

Supplementary Materials Themes Tables

Table 1. Difficulty themes, frequencies and example quotes, ordered from most prevalent in the sample to least prevalent. Themes that meet the criteria for high consensus are shaded blue.

THEME (<i>Meta-Theme</i>)	Psychiatrist	Therapist	Integration coach	Retreat facilitator	Total	Example quote
Existential struggle and crisis (ED)	3	5	2	5	15	"Clients are preoccupied and overwhelmed by existential questions around death, existence, God, time. Sometimes it can be obsessive and come with great anxiety"
Anxiety and/or panic (AD)	4	5	2	0	11	"Patients experienced increased anxiety and tension in the weeks after their psychedelic experience."
Self-perception issues (ED)	5	2	3	0	10	"They might feel unworthy of help. They might feel like they deserve unpleasant things that come their way."
Dissociative symptoms (DD)	4	2	2	1	9	"Patients experiencing dissociation may report periods of lost time and a profound sense of disconnection from themselves"
Becoming conscious of repressed material and trauma (TED)	1	2	2	3	8	"Facing unrecognised or hidden trauma; seeing or remembering events that contributed to their trauma"
Unmet expectations and disappointment (MD)	2	2	2	1	7	"They're disappointed or feel they got nothing out of the experience."
Sense of social alienation or disconnection (SD)	1	1	1	3	6	"A sense of social disconnection and isolation from others."
Paranoia (AD)	2	2	1	1	6	"Paranoia, intense. Transparent mind e.g. others being able to read one's innermost thoughts without consent."
Traumatized or hurt by trip or what happened after (TED)	2	1	2	1	6	"A patient used LSD in a recreative setting, felt anxiety and his friends made jokes of it."
Cognitive confusion (CD)	2	1	1	1	5	"Cognitive difficulties like confusion"
Manic or hypomanic episode (MD)	2	1	1	1	5	"Psychedelic substances can induce a state of mania."
Difficulty with performing daily tasks (CD)	2	2	0	1	5	"Impaired ability to engage with reality and perform daily activities."
Fixated or intrusive thoughts (CD)	1	2	1	0	4	"Intrusive thoughts, often negative and self-critical. "
Feeling unsafe or out of control (AD)	0	2	1	1	4	"Compromised their sense of fundamental safety" "Perception of lacking or losing control"
Emotional overwhelm (MD)	0	0	2	2	4	"To be feeling more than anticipated... can be startling and shocking and cause someone to go into a state of psychological emergency and need to be stabilised carefully."
Visual / auditory hallucinations or disturbance (EPD)	3	0	0	0	3	"HPPD" "hearing voices"
Flashbacks / feeling of experience being repeated (EPD)	2	0	1	0	3	"Waking up at night feeling as if they were back in the middle of their experience."
Difficulty with concentration and focusing (CD)	3	0	0	0	3	"...having more difficulty concentrating for a few weeks after."
Depression (MD)	1	1	0	1	3	"After the experience developed depression"
Shame and/or guilt (MD)	0	1	1	1	3	"The person can then feel shamed... after being negatively or insensitively received."
Psychotic-like symptoms (TED)	2	0	0	1	3	Patients experiencing psychosis may struggle with distinguishing reality from their delusions and

						hallucinations, requiring prompt and often intensive psychiatric care."
Sleep problems and nightmares (FD)	1	0	0	1	2	"sleep deprivation" "after the experience he developed [...] nightmares"
Low mood / bad mood / sadness / anhedonia (MD)	0	1	1	0	2	"Mostly they suffer from feeling down, sad"
Anger and irritability (MD)	0	0	1	1	2	"A very fragile state emotionally and sometimes physically, with very open senses; resulting in irritability" "repressed anger"
Fluctuating emotions and mood swings (MD)	1	0	1	0	2	"Clients complain about mood swing"
Hyperarousal / hypersensitivity / hypervigilance (AD)	0	1	1	0	2	"Difficulty regulating openness/heightened sensitivity"
Feelings of grief and remorse (MD)	0	0	0	2	2	"Deep regret or remorse; many clients are given the witness perspective of their own lives, and are able to see how they have affected others, including themselves, and do not have the tools to repair certain relationships, including their own understanding of themselves."
Forgetfulness / memory issues (CD)	1	0	0	0	1	"...being more distractible and forgetting things more than before."
Suicidal thoughts (TED)	0	0	1	0	1	"Suicidal thoughts: the clients that I saw, were suffering from these thoughts right after the journey or the day after. In some cases these thoughts occasionally came up within the two weeks after the experience."
Sense of demonic or hostile presence (ED)	1	0	0	0	1	"Encountering demons, hearing voices, being in hell, aimlessly roaming through a dark and cold cosmos."
Substance use / abuse (FD)	1	0	0	0	1	"...attaching too much value to the drug, for one patient meaning becoming addict to ketamine and for another thinking that only through LSD/psilocybin could change herself (overestimating importance of the drug)."

Note. Abbreviations for nine difficulties meta-themes are included in brackets after theme names. Abbreviations: AD = anxiety difficulties; CD = cognitive difficulties; DD = dissociation difficulties; ED = existential difficulties; EPD = reexperiencing and perceptual difficulties; FD = functional difficulties; MD = mood difficulties; SD = social difficulties; TED = trauma and destabilisation difficulties.

Table 2: Support themes, frequencies and example quotes, ordered from most prevalent in the sample to least prevalent. Themes that meet the criteria for high consensus are shaded blue.

THEME (<i>Meta-Theme</i>)	Psychiatrist	Therapists	Integration coach	Retreat facilitator	Total	Example quote
Individual psychotherapy (<i>TH</i>)	6	6	5	5	22	"Psychotherapy and integration therapy" "Ideally a mix of any supportive/analytical weekly psychotherapy"
Meditation and grounding practices (<i>BFG</i>)	3	3	4	2	12	"Grounding techniques...can also be beneficial in helping patients reconnect with their present environment and reduce feelings of unreality."
Peer support and integration groups (<i>SOG</i>)	3	3	0	2	8	"Creating community support through integration groups or connecting with others who may be able to directly relate and/or engaging family members in the process as appropriate."
Helping to make sense of the experience (<i>MD</i>)	0	4	2	2	8	"When there's some form of psychosis or visionary experience I often explain my way of conceptualizing these things: that the feelings are relevant, often feelings that have been repressed and need to be processed, but our mind makes up a story to try to help, like a dream, just a fictional story to help process the feelings"
Psychiatric medication (<i>SB</i>)	4	2	0	1	7	"Initial treatment for psychosis usually involves antipsychotic medications to manage symptoms such as paranoia, disorganization, and hallucinations."
Facilitating self-understanding (<i>MB</i>)	1	0	3	2	6	"Work with the guests to reconstruct their understanding of themselves based on their experiences in the dosing space."
Compassionate, non-judgemental presence (<i>SOG</i>)	1	2	2	1	6	"Provide ongoing compassionate care, offering an interpersonal process where they feel seen, held, and fully received in their despair."
Encouraging acceptance (<i>MB</i>)	1	1	3	0	5	"Acceptance: helping them to accept what did happen, what they got out of it, and even the challenges they are facing."
Being in nature (<i>BFG</i>)	1	1	2	1	5	"Self-regulating activities like spending time grounding in nature [...] are also supportive."
Breathing strategies and breathwork (<i>BFG</i>)	1	2	2	0	5	"Sometimes holotropic breathwork can be useful to help the individual complete their process, only if the individual at the time felt robust enough to go through another altered state process."
Physical exercise and movement practices (<i>BFG</i>)	1	1	2	1	5	"Enhancing factors are concomitant physical activity"
Providing reassurance (<i>SOG</i>)	1	2	1	1	5	"Reassurance is important as these experiences usually improve over time."
Normalising the challenge (<i>SOG</i>)	0	2	2	1	5	"Talking about it, knowing that it can happen and it's not too unusual helped for not panicking when it happened."
Diet-based strategies (<i>BFG</i>)	0	2	2	0	4	"Drink liquids and nutrients to assure your organism is well fed"
External acceptance and validation (<i>SOG</i>)	0	0	3	1	4	"Help bring the sensations into as much clarity as possible (where are they happening, what is the quality of them, where exactly is the discomfort). Then apply equanimity, just accepting things as they are in the moment, allowing it all to be as it is."
Music (<i>AC</i>)	0	0	2	1	3	"Listening to music"
Creative strategies (<i>AC</i>)	0	1	1	1	3	"I use creative techniques in therapy to aid the integration process of psychedelic experiences."
Support finding purpose and self-actualisation (<i>MB</i>)	1	1	1	0	3	"Support personal fulfillment and self-actualization, helping individuals to achieve a greater sense of purpose, meaning, and fulfillment in their lives"
Traditional healing practices (<i>TH</i>)	1	0	1	0	2	"Floral bath, energetic exercises (meditation, chakras)"

Sleep and rest (<i>BFG</i>)	0	2	0	0	2	"Recommend to rest"
Plant medicine (<i>SB</i>)	0	0	1	0	1	"Working with tobacco (which can help to ground)"
Abstaining from particular substances (<i>SB</i>)	0	1	0	0	1	"Supporting clients in NOT using any more psychoactive substances unless prescribed."

Note. Abbreviations for six support meta-themes are included in brackets after theme names. Abbreviations: AC = art and creative practices; BFG = body-focussed and grounding practices; MB = meaning-based practices; SB = substance-based practices; SSG = social support and guidance; TH = therapy and healing practices.