

# Ketamine-assisted therapy

A course of psychotherapy in which ketamine, a medicine given under medical supervision, is paired with sessions before, during and after its effects. This reading is for someone who wonders whether it could help them, and who wants to understand what is being offered.



## The medicine and the therapy

Ketamine is an anaesthetic in use for decades. At the much lower doses used here, it changes perception for an hour or so and produces dissociation: a temporary sense of distance from one's body, surroundings and usual preoccupations. Given on its own, by a physician, it can lift depressive symptoms quickly in some people; that effect tends to fade, and the treatment is then repeated. Ketamine-assisted therapy is something different: the medicine is placed inside a psychotherapy, so that the loosening it produces can be worked with rather than simply waited out. Two things are therefore being offered at once, and it helps to know which is which. <sup>1</sup>

## What does the process look like?

A medical assessment comes first, then preparation with the therapist: what brings you, your history and your health, what you hope for and what you fear, and how the sessions will be held, including how you will be supported if the experience is difficult and how you can stop. The medicine is given by injection, infusion, nasal spray or lozenge; the route sets how quickly it acts and how long you are monitored. During a session, the experience can be dreamlike, quiet, strange or frightening. Some models involve conversation while the effects are light; others leave the hour to the experience and do the talking before and after. Integration sessions follow, to look at what surfaced and at what it changes in your daily life. Sessions are usually repeated over several weeks, with the plan reviewed with you as you go and adjusted or stopped. You will not be able to drive afterwards, and the journey home is arranged in advance. <sup>1</sup>



Sessions may repeat. The plan is reviewed with you and can be adjusted or stopped.

## What is it used for?

Ketamine is used for depression that has not responded to other treatments, and ketamine-assisted therapy has grown out of that use. It is also being explored for other difficulties, including anxiety and dependence, but depression is where the work stands. Neither dissociation nor a striking insight during a session guarantees improvement; what lasts is more often what is built in the sessions around it. <sup>1, 2</sup>

## Adverse effects

During and just after a session: sedation, dizziness, nausea, a temporary rise in blood pressure, and a dissociation that can be unpleasant or frightening rather than freeing. With repeated use over time: bladder and urinary problems, effects on the liver, and a risk of misuse, since ketamine can become a habit. This is why the course is medically supervised and reviewed, and why it is not open-ended. <sup>1</sup>

## Who should not do this?

Uncontrolled high blood pressure or unstable heart disease, a personal history of psychosis, and a current or past problem with substance use call for caution or rule the approach out. So does pregnancy. Certain current medications are reviewed, and any change is agreed with the prescriber. These are not a checklist to apply to yourself: they are discussed with the physician and the therapist. <sup>1, 2</sup>

## Where things stand in Canada

Ketamine for depression is an off-label use in Canada: the medicine is authorised as an anaesthetic, and physicians may prescribe it for other purposes on their own responsibility, without Health Canada having assessed that use. Esketamine, a related medicine, is authorised in Canada as a nasal spray for major depression, under its own monitoring and through a controlled distribution programme; it is not the same thing as ketamine-assisted therapy, though some programmes pair it with psychotherapy. A consultation with a qualified clinician is the place to find out what applies to you. <sup>1, 2</sup>

## Questions to bring to a consultation

- Given what I wish to address, what is the best way forward?

- What is the role of the psychotherapy in this programme, and what is the role of the medicine?
- Who prescribes, administers and monitors the medicine, and who is with me during the session?
- Is this suited to my health and to the treatments I take?
- How will we review benefit, side effects and next steps, and how does the course end?
- What are the alternatives?

## Sources and further reading

1. Health Canada / Santé Canada (2022) · Health Product InfoWatch, March 2022: off-label use of ketamine. Safety review and the Canadian prescribing context; French version available.

2. Health Canada / Santé Canada (2025) · Spravato (esketamine) product monograph. Authorised indication, monitoring and patient information (PDF).

General information to support a clinical conversation. This resource does not determine treatment suitability or offer access to a substance.