Ayahuasca Hallucinations among Healers in the peruvian High Amazon

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Abstract:

The author presents the setting and conditions for the "production" of hallucinations during traditional therapy involving the use of Ayahuasca liana, which has psychotropic effects.

The presentation is based on the author's self-experimentation carried out with curanderos of the peruvian upper amazon region.

He attempts to find some constants which would permit characterization of the consecutive hallucinations caused by ingesting ayahuasca.

He then proposes meditation on the "vision" achieved through these practices. He defines the criteria which, according to him, make these modifications of the conscious state worthy of interest, particularly from the therapeutic point of view.

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1. **INTRODUCTION**

The healing traditions in the Peruvian Upper Amazon (San Martin Province) are centered around initiation by means of hallucinogenic plants. These plants are then used as diagnostic, prognostic, therapeutic and divinatory means. These practices are found throughout the Amazon basin.

In the region with which we are concerned, ayahuasca (Banisteriopsis Caapi) represents the foundation of the therapeutic edifice itself. This vine possesses hallucinogenic properties, potentized by several additives put into the drink at the time of its preparation by cooking. The principal additive is "chacruna" (Psychotria viridis), also known as "suija", or "yage" in other regions (1).

During initiation, the healer-apprentice is led to ingest the liquid preparation based upon ayahuasca, which itself is also generically referred to as "ayahuasca", more commonly as "purga" (purge). The ingestion takes place during night sessions conducted by the initiator or "maestro."

A true initiation presupposes quite strict conditions: isolation in the jungle, diet or fast, sexual abstinence, no contact with fire, and total exclusion of certain foods (specially salt, pork, peppers, etc.)

The healer uses ayahuasca during his practice in the night sessions, which take place on an average of once or twice per week. Tuesdays and Fridays are the preferred days. The patients participate in the sessions and are often asked to ingest the ayahuasca preparation along with the therapist.

The healer is often a former patient who on account of a serious condition, undertakes intensive treatment by a maestro. During treatment, his therapeutic inclination becomes evident and is later on developed.
2. **CONDITIONS OF THE STUDY**

Since July 1986, we have been conducting research on mental imagery systems used in healing practices in the Province of San Martin in Peru.*

This work has led us to meet about 70 local healers in this region, most of them mestizos (mixed white-indian), although the influence of autochtonous groups substantially affects the practices and imagery of the healers.

The strongest of these is that of the Lamista indians, whose social organization has been brilliantly studied by Francoise Scassochoio-Barbira (2).

This native group originates in the village of Lamas, about 30 km. from the city of Tarapoto. They speak quechua.

The Lamistas have emigrated towards the Mayo and the Huallaga Rivers, where Chazuta constitutes a second pole of grouping. Lamas and Chazuta have developed a justified reputation as centers of "power", simultaneously admired and feared, in view of the close association between practices of healing and of sorcery.

We try to practice a medical, participative anthropology, which requires personal involvement within ritual practice. It would be more appropriate, no doubt, to qualify this approach as an ethnomedical system along the lines proposed by Annie Walter (3).

This logic has led us to contact those maestros who are willing to teach us their knowledge of the traditional way of initiation. The process of observation of "the inner" seems to us to be the only suitable one which provides pertinent information and at the same time avoids the building up of gratuitous theories, and a priori rejection of non-ordinary realities, on such a very specific subject (the use of hallucinogens).

We have therefore led a total of 80 nocturnal sessions with ayahuasca, with associated periods of diet (36 days in total). Our initiators have been Don Wilfredo Tuonana Tananta, originally from Runusapa (Lamas Province) and Don Ricardo Pezo Panduro, originally from Catalina (Ucuayali). The latter, whose training was under a Campa indian, was our principal initiator. We have completed this apprenticeship together with a 27 year old Peruvian young man desirous
of acquiring traditional therapeutic technique. Our friend and assistant, Jose Campos Campos, born in Jaen (Cajamarca), wonderful companion and collaborator, has completed all his training along with us. Our sharing of the same inputs, while having different cultural and psychological backgrounds, has proven extremely fruitful in confronting and evaluating our respective experiences.

We shall simultaneously present below the comments received from healers and patients, but above all those from our own experience.

It should be noted neither of us had any previous experience with hallucinogens.

3. CONDITIONS OF THE HALLUCINATION

The sessions are generally held in the healer's home, and he has prepared the "purge" earlier that morning. Cooking it demands 3-8 hours depending on each healer's techniques. The preparation then needs to be cooled down to room temperature in an open container.

The sessions begin around 9:00 P.M. After a protection ritual, which is brief (and not consistent), applied to the place and to his own body to prevent the intervention of enemies (sorcerers, bad spirits...), the maestro finishes the preparation of the brew. He "charges" a cigarette of strong tobacco (mapacho) while singing an "icaro" (ritual song); he lights the cigarette and blows its smoke over the flask containing the ayahuasca. He proceeds to mix the smoke with the brown liquid while shaking the flask.

He then calls each patient and serves him with a dose he measures out according to the constitution of each, the nature and seriousness of their sickness, the motive which leads them to take the preparation, or finally, the strength of the brew itself.

The healer always accompanies the patient during his intoxication, since the strength of his own assures his visionary power and therapeutic efficacy.

The first effects begin to be felt after a period which varies according to different subjects and sessions, but takes usually 20 minutes. They last about 2-4 hours.
Darkness and silence are required during the session.

Only the maestro intervenes to direct the session. He does so mainly through the icaro, which constitutes the core of the therapeutic session. Sometimes, the song is accompanied by the rhythmic rattling of dry leaves or branches (shapaca).

It is important that an ayahuasca hallucination take place under the direction of a trained maestro. Actually, the experience is not without danger. It is always possible that through the intensity of the hallucination, the patient may see terrifying visions (bad trip) which if not channelled properly, could provoke a state of fear affecting behavior or causing mental instability.

During apprenticeship, the student must obtain a gradual control over these negative states of consciousness, which he must learn to prevent or control alone if necessary, within himself and in others.

Dangerous hallucinations can come from:

- The subject himself who cannot bear to face his own visions and becomes trapped within his own contradictions;

- Uncontrolled interferences from other participants;

- Interferences directly from the environment (arrangement of the place, unforeseen manifestations - lights - sounds - odors - presence of certain objects, etc.)

- External interventions due to either acts of sorcery (enemies), spirits of the dead, demons or other supernatural entities;

- The preparation itself (in quality or quantity)

It is appropriate to point out that the danger from "negative" visions is relative. In other words, the maestro does not systematically intervene to suppress them: they may constitute an integral part of the healing.

The maestro should have a proper control over the different factors influencing the hallucination. Beyond the elements cited above, the following influences have a key role:
- the maestro himself: his psychology, his practical style, his level of personal evolution, his maturity;

- the mental attitude of the subject or his conscious and unconscious predispositions: they affect the quality of the experience in a fundamental way. Those patients who have taken ayahuasca under pressure rather than willingly have ended up with no intoxication or with an unpleasant one. The internal attitude and the overall state of mind of the subject very forcefully affect the quality of the experience.

- the habitual diet of the subject, as well as his food intake immediately prior to the session.

- the absence of sexual intercourse in the hours preceding the session: if the subject has had sexual intercourse and more importantly, if he has not washed himself thoroughly thereafter, the visions can be extremely unpleasant for him as well as for the other participants;

- the absence of women during their periods: during menstruation, women should not participate in a session. To do so poses danger for them and for the others.

- the posture of the subject during the session: the position of the body influences the hallucinations probably through the way in which the external and internal sensation of the visions is integrated. Negative visions are set in motion if the head is kept in a lowered position. The maestro prohibits anyone from lying down (also to prevent the inhalation of sudden vomit) or to lean very far forward.

During our investigations, we have had occasion to witness and test all of these possibilities at least once. It is not a matter of arbitrary and symbolic proscriptions, but rather very real factors, even though not consistent. In fact, we have witnessed situations where one or more of the above rules have not been followed, without noticing undesirable consequences.
To secure therapeutic effects from ayahuasca, a proper conduct of the sessions is necessary. The following remarks assume that this condition is met.

4. MODIFICATIONS OF THE HALLUCINATION

The maestro has the power to increase or to diminish the intensity of individual or collective hallucinations, with the help of a series of techniques:

- the "soplada": consisting of blowing tobacco smoke over the body of the patient, specially on the top of the head (the "corona"). The soplada can be done while chewing on a piece of cinnamon stick and while smoking strong tobacco (mapacho).

  The soplada can be made with the aid of liquids sprayed by the mouth of the maestro over the "corona", the face, or the body of the patient. The maestro uses camphor dissolved in brandy (sometimes with added white onion or garlic), Agua de Florida, diverse perfumes, or thymoline;

- the laying-on of hands, generally over the corona or over a painful part of the body;

- water spilled over the neck or the head of the patient;

- light, to dissipate darkness;

- rhythmic shaking of branches or dried leaves (chupada) over or behind the head of the patient;

- inhalation of perfumes, camphor, freshly-cut citrus, etc.

- ingestion of refreshing liquids: plain water, orange or lemonade, etc.

- la "chupada": consisting of a sucking through the mouth of the maestro made by him on or over some part of the patient's body, preferably the corona or the temples.

  Beforehands, the maestro fills his mouth with a liquid (water "charged" by means of an "icaro") and then spits it out, having aspirated the intoxication. In other cases, he smokes in order to regurgitate a stomach phlegm which he has acquired during the course of his work and
which remains within him permanently. This "yachay" allows him to aspirate the intoxication or the disease and is subsequently spit out.

Ayahuasca warms the body. Tobacco smoke has the tendency to increase the intoxication and the hallucination, whether it is smoked by the maestro or directly by the subject.

Liquids which are sprayed or used in the "chupada" cool the body and consequently diminish or take away the intoxication.

Inhaled perfumes tend to increase the intoxication but can also act in the opposite sense (cut lemon, camphor).

The laying-on of hands, the ritual song (icaro), and the rhythmic rattling of the schapaca can have different results depending on the will of the maestro.

In a "normal" session, the maestro does not intervene except through his "icaros", the schapaca, and through emitting sounds which imitate animal cries, sometimes by using a type of musical instrument (infrequent). He then allows the hallucination to follow its course until it becomes blurred towards the end.

Frequently, during the first half-hour, he blows the smoke from his pipe (cashimba) over each of the participants in order to launch the hallucination and to channel it ("enderezar la mareacion"). The cashimba, a very personal artifact, has been "charged" by immersing it in the ayahuasca pot during the final cooking phase ("la refinada"): it therefore becomes progressively impregnated with the brew constituents.

Patients are asked not to eat anything beyond lunch on the day of the session in order to facilitate intoxication and reduce any nausea. Nevertheless, we have seen a number of cases where patients have taken ayahuasca following a heavy dinner or serious drinking. Hallucinations may develop, regardless.

By the same token, the patient is instructed to fast at least until lunch on the day following the session.

We have already pointed out the importance of refraining from sex prior to the session and even more so, immediately after the session (we have been told of cases of death when this has not been observed.)
Whenever the collective intensity of the hallucination is low or one individual person doesn't "break through", the maestro may intervene to increase the intoxication. On the other hand, a second dose of ayahuasca may be proposed.

On the contrary, if the intoxication is too strong and the hallucinations become unbearable, the maestro may intervene to diminish or remove the intoxication completely in a period of time that can be very brief, extending only as little as a few minutes ("chupar la mareacon").

We have had ourselves the opportunity to experience the influence of the maestro's practices upon the hallucinations, their intensity, their nature, their evolution, their content, their duration, so we can vouch for their efficacy. More so, in certain cases, we have used these techniques effectively on the hallucinations of other participants, once we were given permission to do so.

5. CHARACTERISTICS OF THE HALLUCINATION

Healers generally use the term "mareacion" to define the specific mental state which follows ingestion of ayahuasca. This word groups two concepts: intoxication (dizziness) and hallucination.

Intoxication results from the additives to the ayahuasca potion, which if taken alone, barely produces any effects. The principal additive is chacruna (Psychotria viridis). In its absence, certain healers use penka, supay caspi (Clusia sp.), a yage variety (Heteropteris herbosa); Eduardo Luna mentions a sample of Diplopterys cabrerana (4) and Dennis J. McKenna et al have written an article on it (5).

We do not wish, within the bounds of this article, to deal with ethnobotanical aspects which have been already discussed by others (6).

The additive has the objective of potentiating the ayahuasca.

When chacruna is of poor quality (leaves too dry for example) or insufficient quantity, the "mareacion" does not take place, even if the ayahuasca itself is of good quality.
The additive produces therefore a drunkenness which is comparable to that of an alcoholic intoxication (motor instability, slight shaking of extremities, lack of coordination in gestures, words, thoughts,...). The symptoms of drunkenness manifest independently of any mental images which may or may not develop. When chacruna is ingested alone it produces a physical drunkenness without mental imagery.

Ayahuasca is the hallucinogenic plant par excellence, which produces the visions and provides the indispensable substrate. It is the origin of the visions. This quality justifies the fact that the noun ayahuasca has become a generic term for all potions which contain it.

A good "mareacion" implies both a true intoxication and a profuse, rich mental imagery.

Finally, the term "mareacion" usefully evokes the sensation of seasickness (mareo) which is felt upon the approach of the intoxication, and the images are frequently perceived in successive waves growing stronger, reaching a maximum, and then rhythmically decreasing in a way which resembles ocean tides.

When the healer or the patient acquires command of ayahuasca, a powerful visionary capability may develop without necessarily involving intoxication. The person can then follow his own mental imagery and according to need, return from it and act in order to manage the session, get up to see a patient, or take any other useful action.

Purgative effects are quite evident with a novice who vomits, suffers from diarrhea, profuse sweating or hyper-salivation. These irregular and inconsistent symptoms diminish with time and repeat doses as well as with dis-intoxicating fasts. The emunctory function is brought into play, and this itself constitutes one of the first therapeutic results of ayahuasca use.

We will propose a schematic classification of the visions, voluntarily leaving aside the detail of hallucinatory content. A very few authors refer to their own visions (7).

The hallucinations offer several types of images:

- abstract images, sometimes with very elaborate shapes and colors, indeed even novel to the subject;
- anthropomorphic images of realistic or imaginary beings (dwarfs, giants, headless beings, monsters, angels, ....);
- animated objects: any object, mineral, vegetable, or animal within or beyond sight, can become alive in the visions;
- ontologic visions regarding the past, the future, the affects...the personal universe;
- phylogenetic visions concerning society, or human nature....;
- cosmological visions;
- Demonic or mystic visions;
- etc.

The visions may be structured in an elaborate manner or on the contrary extremely primitive; intense so that they invade the subject or only superficial and at a distance. Ultimately, the visions can exceed the limits of the normal material world and conventional space-time framework. They can thus affect the insides of bodies and souls, limited only by the individual's capacity to "see".

Hallucinations refer to the sense of sight, but they can also involve other senses:

- auditory hallucinations (specially voices, musics....);
- sense hallucinations: the perception of being touched, for example, or alterations of features....;
- olfactory hallucinations: sensing intense odors, agreeable or nauseating...;
- crossed hallucinations: a sound being seen as a color, an odor perceived as a shape....;
- "general" hallucinations: the individual perceives good or evil "presences", environments, atmospheres often with indefinable characteristics, which he senses as "strange".

The attempt to qualify hallucinations is often quite a challenge because to put them into words is generally reductive. It removes from the experience the correct coloring proper to that which has been felt but not intellectually understood.
In this regard it should be noted that the healers are quite silent about the content of their own visions during the seance. Their talk about ayahuasca imagery is relatively standard and any details very brief: "se ve como por televisión" (You see it as if in television), "la planta te enseña" (The plant teaches you), "ves lo que quieres" (You see what you want to see)... We ourselves, while writing this, become conscious of the reductive character of such a presentation, ayahuasca being an "experimental" approach, the transmission of knowledge made by direct vision.

At the beginning of our work, when we asked healers to give us a description of "what happens" in an ayahuasca session, the unanimous reply was: "try ayahuasca yourself and you will find out."

After the eventual turbulences of the session, the ending is often delayed by a long and peaceful collective silence, during which each participant contemplates his own interior universe, without any great desire to communicate what appears either too unique, or of an infra or supraverbal nature.

6. **CONSTANTS OF THE HALLUCINATION**

In view of the extreme variability of the effects of ayahuasca, we have tried to define what remains constant with all of the persons we have been able to observe in the course of 80 sessions, starting with our own experience...

As one can easily imagine, the absence of an absolute system allows only the listing of paradoxical or ambivalent constants:

**Unpredictability**

No matter the degree of preparation or evolution of the taker of ayahuasca, the experience remains always unpredictable. It is impossible to anticipate the nature and the quality of the session to come.

In other words, each session is an adventure.

During the session, its evolution is just as unpredictable: the intoxication may be slow and then accelerate, or else disappear in an instant; or suddenly reappear when no longer expected.... All the imaginable cases are virtually realizable.
Regardless of the potency of the doses, or the concentration of the potions, certain persons are refractory to ayahuasca and never become intoxicated for unexplained reasons. "The purge doesn't like you" comments the healer, it being frequently understood that one first needs to like it before it will reciprocate.

The experience varies between different persons in the same session, and also for the same person in different sessions.

We have never found anyone, during the course of our work, who can forecast the quality, rhythm, duration, or nature of the "mareacion" of the next session, even among the most evolved healers.

**Singularity and Plurality**

Ayahuasca is essentially a collective experience. It is taken within a group (some healers take it singly to acquire power or to resolve a personal problem). Each individual can experience the collective character of the intoxication and the extremely focused interactions which operate between the participants.

These exchanges are so intense, that one can observe "thefts" or appropriation of intoxication between the participants, involuntary among the novices, and eventually voluntary among the initiates (which is by itself an act of sorcery). Interferences are possible at any time between participants: reciprocal penetration into the "field of vision" or the "hallucinatory field." The healer is the game manager and it behooves him to put each person in his place and to avoid undesirable interferences.

The experience of penetration from others can be sensed materially within the body.

At the same time, that which occurs under ayahuasca is always sensed as an experience of solemn intimacy, totally unique and up to a point unexpressible, ineffable.

The individual is therefore at the end of the session frequently immersed in a collective spirit and a sentiment of sharing, indeed communion, with others: at the same time, he has the sensation of having lived through a very personal experience, which has touched the deepest points of his own self.
This feeling is not only not dissociative, but on the contrary, associative. The ambivalence of the manifestations is perceived in complementary terms, not in opposition. The sense of separation from others and from the universe dissolves, allowing the finding of a personal place within the continuum of life. The individual clearly expresses this through the pleasant sense of relaxation and peace which generally follows the taking of ayahuasca.

In other words, while passing through a relative experience of "depersonalization", the ego of the person is in some way re-enforced and opened up. This "transpersonal" event gives him added security in his relations with himself and others.

Sense of Reality

This feeling is particularly noticeable with such visions that have to do directly with the life of the person. Even with the most fantastic or cosmic visions however, the individual can experience a total sense of reality.

It is common that the person who is reluctant to "see" unpleasant truths about himself, and who would rarely accept them if described by others, will suddenly take in as evidence clear visions of his mediocrity. These visions are so powerful as to impose themselves without question.

Truthfully, these visions about ourselves or our personal universes do not really constitute a new discovery. They are always perceived as the revelation of something "already known." They manifest as a raising to consciousness of subconscious, latent, truths. And the person concludes: "I knew it all along."

Obviously it is less surprising to note that that revelations which are pleasant or which flatter our narcissism are easily integrated. Nevertheless, the sense of reality attached to them is perceived with an uncommon intensity.

This attribute of the visions grants the patient invaluable psychic benchmarks for the structuring of his existence: The disappearance of doubts about the fundamental questions of his existence contributes to give him a sense of peace.
The sense of reality is such that physical expressions may accompany the visions: tears, laughs, cries, gestures of protection, etc. Discoveries about the self are often perceived as "revelations" or "messages" of undetermined origin, but with a force of conviction imposed in no uncertain terms, and it persists after returning to a normal state, imprinting changes upon the psyche and behavior.

"Videncia es evidencia" (Seeing is evidence).

Alteration of the sense of time.

This is a constant within the ayahuasca experience, almost always involving the sensation of the shortening of real time duration. When the session begins to end, perhaps after 3 or 4 hours, the patient has the sensation that only a fraction of the chronological time has elapsed.

Evidently one can also point out that inversely, psychic events have considerably accelerated. It has happened that patients leave the session feeling they have re-lived a good part of their lives even in the smallest detail. Others have been able to resolve complex problems which would have, in normal time, taken many weeks of thought.

In certain less common cases, the person may experience the sensation of time having stopped or split (chronological and "mythical" time).

Absence of Linear Progression

We have not been able to identify a linear apprenticeship process. No chronological order of sessions is accompanied by a parallel progression in the quality or quantity of visions.

In other words, a person who takes ayahuasca for the twentieth time can be no more certain to "see" any better than his neighbor who attends a session for the first time. Neither can he be certain to see more than he did in his own first session.

This does not mean that it is not possible to acquire a greater therapeutic and visionary capacity with time.... but this acquisition doesn’t become evident in any linear progression where each session represents a step ahead of the prior one.
There is progress, therefore, but without any linearly causal logic attached to it. Progress is structured moreover, like the slow unfolding of a puzzle, where the pieces are at first identified dispersely, then come together little by little until the final design emerges. Or else like a slide projection where an initial blur gives way to a clear image, through trial and error focusing.

It often appears that the first images seem to point to what the person is leading towards... somewhat like the first forecasting dream of a patient in psychoanalysis.

No Loss Of Consciousness

The usual ayahuasca experience does not involve a dissolution of consciousness but rather a modification of it. The subject knows all along in the session who he is, where he is, what he has ingested... he responds when his name is called. He remembers his visions.

Meanwhile, it is possible with young, immature adolescents, to observe intoxications so sudden and brutal, that the subject finds himself "disconnected" in view of the intensity of the visions, unless the maestro intervenes. There is then a dissolution of consciousness, the subject does not respond when his name is called, and will not remember what transpired during the session.

Generally, ayahuasca amplifies cerebral activity and sensorial perceptions. The subject notices an acceleration of his thoughts and perceives with acuity the least sound or faintest gleam, which explains the need for silence and darkness. In the same sense, the person experiences an amplification of his consciousness, surpassing the discriminating capacities of his habitual self, an enlargement or transcendence of his ego.

The vision does not therefore present the characteristics of a crepuscular state of consciousness. Even when the subject's vision may be focused in a limited field, even in an obsessional way (fixed idea), generally a scanning of the normal perceptive range remains (beyond space-time limits).

The subject can be conscious of ordinary reality and at the same time place some of his perceptions within a shifted field of coherence. When the shift becomes very marked and the perceptions become out of proportion, the icaro or ritual chant often constitutes the link allowing the subject to keep contact with the here and now.

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During a properly controlled session, therefore, the intoxication is maintained at an acceptable intensity level, so that a state of total unconsciousness is never reached, specially with young or immature persons.

7. **VALIDITY CRITERIA**

The term hallucination, largely used in regard to traditional therapeutic or ritual practices, has a perjorative connotation which prejudices the essential question to consider: "Perceptions obtained through modification of states of consciousness after ingestion of plants or substances with psychotropic effects: are they real or fictional?"

The question "real or fictional" can be put in ordinary terms: "Does ayahuasca work?"

The dictionary is eloquent:

"Hallucination": error or mistake of our imagination produced by false appearances.

Is an ayahuasca hallucination, therefore, mistaken? In such a debate, it seems to us more appropriate to talk about "vision" and "seeing" to designate the mental perceptions experimented during an ayahuasca session, referring not only to the principal, mental imagery, but also to those perceptions coming through the other senses.

Following the above definition, one would not know whether to describe a vision leading to efficient action or effective solution, or empowering the person to master his interior universe, as a hallucination. This again brings up the degree of intensity of the vision or how it fits into the state of ordinary reality.

This is really preliminary to the study of these phenomena. Can the vision capture our interest and enrich us if it is only a harmless fantasy or a gratuitous lucubration? Is the use of ayahuasca pertinent?

In order to "validate" the ayahuasca vision and make it the subject of study worthy of our interest, we need to define certain criteria which evidence its congruence with ordinary reality. From that state we will know to what degree we have grasped these manifestations, or whether we should turn away from chaotic phenomena, disorganized, senseless.

We think the ayahuasca vision is valid for the following reasons:
Coherence

The ayahuasca vision can be surprising, formidable, indeed incomprehensible a priori but it is never seen as incoherent or chaotic. It does not manifest itself as shapeless, although successive visions may not show any link to laws of classic causality.

At the time of return to ordinary consciousness, the ayahuasca event is not integrated as a de-structuring experience, totally irrational even if often those visions which are too abstract or symbolic, are not integrated immediately into consciousness.

Collective Character

It is remarkable, though it does not always happen, to see different participants share the same visions during the session. We have had occasion, again and again, to evidence the sharing of the same visions by different members of a group: negative presences, hearing of sounds or noises, similar judgments made about the "worth" of a certain person present, etc.

In certain cases, we have been able to transmit relatively precise images (for example, a flight of birds) by means of the chant.

The maestro is able to determine the general level of intoxication even if he is surrounded by darkness and silence. According to his information, he knows whether to continue the session, increase the collective intoxication by means of his icaro, decrease it, or stop the session.

The visions can constitute an occasion for exchange and sharing, for communal experiences, for manifesting a collective convergence (even between persons unknown to each other prior to the session).

In other cases the maestro (and we have seen this ourselves) is even able to directly perceive the psychic (emotional) coloration of the visions of one or another participant. He may then intervene to correct a disagreeable intoxication, guide a "traveller", find a "stray"... even before the person signals the need.

We have also already pointed out that visions of patients can interfere with each other.
Divinatory Ability

For it to be effective requires a certain level of practice in order to avoid confusing our own mental constructions with information coming from the visionary state.

We have thus been able to discover events from the past of certain patients, whose personal history has been totally unknown to us, and to verify them afterwards with the person in question. This information can equally be more general in nature, concerning the character of the patient, his problems in life, his diet, etc.

Forecasting the future is evidently more difficult to deal with, since no immediate verification is possible. Proper perspective, however, allows us to say that a prophetic function may be present.

One of the main functions of the process of apprenticeship consists in proceeding gradually to discriminate within the visions, in order to separate that which emanates from the mental, from the true vision which contains further revelation. Schematically, one can say that the mental tends to grasp reality (thus the many risks of projection) while the authentic vision translates a state of shock of the subject into reality.

The "seen" is not experienced as an understanding of an intellectual order, but rather as an immediate comprehension, global and instantaneous, mobilizing all function and all senses. The vision can produce insight.

The healer is often requested to exercise his divinatory capabilities and resolve mysteries, disappearances, thefts. This is traditionally one of his principal activities.

Efficacy

The vision is capable of modifying the daily reality of the person, his character, mood, and behavior. This can happen even if he has not clearly identified the meaning of his visions.

In the practice of healing, full understanding, intellectual integration, are not indispensable for the evolution of the psyche. This is a position in full contradiction with most academic psychotherapies.
In a manner which is undeniable, patients can feel and live perhaps the most important changes of their life. The most evident manifestation of this is the frequent ability of the patient to make decisions which have been latent for a long time and thus change his life (professional career, ending of a relationship, change in style of life, etc.).

The vision is equally efficient for the maestro, who uses it to treat his patient: diagnostic discovery, forecast, type of treatment required, etc. It should be emphasized that the vision is not considered to be "psychical", but rather concerning the "body", a generic term used by healers to designate the object of their cares.

**Maneuverability**

As we have already discussed, the "mareacion" can be manipulated by the maestro by means of diverse technical procedures or through his own visions. The essential instrument in this regard is the ritual chant or icalo.

The vision therefore is maneuverable and the procedures to make it so have been already empirically identified.

**Accessibility**

Any sufficiently motivated individual can follow the steps for initiation and apprenticeship for healing with ayahuasca. The vision is the evident target. He must initially find a competent and sincere maestro who accepts him.

This apprenticeship implies a subsequent personal investment, important work with the self, particularly with the body, and availability. It also requires a minimum set of precautions (impatience is a bad counselor), and a good choice of a master. Ayahuasca use is not without its dangers, which can be faced with empirical knowledge, if one follows it rigorously.

The apprenticeship aims to correctly "locate" the visions, that is to say to situate them in their proper field of coherence. What matters is to avoid erroneous projections inducing an altering of reality. If a vision with a symbolic nature is transposed such as it is to the field of coherence of ordinary reality, catastrophic results may take place (for example, one must distinguish between a symbolic death and a physical death).
The majority of people do not have the wish to undergo an initiation process, but simply to experiment a "different" reality, to reach better understanding of who they are, or to resolve an ailment or an existential problem. For these "patients", diets and fasts are very limited, risks or dangers are almost non-existent, and the conditions of participation very unrestricted.

Persons can participate in the sessions from adolescence and within amazonian ethnic groups, some children begin to participate from the age of 7 or 8. We know of a certain young man, son of a Chazuta healer, who is 11 years old and has been taking ayahuasca at fairly well spaced intervals since the age of 2. He also sings some icaros.

Finally it is important to underline that there is no way to become addicted to ayahuasca, regardless of the subject. We have never found a single person that can recall an addiction, and we ourselves have interrupted our sessions for several months without experiencing any withdrawal symptoms. This gift can be considered as a given. It has been constantly verified without exception with all patients and healers.

To reply to our previous question, we would say "it works!", but immediately qualifying it by saying "on condition that one is rigorous and does away with any a priori conclusions."

I believe it might be useful to point out that all of the above comments refer to the use of ayahuasca prepared in the traditional manner, and not to the use of isolated active ingredients (harina) used in non-traditional ways (for example via injections) (8).

8. AN ILLUSTRATIVE EXPERIENCE

We cannot overemphasize the need to approach the study of ayahuasca through empirical practices, enriched through generations of amazonian therapists and "ayahuasqueros." Too brutal and arbitrary transpositions following rational-causal scientific principles take the risk at best of scientific invalidation, and at worst can place the subjects in a dangerous situation.

As an illustration, we wish to refer to the courageous experience of Dr. P. Reiburg, French doctor, attached to the Ministry of Public Education, who at the beginning of the century approached ayahuasca by self-experimentation. His report dissuaded scientists to repeat the experience and has been largely recalled (9).
He recounts his one session so dramatically, that we cannot resist the temptation to quote certain passages:

"...nausea increased and became quite disagreeable; and abandoning the principles of ayahuasca drinkers who wish that one let events happen in their own due time, I forcefully tried to vomit and drink tea, above all because I was concerned about my heart. I rose (midnight), urinated copiously, while barely able to stand up, and took the 3 or 4 steps separating me from my bedroom, where I tried to light the heater to prepare tea. Once there, however, I was overcome by weakness and fell massively on a canteen, while crying out to Teofilo, "I am poisoned." Pulse had completely disappeared (sic), I was livid, my pupils dilated, the throat tight with strong dysphagia, dryness in the mouth, a sensation of my lower body disappearing, disorderly movements of the hands to grasp something.... ."

After that tragic night, our colleague arose "dull, sleepy, tired, and left the room. I did not have the strength to speak; I had a terrible migraine headache, no appetite and always pain on swallowing."

He concludes by saying it took him 4 days to recover, and again "in the following 2 or 3 days I had difficulty in swallowing."

It is not surprising, after such a commentary, that so many other bold researchers have reluctance to intoxicate themselves in this fashion.

As a good scientist, however, Dr. Reinburg mentions the detail that he had to light a lamp since "Teofilo explained to me that it is absolutely necessary for one to be in darkness and silence.... "I could only give brief instructions to poor Teofilo who was very concerned and kept saying that it is not a poison, that I must remain in bed, etc."

Then Dr. Reinburg, while clinically studying the state he was in, drinks tea, granulated Houde caffeine, tannin, ipecac, strong coffee (1 liter), magnesium sulfate, more tea and caffeine.... he has caffeine injected, he inhales ether..... all in great agitation and worry.

The scientist admits discarding all of the precise rules given to him in advance by the healer, and yet paradoxically, all of the causes of the "intoxication" are attributed to ayahuasca!
Although this experience is an old one, the defiant and incredulous attitude towards the "fantasies" of the healers remains today. Suggestion is attributed to theatrics, or else more elegantly, the real efficacy of these practices is obscured by more "expert" explanations. One fears that such positions serve only as an alibi in order to spare oneself auto-experimentation, which deserves a sincere scientific attitude.

9. CONCLUSIONS

Studies on ayahuasca generally do not occur beyond a botanical, phyto-chemical, or socio-anthropological environment. There are extremely few scientists who have dared approach this phenomenon in situ and proceed with auto-experimentation within the very special context of practices in the use of ayahuasca.

Now then, ayahuasca calls forth a veritable process of in-formation, in the etymological sense of the word. The information cannot be received from the outside since it originates from within the individual. Consequently, research which discards auto-experimentation automatically cuts out the principal source of instruction, and reduces the value of hypotheses thus formulated.

The work of Claudio Naranjo (10), bold enough to be acclaimed, limits itself to profit from the relative disinhibition following the ingestion of ayahuasca, in order to utilize orienting or suggestion techniques very close to the Directed Waking Dreams of Robert Desoille (11).

To us it seems very useful to consider the ayahuasca experience as a "transpersonal" reality approach and to contrast this reality with that which is described in voluntary or accidental transpersonal experiences (for example: clinical deaths followed by reanimation or else the states of ecstasy during superhuman efforts on the part of athletes), (12).

A number of other models proposed by diverse investigators could be invoked: the holographic brain of Karl Pribram, the morphogenetic fields of Rupert Sheldrake, the coherent fields of Jacques Ravatin, the cyclic machine of Jean-Charles Pichon, etc.
According to many researchers, auto-experimentation lacks the "objectivity" demanded by science. But subjectivity, precisely, is a necessary condition for a successful approach to ayahuasca. Doing away with the distance between the observer and the object (since in this case the same person is subject and object simultaneously) constitutes the core of traditional therapeutic technique. To repeat, the subject does not possess reality, he is possessed by it; he does not act, but is acted upon.

Moreover, this difficulty also applies to microphysics, where the observer in fact affects the experience.

Writers who subscribe to auto-experimentation are more interesting to consult regarding ayahuasca (13). In order for it to be valid, however, this auto-experimentation implies the practice of diets, fasts, and abstinences, so that it will produce progress. We know of cases of researchers taking ayahuasca more than 150 times without diet, the importance of which they underestimate: their knowledge remains at a very elementary level.

The study of states of altered consciousness seems to us extremely promising for the future. Meanwhile it presupposes at the start a redefinition of the course of science in this field, that is to say, an epistemological revision.

Dr. Kabire Fidaali, who has worked and been initiated among African healers, has arrived at the same conclusions following auto-experimentation which did not include ingestion of hallucinogens. His work opens new horizons in this field (14).

Research in depth psychology started by C. J. Jung, particularly regarding analysis of dreams and the delirium of psychotics appear to us as specially beneficial. At the time of our studies, the principal concepts of Jungian thought (collective unconscious, anima-animaus, double and shadow, archetypal structures, numinosity, etc.) have been valuable references.

We have intensely "experienced" synchronicity and have witnessed enough para-psychological phenomena (we call them such for the lack of a more precise term) to allow us in our fashion to bring up the question appearing in the works of Hubert Reeves et al (15):
"Does a non-causal order exist?"

It appears to us that one cannot undertake a serious and audacious (and ambitious) study of phenomena in the modification of states of consciousness without previously accepting an eventual change of paradigm. The pertinence of debate on these themes imposes an enlargement of the concepts currently in vogue (as well as debates) in order to open up new avenues of thought.

Ayahuasca constitutes an intellectual challenge for our time.


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6. — Nous renvoyons à (1) et aux abondantes bibliographies des ouvrages de Plutarco NARANJO (1), Luis Eduardo LUNA (4) et de Amazonia Peruana No. 4, CAAAP, Lima, Enero 1976.


10. — Cf. (8).  


12. — CHAFFER, Mario 1989 "Vers une approche holistique de la nature de la réalité". In Médecines Nouvelles & Psychologies Transpersonnelles. L'Œuvret, Question de No. 84, pp 11-57, Albin Michel.  

