

The Nation's Health Podcast transcript: Magic mushrooms go mainstream

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From the American Public Health Association, I'm Sophia Meador and this is The Nation's Health podcast.

Most people have probably heard of psilocybin, the drug more commonly known as magic mushrooms. It was huge back in the 60s and 70s, tied closely with the hippie counterculture, but now it's making a bit of a comeback. Shows like "Nine Perfect Strangers" and even "Ted Lasso" have brought it back into the mainstream, and with that, the old stigma around it seems to be fading.

As the nickname suggests, psilocybin is a naturally occurring compound found in certain types of mushrooms. When people use it — usually through teas or edibles — it can cause euphoria, hallucinations, "ultra receptions" and even what some describe as spiritual experiences.

Although psilocybin is federally illegal and classified as a schedule one substance, some states and communities in the U.S. are starting to loosen restrictions. And with Robert F Kennedy, Jr, the U.S. secretary of health and human services, praising psilocybin, the door is open for its use to become more widespread.

So today we're diving into psilocybin, and what is growing popularity could mean for public health.

My name is Dr. Karilynn Rockhill. I am a statistical scientist at Rocky Mountain Poison and Drug Safety.

Thanks for joining us. So, the *Annals of Internal Medicine* published a study in April which you co-led that revealed some pretty major findings about psilocybin.

In the past-year use of psilocybin, we saw a rise among adolescents who are in 12th grade through the Monitoring the Future program. We also saw a rise in past year use among young adults, which was the greatest increase. And then we also saw a rise in 30-plus adults. So, it really is across the board.

Wow. And your study found that past-year use jumped by 44% among adults ages 18 to 29, and an even more dramatic 188% increase in adults over 30. That's a huge shift.

Can you break down what you found about who is using psilocybin like? Like what are some characteristics or patterns you noticed in these groups?

So we saw among past year use — particularly among adults — a higher proportion of people who also report mental health conditions, so higher anxiety, symptomatology, depression, symptomatology, chronic pain — things of that nature — compared to people who are not using psilocybin.

Interesting. So it sounds like many people are using psilocybin to manage things like mental health conditions or chronic pain. But, psilocybin isn't a new drug. What contextual factors may be driving this trend?

I do believe that there's decreased stigma around this substance. Generally speaking, I think there is a trend towards "natural" substances being destigmatized in their use. I do think this whole wave of mental health and people really seeking out new mental health treatments is contributing to people's curiosity, willingness to try these substances. And I think microdosing is also driving some of this behavior.

How does psilocybin use compare to other illegal substances?

So right now, from just a prevalence perspective, it is the second most common behind cannabis. When you're talking about the traditional federal illegal substance...it's above cocaine, methamphetamine, illicit opioids, things of that nature. So I do think that this is a substance we should be talking about and we should be aware of.

So psilocybin use is clearly becoming more widespread, which is especially interesting given that it's still illegal in most places. How are people actually getting access to it?

I think like most federal illegal drug markets, you can find something you're looking for almost anywhere. This is a fungus. It's a mushroom. So it is possible for people to personally grow it,

Much like cannabis when it first became legal. There is a personal growth sharing system happening, but there will be the illicit market that has always existed as well.

And like with any drug, using psilocybin, isn't without risk. What did your study reveal about its safety?

We didn't explicitly look at safety in this study. There's one parallel resource that we looked at, which was the poison center programs — and those are people who voluntarily and spontaneously call into poison centers.

So that can be someone whose kid accidentally ate a chocolate that had psilocybin in it, and they're just want to find out if they should be worried all the way to someone who's having a really bad experience and needs to be talked to from a professional standpoint.

According to your study, calls to poison control centers because of psilocybin skyrocketed between 2019, and 2023 — by 201% in adults, 317% in teens and 723% in kids. With this drug becoming more common, what should public health officials be keeping an eye on?

First, from a public health perspective, while we have five different data sources in here, these are very long term, historic data sources, and they frankly, don't measure the rich contextual use patterns that come with psychedelics, in particular, psilocybin.

So I do think we need to be more active in active and passive surveillance to understand these substances. Like, what was the set? What was the setting? What other substances were involved? Did you receive psychotherapy at the same time? These are very unique contextual patterns that are not asked on these large national surveys. And there is a place for these large national surveys, as this study showed, like, it is telling us that it is on the rise. But to really dive deep and understand these substances like we need to reimagine some of our data collection systems.

Secondly, I think it's really important, and a huge pillar of public health is to understand real-world use patterns that we can communicate effectively, inform and educate. So I do think that there are some best practices around using these substances. And if we can understand who is using them and in what situations, we can develop tools for people to feel more empowered and feel safe when they are using these and I think that is a big place for public health to help from both the effectiveness standpoint and the harm reduction side of things.

Well, thank you, Dr. Rockhill, for your time and expertise. Read more on the study in the *Annals of Internal Medicine*. Thanks for listening.