value, but you know, there'll definitely be people out there who say this fix my problem, you know, so it depends on the individual.

Dr. Dana 1:02:19

Now, I'm curious about something you guys are talking about? Periodic use of therapeutic doses of hallucinogens. Do you often or ever asked people to use micro dosing afterwards as a way of Oh, yeah, as a way of sort of keeping the, the experience going in a certain way.

Naomi Sparrow 1:02:40

We have a young lady whose last count was 456 days sober. And she micro dosed for the first year and she hasn't. She's not micro dosing now.

Dr. Dana 1:02:51

And micro dose, which

Naomi Sparrow 1:02:53

LSD, okay, yeah.

Michael Sparrow 1:02:55

And we have a doctor who was 25 years on SSRIs. And he microdoses to get off them, and he still microdoses but he's haven't hasn't had to go back on SSRIs.

Dr. Dana 1:03:17

I've made millions with some of my clients that have had really positive results from micro dosing. Mostly psilocybin, but I know that LSD is also a popular that, you know, drug works

Michael Sparrow 1:03:30

both work equally well. Yep. Yeah, I mean, it's easier to microdose LSD, because you can control the dose, right, whereas with psilocybin, you, you don't have accurate data, that's something

Naomi Sparrow 1:03:45

people should know, too, because obviously, this is all available on the street, but the potency of one mushroom to another can be varied quite a bit. So it could be easy to overdose. One of

Dr. Dana 1:03:56

the particular people I know are challenging, I'm sorry, one of the people I know that microdose with psilocybin grows his own mushrooms and so it's quite simple. And he said, it's really fun. Because you get to watch them materialize.

Michael Sparrow 1:04:10

I'm not I'm gonna challenge it, it's not that simple. No, everybody I know who who's grown their own mushrooms has lost at least two or three crops before they get it right.

Dr. Dana 1:04:23

Maybe this person is just really good at

Michael Sparrow 1:04:26

the wrong media, overall environment and the right media, but you know, I mean, people I know successful put on lab coats when they go into

Kim Fauskee 1:04:37

so people that may be considering or now understanding the psychedelic journey. They're wondering because they hear in the news about MDMA being laced with fentanyl. They, that's true, and you know, like, Okay, if I if I decide whether it's with Michael and Naomi to do a journey Whether through whomever else other shamans out there or or anybody else that does this, maybe they're concerned about the purity of their medication. So Can Can you speak to that? Because

Michael Sparrow 1:05:11

Of course, well, first of all, whenever we get a new batch of MDMA, specifically, whenever we get a new batch of MDMA, from the lab, we test it ourselves. Because that helps us decide how much to

dose or what, how many micrograms is a dose, because it's not not every batch is the same. We also use a test kit. So we want to make sure that the product is MDMA, and it's not caught with anything else. So we those are the precautions that we take the same as well. The mushrooms come directly from the grower, but we have to find out how strong they are. So we recently got a delivery of a strain called Double A. And our growth said it's stronger than the LM materials. And it was by a lot by law. So like two grams of the double A might be equivalent to three grams of penis MP, for example. So we have to test it, and we have to find out. And you know, we work with the same people for many years. So it people,

Naomi Sparrow 1:06:44

I mean, there is a company called Dance safe, and they can send you to order test strips for fentanyl, specifically, which I would highly recommend to anybody that's thinking about doing any, you know, thing off the street? Because it is very, it's very prevalent.

Kim Fauskee 1:07:02

Yeah, I, you know, for my sake, I would never have done this journey on my own, I wouldn't have, you know, whether the drugs were pure or not. I didn't like telling you guys, I didn't know what to expect, because I had not done hallucinogens before. Not that I had too much trepidation, because I knew what I was getting into it at that time. But I wouldn't have had even close to the same experience, if I would have sat at home and done that, versus sitting with you guys for 20 hours. And going through that entire process. And, and understanding what that process and was and, and what I needed to get out of it and what I needed to feel and what I needed to remember from it. So you know, if somebody's sitting there at home right now thinking, Hmm, I can just get I can, this is kind of cool. And I can get these drugs on my own, you know, because yeah, they are readily available out there and and have this journey, I just wouldn't recommend it to anyone,

Dr. Dana 1:08:07

you know that you're bringing up a really good point, I actually know somebody who has been experimenting with psilocybin and he gave himself a bit too high of a dose and he was by himself. And he said that it was not as pleasant an experience as it would have been if somebody was with him to kind of help them feel not scared of being alone. So I think you have a really good point.

Kim Fauskee 1:08:28

So is we kind of draw a conclusion to this hour long episode. Is there an ideal client for you guys in terms of going on that journey?

Michael Sparrow 1:08:43

So what we've loved, and we've made mistakes, in the learning, of course, as we're learning is, if somebody doesn't have a self reflective process, they've been in therapy, they have a meditation practice, they have a way of processing some idea of their psychology, right, they have a way to have a way to process this, medicine is probably not going to be very helpful to them. They won't know what to do with it. And they just get blasted out into the cosmos, they may have an experience, but they won't know what to do with it. And it's not our job to initiate people into developing a self reflective process. They need to have one and we've worked with a couple of younger people who wanted to have the

experience because they'd read all the publicity and so on and so forth. But neither of them had been in therapy. And, you know, it was kind of so what So I think that's the most important thing. So, anybody who's got a self reflective process that's on a, an exploration journey, serious self exploration and has some kind of a practice, some kind of mindfulness practice doesn't have to be sitting cross legged, some kind of mindfulness practice is the ideal client.

Kim Fauskee 1:10:28

And so people that want to know more about this, there are currently probably three documentaries, at least that I watch Michael Pollan's. One that's on Netflix. Hamilton's Pharmacopeia, which I believe is on Hulu, and there's one guy, yes. And there's another one on Amazon as well. And, Naomi, if somebody was interested in getting in touch with you, how would they do that?

Naomi Sparrow 1:10:56

Well, I could start by emailing to naomi_sparrow@yahoo.com. And in the subject line, you could just put this podcast your fear

Kim Fauskee 1:11:07

me out podcast. Okay. And so we'll we'll also put that information in the show notes. Dana, any closing remarks?

Dr. Dana 1:11:15

Well, I guess what I would like to do is express gratitude to both of you for having the courage to do this with people. Because I mean, we know that it's not 100% kosher in the world, the legal world. And it takes people like you that are willing to step outside the box to help so many people that wouldn't be helped otherwise. So I just want to express my gratitude towards you guys. Plus, you did something really lovely for somebody I'm very close to so I'm happy about that, too.

Kim Fauskee 1:11:47

And I'm happy for that introduction. So, Naomi, Michael, thanks for being here today. Thanks for sharing. Thanks for sharing your journey and my journey and, and potential journeys for other people.

Michael Sparrow 1:12:01

Inviting us it's a pleasure.

Fear Me Out 1:12:04

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