



The altered state of consciousness induced by Δ 9-THC

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ABSTRACT

Altered states of consciousness (ASC) provide an opportunity for researchers to study the neurophysiological basis of changes in phenomenal experience. Δ 9-tetrahydrocannabinol (THC) is the primary psychoactive constituent of cannabis, however whether the effects of THC include ASC features that are shared with other ASC induction mechanisms, such as classical psychedelics, has not been systematically addressed. We used survey (11D-ASC; State Mindfulness), self-report, and natural language processing (NLP) to assess 7.5 and 15 mg oral THC, relative to placebo, in 25 healthy, infrequent cannabis users. THC dose-dependently increased measures of ASC including Insightfulness, and increased ratings of mindfulness and mind-wandering. THC also increased language entropy as previously reported for LSD. Future studies may seek to determine whether reports of increased mindfulness or insight after THC are primarily representative of a psychotomimetic state (i.e., delusional thinking) or conversely, reflect an enhancement of conscious awareness that may be validated empirically.

1. Introduction

Altered states of consciousness (ASC) represent an acute and marked deviation in subjective experience from normal/waking consciousness (Dittrich, 1998; Studerus et al., 2010). ASC arise through diverse induction mechanisms including psychoactive drugs, breathing and meditative techniques, or sensory deprivation. Despite these differences, ASC contain shared features or characteristics (Schmidt & Berkemeyer, 2018; Studerus et al., 2010; Watts, 1968). Therefore, the experimental induction of ASC has become a topic of interest in the field of cognitive neuroscience toward relating changes in phenomenological states to underlying biophysical mechanisms (Schmidt & Berkemeyer, 2018). The identification of neurobiological substrates underlying both health (e.g., mindfulness) and disorder (e.g., psychosis) is an important goal for neuroscience and psychiatry.

Δ -9 tetrahydrocannabinol (THC), the primary psychoactive constituent of cannabis, is one compound that may reliably induce ASC (Earleywine et al., 2021; Zaytseva et al., 2019). Despite shifts in the global policy landscape related to cannabis use, very little is known empirically about the nature of subjective effects induced by cannabis or THC, including which effects may be mediated by THC alone or THC in combination with other compounds within the cannabis plant (LaVigne et al., 2021; Morgan et al., 2018). Case reports on the subjective effects of cannabis have detailed robust alterations of cognition and perception (Barrett et al., 2018; Keeler et al., 1971; Perna, 1969) resulting in early classifications for cannabis as a “hallucinogen” (Keeler et al., 1971). Specifically, early questionnaires probed respondents for alterations that had occurred “while under the influence of marijuana.” 90% of respondents endorsed seeing

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“colors or objects as more intense,” ~50% endorsed “hallucinating colors or designs” and about a third “felt closer to God, nature, mankind, or felt better able to understand the meaning of the universe.” (Keeler et al., 1971). More recent placebo-controlled studies in laboratory settings have found that the magnitude of subjective effects elicited by THC alone are roughly comparable to those elicited by cannabis containing the same doses of THC (Wachtel et al., 2002).

In the brain, THC activates cannabinoid (CB1) receptors predominately expressed throughout the cortex, cerebellum, hippocampus, amygdala and striatum (Mackie, 2005). In these regions, CB1 receptor activation directly regulates the release of inhibitory (GABA) and excitatory (glutamate) neurotransmitters and indirectly regulates the release of neuromodulators including dopamine and serotonin (Araque et al., 2017). Primarily, CB1 receptors regulate the release of GABA from inhibitory interneurons in the cortex, thereby facilitating or disinhibiting excitatory output from projection neurons to activate brain regions (Fortin et al., 2004; Kiritoshi et al., 2016; Kovacs et al., 2012). Neuroimaging studies consistently show increased cerebral blood flow after THC indicating greater activation of the frontal cortex, insula, and cingulate (for review see (Bloomfield et al., 2019)), brain regions critical for self-awareness, consciousness and cognition (Craig, 2009; de Souza et al., 2014; Hadland et al., 2003; Huang et al., 2021; Miller et al., 2002). Acute THC administration also affects neural networks, including blocking the deactivation of the rest-related default-mode network during intended task engagement (Bossong et al., 2013). THC similarly affects neural oscillations by blocking reductions in the rest-related alpha wave during intended task engagement, analogous to the default-mode network findings (Murray et al., 2022).

Serotonin (5-HT)_{2A} receptor agonists, also known as classical psychedelics, are more often associated with ASC than CB1 agonists (Liechti et al., 2017). The past decade has seen a resurgence of clinical studies with compounds that activate the 5-HT_{2A} receptor, including psilocybin and lysergic acid diethylamide (LSD) (Davis et al., 2021; De Gregorio et al., 2021; Nutt et al., 2020; Tullis, 2021). The subjective effects of these compounds may be instrumental in mediating therapeutic outcomes (Preller et al., 2017; Yaden & Griffiths, 2021), and more broadly, may aid in empirical studies of consciousness (Bayne & Carter, 2018; Yaden & Griffiths, 2021). 5-HT_{2A} receptors are present throughout the cortex, and their activation has been shown to promote diverse network connectivity, or “entropy,” across the brain (Carhart-Harris & Friston, 2019; Carhart-Harris et al., 2014) in part through facilitating the release of the excitatory neurotransmitter glutamate from thalamocortical nerve fibers (Aghajanian & Marek, 2000; Beique et al., 2007; Nichols, 2016; Preller et al., 2019). Unlike CB1, 5-HT_{2A} activation impacts all frequency bands of brain waves by reducing the power, or amplitude, of these neural oscillations at rest (Muthukumaraswamy et al., 2013). Notably, this occurs even after the administration of “microdoses” (i.e., 13 and 26 µg LSD) below the threshold of intoxicating effects, yet not after high doses (15 mg) of THC, indicating that broadband reductions in oscillatory power, which may be associated with therapeutic outcomes, are not a necessary biophysical feature of ASC (Murray et al., 2022; Murray et al., 2021). To what extent the phenomenological features of ASC induced by 5-HT_{2A} agonists compare to the CB1 agonist THC is a major aim of the current study.

In addition to 5-HT_{2A} and CB1 receptor systems, ASC may be induced by other pharmacological and non-pharmacological means, including dissociative drugs such as ketamine, entactogens such as 3,4-methylenedioxymethamphetamine (MDMA), continuous exposure to visual and auditory stimulation (Bartossek et al., 2021; Schmidt et al., 2020), or various meditative techniques (Milliere et al., 2018). While some neurophysiological and phenomenological commonalities have been reported between meditative and drug-induced states, including the dissolution of the sense of self (Milliere et al., 2018), the variety of meditation techniques and contemplative practices makes broad generalizations here difficult. For an in-depth review of the neurobiology and phenomenology of meditative states as compared to classical psychedelics, see work by Milliere and colleagues (Milliere et al., 2018).

How are ASC phenomena studied? In recent years, researchers have developed systematic approaches to evaluate the features of ASC across induction mechanisms. These approaches include psychometrically validated questionnaires and natural language processing (NLP) of speech or text content generated during ASC. The present study leverages both approaches, examining THC ASC through the lens of closed-ended questionnaires and open-ended self-reports. One questionnaire that has gained prominence in recent years is the altered states of consciousness rating scale (11D-ASC). The 11D-ASC comprises 11 dimensions or subscales including Experience of Unity, Complex Imagery, and Insightfulness (Studerus et al., 2010). This questionnaire was developed to test the hypothesis that ASC contain shared features, independent of their means of induction, toward a taxonomy of ASC. Studies with the 11D-ASC have shown that compounds including psilocybin, ketamine, and MDMA, and non-pharmacological techniques involving sensory stimulation, are indeed sensitive to the subscales (Carbonaro et al., 2018; Kometer et al., 2012; Liechti et al., 2017; Pokorny et al., 2017; Preller et al., 2016; Schmidt & Prein, 2019), with some expected differences in the magnitude of subscale ratings. For instance, ketamine is highly sensitive to Disembodiment, whereas MDMA is highly sensitive to Blissful State, and psilocybin to Elementary Imagery. To date, the 11D-ASC has not been used to assess ASC during meditation, although reports from meditative-like states, including autogenic training, were used in the development of the questionnaire (Dittrich, 1998).

The 11D-ASC enables a detailed assessment of ASC, however, it is not designed to be exhaustive, or encompass all features that may accompany ASC. Thus, the current study employs two complementary rating scales, one assessing mind-wandering, and the other, mindfulness, in addition to NLP assessments of open-ended self-report. Mind-wandering is assessed with a 1–10 rating scale administered immediately following a behavioral task, such as a working memory task. Increases in mind-wandering are related to decreases in task performance. The level of mind-wandering after drug administration, or during meditative states, is dependent on both drug type and meditation technique (Adam et al., 2020; Milliere et al., 2018). Rating scales have also been developed to assess states and traits of mindfulness. The state of mindfulness generally refers to a state of greater awareness of one’s sensations, emotions, and thoughts, with a non-judgmental attitude. In our analysis, we used the State Mindfulness Scale, designed to capture both traditional Buddhist and contemporary scientific models of mindfulness (Tanay & Bernstein, 2013). To our knowledge, only one study has explored changes in state mindfulness after drug administration, finding non-significant increases after psilocybin (315 µg/kg; oral) (Smigielski et al., 2019).

Complementary to psychometric questionnaires, natural language processing enables an analysis, not only of the content of ASC,

but also of how that content is expressed through language. These analyses might help identify shared features between drug effects and states of mental health or disorder to guide diagnoses and treatments (Tagliazucchi, 2021). NLP has been used to quantitatively evaluate open-ended self-reports after classical psychedelics including LSD, psilocybin, ayahuasca, and N,N-dimethyltryptamine (DMT), in addition to MDMA, ketamine, and antidepressants (Hase et al., 2022; Sanz et al., 2021). In a large dataset of available online reports ($N = 2947$), relative to antidepressants, language content after MDMA was highly emotional, whereas Ayahuasca and DMT linguistic markers were highly associated with mystical experiences. In placebo-controlled studies with MDMA (1.5 mg/kg), MDMA resulted in greater semantic proximity to the concepts of friend, support, intimacy, and rapport (Bedi et al., 2014) and an increase in use of social and sexual words (Baggott et al., 2015). In a placebo-controlled study examining LSD's effects on language, Sanz and colleagues identified increases in the entropy of verbally communicated topics, which paralleled prior findings of greater neural entropy after LSD (Sanz et al., 2021). To our knowledge, NLP has not been applied to cannabis or THC intoxication, or to non-pharmacological techniques of ASC induction, including acute meditative states.

The purpose of our study was to examine the subjective effects of THC through surveys and natural language to enable a "window into the intoxicated mind" (Baggott et al., 2015; Bedi et al., 2014) and facilitate comparison with 5-HT_{2A} receptor agonists through a CB₁ receptor-based ASC induction mechanism. Our central hypothesis was that THC induces ASC that mimic classical psychedelic states. Here, we assessed the acute effects of THC (7.5 and 15 mg) vs placebo in healthy men and women that were not regular cannabis users and with little to no prior experience with classical psychedelic substances. Ratings of mind-wandering and written self-reports of THC or placebo effects were collected near the anticipated peak drug effect. Ratings of mindfulness and altered states of consciousness were collected retrospectively at the end of sessions. NLP was performed on text transcribed from written self-report and included measures of language entropy, sentence perplexity, and classification to predict THC or placebo reports. This work is a sub-analysis of a larger study that included behavioral and neurophysiological assessments in the same set of participants, with one additional participant included here that did not participate in the neurophysiological measures (Murray et al., 2022).

2. Methods

2.1. Study design

Healthy adults ($N = 25$) participated in three 5-hour sessions in which they received capsules containing THC (7.5 or 15 mg) or placebo. THC was administered under double-blind and randomized conditions. Dependent measures included surveys of mind-wandering, state mindfulness (SMS), altered states of consciousness (11D-ASC), and natural language processing of self-reported effects.

2.2. Subjects

Participants ($N = 25$) were healthy adult males and females (either aged 18–20 or 30–40 years) who had used cannabis 1–20 times in their lifetime but had not used the drug in the last 30 days (Murray et al., 2022). Participants were recruited through local advertisements in social media platforms (Instagram, Facebook) and through paper flyers. Advertisements included links to intake surveys to determine initial eligibility in the study, and to provide contact information. A negative urine test for THC was required at each session. They were screened for physical and psychiatric health with a physical examination, electrocardiogram, modified Structural Clinical Interview for DSM-5, and self-reported health and drug-use history. Inclusion criteria were English fluency, right-handedness, at least a high school education and body mass index of 19 to 26 kg/m². Exclusion criteria included a history of psychosis, severe posttraumatic stress disorder or panic disorder, past-year substance use disorder (except nicotine), pregnant or nursing, working night shifts, and regular medication aside from birth control.

2.3. Orientation session

Prior to experimental sessions, subjects reviewed the protocol, provided informed consent, received pre-session instructions, and practiced study tasks and questionnaires. They were instructed to abstain from alcohol for 24 h and other recreational drugs for at least 2 days before each session. They were permitted to consume their normal amounts of caffeine and nicotine up to 3 h before sessions. Subjects were instructed to have a normal night's sleep and fast for 12 h before the sessions. A granola bar was provided at arrival as a standardized breakfast. To minimize drug-specific expectancies, subjects were told they might receive a placebo, stimulant, sedative, or cannabinoid drug. Subjects provided informed consent prior to beginning the study procedures.

2.4. Ethics committee approval

Study procedures were approved by the University of Chicago Institutional Review Board. Subjects provided informed consent to study procedures during the orientation session.

2.5. Experimental sessions

Subjects attended three 5-hour sessions from 9 am to 2 pm, separated by at least 7 days. Compliance to drug abstinence was verified by urinalysis (CLIAwaived Instant Drug Test Cup, San Diego, CA) and breath alcohol testing (Alcosensor III, Intoximeters, St. Louis,

MO). Female subjects provided urine samples for pregnancy tests and were tested at any phase of the menstrual cycle. After compliance tests, pre-drug measures of subjective state were obtained, and THC (7.5 or 15 mg) or placebo was administered orally under double-blind conditions. Subjective measures were taken at 60, 90, 120, 180, and 240 min, and written self-reported effects were obtained near peak drug effects at 100 min. After written self-report, participants rated their degree of mind-wandering during a working memory task. Other behavioral tasks were also administered during this time, followed by neurophysiological measures with electroencephalography. Methods and results of the behavioral and neurophysiological assessments have been previously published (Murray et al., 2022). Following the final time point at 240 min, subjects completed an end-of-session questionnaire and were discharged.

2.6. Drug

THC (Marinol® [dronabinol]; Solvay Pharmaceuticals; 7.5 mg and 15 mg) was placed in opaque capsules with dextrose filler. Placebo capsules contained only dextrose. The 7.5 and 15 mg doses reflect the amount of THC in one-quarter or one-half of a cannabis cigarette containing 0.2 g of 15% THC, respectively. These doses of THC are known to produce performance impairments as well as subjective intoxication (Broyd et al., 2016; Hartman & Huestis, 2013; Pabon & de Wit, 2019).

2.7. Self-report

Subjective drug effects were assessed during sessions before and at regular intervals after drug administration using a 12-item, true/false ARCI Marijuana scale specific to cannabis effects. Specific items include “I have an increasing awareness of bodily sensations” and “My thoughts seem to come and go” (Haertzen et al., 1963; Martin et al., 1971). The KR-20 reliability coefficient for the ARCI Marijuana scale is 0.77 (Haertzen et al., 1963). During sessions, near peak drug effects (100 min), participants rated levels of mind-wandering during a working memory N-back task (Gevins & Cutillo, 1993) from 1 “not at all” to 10 “almost always.” The mind-wandering assessment was administered immediately after the N-back task. During the task, participants responded when the current visual and audio stimulus (a letter) was the same as the one presented 1, 2, or 3 trials earlier. Also during this time of peak drug effects, participants provided a written self-report, wherein they were instructed to “Attend to your experience in the moment, and write as little or as much as you like about any thoughts or sensations you’re having for the next 10 min.” Measures of natural language processing were applied on these written self-reports. At the end of each session, subjects completed an end-of-session questionnaire comprised of the Dimensions of Altered States of Consciousness (11D-ASC) questionnaire (Dittrich, 1998). The 11D-ASC consists of 11 subscales indexed from 94 individual visual analog items rated from 0 to 100. Cronbach’s alpha, a measure of internal consistency, ranged from 0.73 to 0.91 across the 11 subscales (Studerus et al., 2010). Also at session end, subjects completed the State Mindfulness Scale (Tanay & Bernstein, 2013), consisting of 21 items (15 items for mindfulness of mind, 6 for mindfulness of body) rated from 1 “not at all” to 5 “very well.” Cronbach’s alpha for the mindfulness of mind and body subscales were found to be 0.95 and 0.89 respectively.

2.8. Natural language processing

2.8.1. Semantic entropy

Semantic analysis was conducted using a Word2Vec (Mikolov et al., 2013) model pre-trained with the Google News corpus (<https://news.google.com/>), comprising a vocabulary size of $\approx 3^6$ unique words using the skip-gram neural network architecture with dimension 300, a commonly used framework for such measures. Word embedding models such as word2vec work on the principle of *distributional semantics*, that words that are used and occur in the same contexts tend to have similar meanings. Vectors of words that represent similar concepts would be located close to each other in this high dimensional space, allowing us to measure between words to identify how close they are to each other. We use the word embedding model to assign vector representations to each of the words recorded by the participants. We measure the semantic distance between words by measuring the cosine of the angle between their respective vectors in the embedding, i.e. $d(u, v) = 1 - u \cdot v / \|u\| \|v\|$, for two vectors u and v . The semantic distances of consecutive words were computed, and for each sentence, we averaged the semantic distance. We then used this measure to serve as a metric of semantic coherence in texts. A high average value of semantic distances implies that some consecutive words were far apart in the vector embedding, and that more semantically diverse concepts were explored. Such a measure has been used previously to identify natural language disorganization during altered states of consciousness (Sanz et al., 2021).

2.8.2. Color entropy

Color entropy, like semantic entropy, is a measure of language entropy. We used multiple measures of language entropy to capture the multi-modal nature of language (Bergen, 2012). Color entropy operationalizes the entropy of words based on their color associations or relationships (i.e., banana and apple have greater entropy than banana and lemon). Color relationships in words were determined with Word-to-Color vectors and assessed for entropy within sentences. Specifically, every word was mapped to an 8-dimensional color vector that encodes the average color distribution of 100 images associated with the word. These vectors have previously been used to identify clustering in abstract semantic domains, as well as classify between metaphorical and literal word pairs (Desikan et al., 2020; Guilbeault et al., 2020). Sentences with a high semantic entropy do not necessarily have high word-color entropy, as each of these representations captures different aspects of word meaning. We use color entropy in addition to distributional semantics to account for embodied, multi-modal language meaning and its subsequent disorganization.

2.8.3. Language model sentence perplexity

Perplexity is a linguistic measure that quantifies the unlikelihood of a sentence and has been used to study dementia in Alzheimer's patients (Cohen & Pakhomov, 2020). Sentences that are more probabilistically likely are given a lower score on this measure (Miaschi et al., 2021; Wang et al., 2019). Perplexity is mathematically defined as the exponentiated average negative log-likelihood of a sequence. If we have a tokenized sequence $X = (x_0, x_1, \dots, x_t)$, then the perplexity of X is,

$$PPL(X) = \exp \left\{ -\frac{1}{t} \sum_{i=1}^t \log p_{\theta}(x_i | x_{<i}) \right\}$$

where $\log p_{\theta}(x_i | x_{<i})$ is the log-likelihood of the i th token conditioned on the preceding tokens $x_{<i}$ according to our model. We used the GPT-2 (Radford et al., 2019) and BERT (Devlin et al., 2018) language models to calculate our perplexity scores for the sentences.

2.8.4. Topic models and word clouds

Topic models (Blei & Lafferty, 2009) are probabilistic graphical models that represent collections of textual documents from underlying latent topics. These allow us to see if there are words that tend to appear around each other more often, and together, form a latent topic. We used a Latent Dirichlet Allocation (LDA) (Blei et al., 2003) topic model with two topics on the dataset of participants' sentences. Frequent word associations with topics were also presented in the form of word clouds. The size of the words corresponds to the prevalence of the word in the topic.

2.8.5. Classifying placebo vs drug

Text classification models were used to predict which class a body of text belongs to based on its textual features. Classes included placebo and drug groups. Text data were preprocessed by word tokenization, removal of stop words, and converted to Term Frequency Inverse Document Frequency format (TF-IDF). TF-IDF enables representation of words and their relative importance in the whole text corpus and individual document. After preprocessing, text classification was applied with Support Vector Machine using a Doc2Vec (Le & Mikolov, 2014) embedding. Doc2Vec semantically embeds each document in a high-dimensional space. We then visualized this Doc2Vec representation in a low dimensional space using Uniform Manifold Approximation and Projection (UMAP) (Leland et al., 2018).

2.9. Statistical analysis

ARCI Marijuana: Within-session responses were assessed with RM-ANOVA using time and dose as within-subject factors. 11D-ASC, mind-wandering, and State Mindfulness scales: For each measure, 7.5 and 15 mg THC were compared against placebo in separate RM-ANOVAs using dose as within-subjects factor. Natural Language Processing: Entropy and Perplexity measures were calculated for each subject. RM-ANOVAs with dose as within-subjects factor were used for each measure. For all RM-ANOVA, if significant linear effects of dose were found, follow-up planned contrasts compared each THC dose to placebo. Bonferroni adjusted p values were used to correct for multiple comparisons in measures containing subscales. All statistical analyses were conducted with SPSS (Version 25; IBM Corporation, Armonk, NY).

Table 1
Demographics and drug use characteristics.

Category	n or Mean \pm SD (Range)
Subjects (Male/Female)	25 (12/13)
Age, Years	25.2 \pm 6.6 (18–34)
Body Mass Index, kg/m ²	23.1 \pm 2.4 (19.5–26.6)
Weight, lbs	152.1 \pm 22.7 (101–189)
Race	
Caucasian	13
African American	2
Asian	1
Other/>1 Race	9
Current Drug Use	
Cannabis, months since last use	5.2 \pm 7.4 (1–24)
Alcohol, drinks/week ($n = 6, 10$)	3.1 \pm 3.3 (0–11)
Alcohol, drinking days/week	1.4 \pm 1.6 (0–6)
Tobacco, times/week ($n = 1, 2$)	0.3 \pm 1.0 (0–5)
Caffeine, servings/day ($n = 11, 11$)	0.8 \pm 0.7 (0–2)
Total Lifetime Drug Use, Nonmedical	
Cannabis ($n = 12, 12$)	12.0 \pm 6.8 (1–20)
Classical Psychedelic ($n = 3, 5$)	0.8 \pm 0.3 (0–6)
MDMA ($n = 0, 2$)	0.2 \pm 0.6 (0–2)
Stimulant ($n = 2, 2$)	0.4 \pm 1.1 (0–5)
Opiate ($n = 0, 0$)	0

3. Results

3.1. Demographic characteristics

Participants were 25 years of age on average and reported minimal current or prior substance use. In addition to meeting inclusion criteria of <20 total lifetime cannabis use and 0 use in the last 30 days, participants reported an average of 5 months since last cannabis use, and less than one lifetime or total classical psychedelic experience (Table 1).

3.2. Self-report measures

On subjective ratings, both doses of THC (7.5 and 15 mg) increased ratings of marijuana-like effects (ARCI Marijuana) over the course of sessions (Fig. 1A) (main effect of dose: $F_{1,24} = 54.68$; $p < 0.001$; time $F_{1,24} = 55.80$; $p < 0.001$; and dose \times time interaction: $F_{1,24} = 38.96$; $p < 0.001$). During peak drug effects, THC dose-dependently increased ratings of mind-wandering during the working memory task (Fig. 1B) ($F_{1,24} = 33.28$; $p < 0.001$). At session end, participants retrospectively reported on mindfulness and altered states of consciousness. THC dose-dependently increased mindfulness of mind and body (State Mindfulness Scale) (Fig. 1C) (mind:

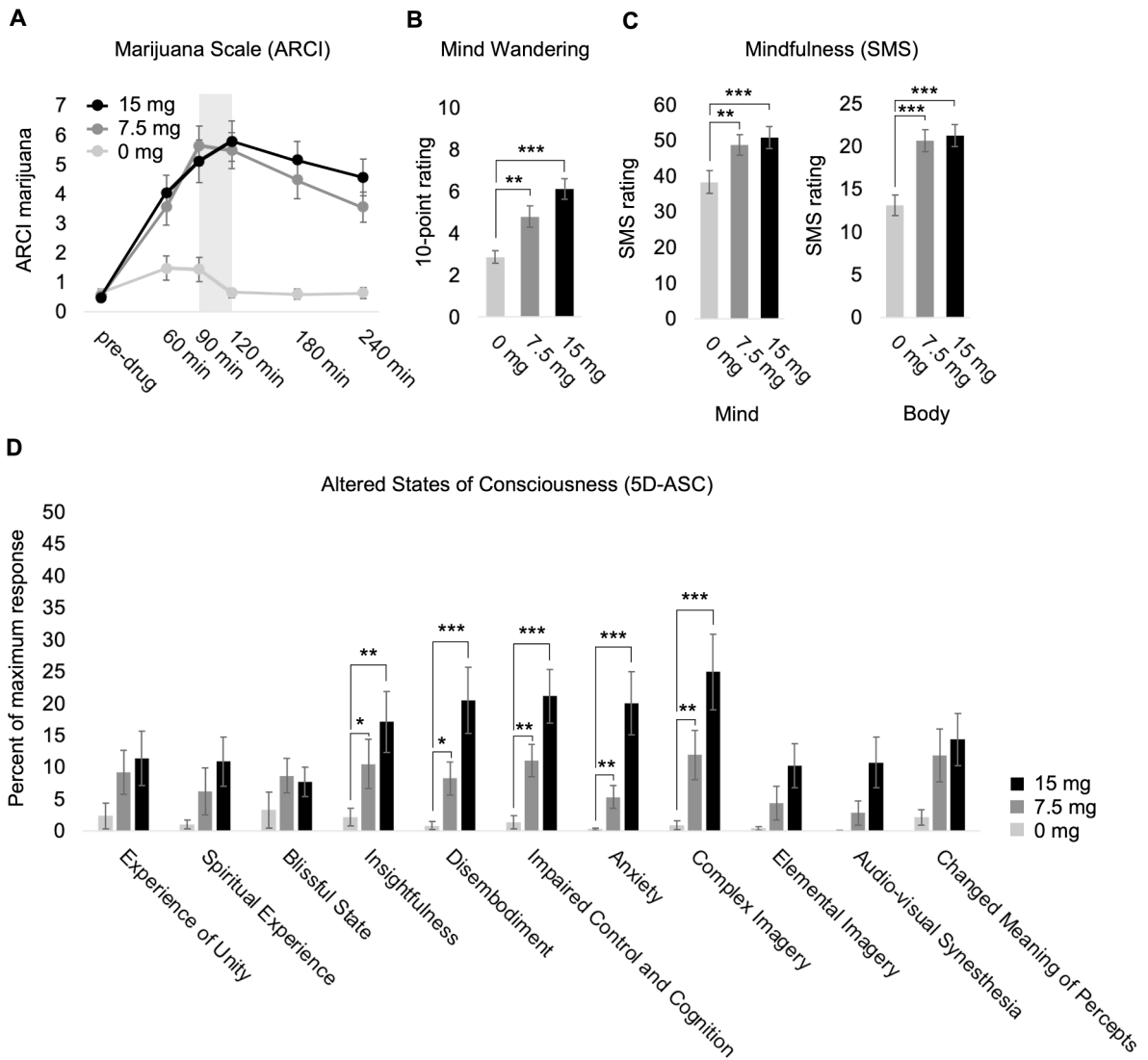


Fig. 1. Survey responses after 0, 7.5, or 15 mg THC; data expressed as mean \pm SEM. Time course of THC effects across study sessions indexed by the ARCI Marijuana scale (A); shaded region indicates period that tasks were administered, including mind-wandering and written self-reports. Mind-wandering reports after working memory task (B). Retrospective (end-of-session) ratings of state mindfulness of mind (Mind) and body (Body) (SMS; State Mindfulness Scale) (C). Altered states of consciousness subscales (11D-ASC) (D). Repeated-measures ANOVA resulted in significant main effects of dose ($p < 0.05$) for all surveys. Follow-up independent t-tests compared each THC dose to placebo (* $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$).

$F_{1,24} = 18.601$; $p < 0.001$; body: $F_{1,24} = 45.82$; $p < 0.001$) and dose-dependently increased ratings on all but two of the 11 subscales of altered states. Subscales included Insightfulness ($F_{1,24} = 10.49$; $p = 0.003$), Disembodiment ($F_{1,24} = 15.98$; $p = 0.001$), Impaired Control and Cognition ($F_{1,24} = 23.32$; $p < 0.001$), Anxiety ($F_{1,24} = 15.64$; $p = 0.001$), and Complex Imagery ($F_{1,24} = 17.05$; $p < 0.001$) (Fig. 1D).

3.3. Natural language

Text data were transcribed from participants' written self-reports near peak THC effects for natural language processing. Qualitatively, written reports included depictions of alterations in self, time perception, visual perception, and cognition. Quotes include: "Things appear larger the longer I stare at them"; "time is confusing"; "the interface between me and me... the behaving me, the observing me." Prior to machine learning analyses, we assessed word counts across drug conditions. THC (7.5 or 15 mg) did not affect the number of written words during the 10-minute reporting sessions (Mean \pm SD; Placebo: 71.08 ± 57.72 ; 7.5 mg THC: 71.00 ± 44.58 ; 15 mg THC: 71.24 ± 43.13). This lack of change in total word counts enabled direct comparison of text across drug conditions in our following analyses of natural language.

We analyzed natural language across placebo, 7.5 mg THC, and 15 mg THC using two language entropy measures and one measure of sentence perplexity (Fig. 2). THC dose-dependently increased color, but not semantic entropy (Fig. 2A,B) ($F_{1,24} = 4.40$; $p = 0.046$). THC effects also trended toward increased sentence perplexity, but this was not statistically significant (Fig. 2C). We then combined reports across drug conditions to explore text content using topic modeling with the choice of two topics. Topic modeling revealed associations of words along two topics that largely represented the placebo and THC groups. From these words, we created word clouds, which allowed us to see how these topics represented the groups. The words "feel", "little", "tired," "yesterday" and "breakfast" appeared frequently in topic 1 (representing placebo-related effects), while words "time", "moving", "weird", "drug", and "embarrassed" appeared frequently in topic 2 (representing THC-related effects) (Fig. 3A). Finally, we assessed text content with machine learning classification. Our classification model found that the textual content served as a strong predictor of whether content belongs in placebo or THC groups, with classification accuracies of 87.5% (Support Vector Machine on Doc2Vec embedded data) (Fig. 3B; Supplementary Fig. 1).

4. Discussion

Our goal was to investigate the subjective effects of oral THC in infrequent cannabis users to determine whether these effects include features of altered states of consciousness that are characteristic of other ASC induction mechanisms, including classical psychedelics. We found that THC dose-dependently increased most subscales of the 11D-ASC in addition to increasing language entropy, findings that have been reported after LSD and psilocybin (Komater et al., 2015; Liechti et al., 2017; Sanz et al., 2021). THC also dose-dependently increased ratings of both mind-wandering and mindfulness. Our findings inform the nature of subjective effects of THC and role for CB1 receptor-dependent signaling in the modulation of consciousness and cognition.

THC effects on the 11D-ASC were similar to classical psychedelics (Gouzoulis-Mayfrank et al., 2005; Komater et al., 2015; Liechti et al., 2017; Schmidt & Berkemeyer, 2018) and ketamine (Studerus et al., 2010), with many, but not all 11D-ASC subscales affected by

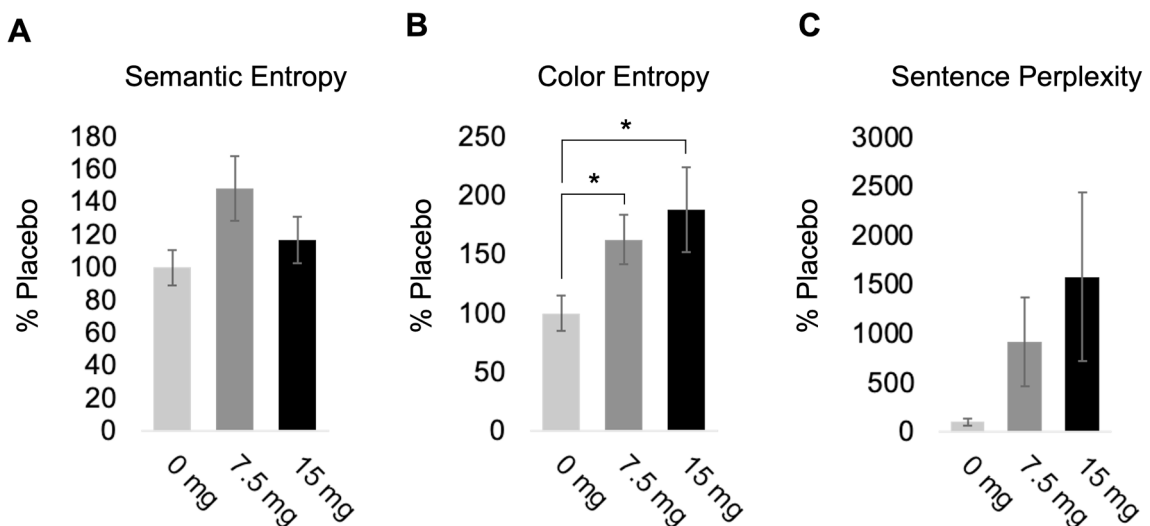


Fig. 2. Natural language processing measures on text transcribed from 10-min written self-reports after 0, 7.5, or 15 mg THC; data normalized to placebo (0 mg) and expressed as mean \pm SEM. Semantic Entropy (A). Color Entropy (B). Sentence Perplexity (C). Repeated-measures ANOVA resulted in significant main effect of dose ($p < 0.05$) for Color Entropy. Follow-up independent t-tests compared each THC dose to placebo ($*p < 0.05$).

in state mindfulness, but did detect increased ratings of mindfulness at 4 months post-intervention (Smigielski et al., 2019). Measures of mindfulness are primarily reported in association with meditative practices. For instance, a 4-day Isha Yoga retreat increased ratings of mindfulness that were associated with increased levels of blood endocannabinoids (the endogenous signaling molecules which activate CB1 receptors in the brain) (Sadhasivam et al., 2020). Specifically, the endocannabinoids 2-AG and anandamide were correlated with happiness and well-being after the retreat. In that study, participants with over 20% increases in 2-AG also showed greater increases in mindfulness. Based on these data, the authors of that report, Sadhasivam and colleagues, suggest that endocannabinoids may be a biomarker of meditation. By extension, their work supports the notion that THC, an exogenous cannabinoid, may facilitate meditative states. Meditation techniques vary greatly however, and those that fall under 'mindfulness meditation' are largely split between two main practices known as focused attention and open monitoring, each of which have separate aims and neural correlates (Lutz et al., 2008). Focused attention involves sustaining attentional focus on an object or breath with an aim of gaining control over and reducing mind-wandering, and thus, is associated with reductions in DMN function (Brewer et al., 2011; Farb et al., 2007; Lutz et al., 2016; Scheibner et al., 2017). Open monitoring involves a receptive observation of the mental contents in the present moment and is related to activation in anterior insula, anterior cingulate and somatosensory cortices (Kuzbiel, 2018; Lutz et al., 2008). THC frequently activates insular and cingulate cortices (Bloomfield et al., 2019) and fails to reduce DMN function (Bossong et al., 2013; Cheng et al., 2014; Zaytseva et al., 2019), drawing closer comparisons to open monitoring than focused attention practices on both neurobiological and phenomenological measures.

To further examine the altered state induced by THC, we used NLP measures on written self-reports of THC effects. These NLP measures covered multiple aspects of language organization to reflect the multi-modal nature of language (Bergen, 2012; Lakoff & Turner, 2009). We included two language entropy measures, one for words based on distributional semantics and another based on color-associated information to capture multi-modal entropy (Desikan et al., 2020; Guilbeault et al., 2020). We found that THC increased color entropy, but effects on semantic entropy were not significant. Our finding of increased language entropy is consistent with a previous report after administration of 75 µg LSD. Specifically, Shannon's information entropy increased alongside increased semantic variability (Sanz et al., 2021).

What does higher language entropy mean for mental health? The effects of both cannabis and classical psychedelics have drawn comparisons to psychosis, resulting in the "psychotomimetic" label for these drugs (Nichols & Walter, 2021). Our data contribute to comparisons to psychosis made through natural language. Increases in language entropy, including speech disorganization and reduced semantic coherence have been reported in patients with schizophrenia (Bedi et al., 2015; Corcoran et al., 2018; Elvevag et al., 2007; Marggraf et al., 2018; Spencer et al., 2021). Early studies also demonstrated that classical psychedelics enhance free-association or render speech less predictable (Amarel & Cheek, 1965). Interestingly, these findings in language entropy extend to neural activity. Increases in neural entropy, measured by Lempel-Ziv Complexity (LZP) during resting-state, have been reported after intravenous THC (Cortes-Briones et al., 2015), LSD, psilocybin and ketamine (Schartner et al., 2017), and in patients with schizophrenia (Xiang et al., 2019). In the THC study, increased neural entropy correlated with psychosis-like positive symptoms and thought disorganization symptoms. However, health benefits may accompany psychotomimetic risks. LSD-induced entropic brain activity predicted positive personality changes 2 weeks after treatment, indicating that acutely, entropic states may target rigid behavioral patterns for enduring positive outcomes (Lebedev et al., 2016).

The current study was not without limitations. This study was a subset of a larger study, which assessed neurophysiological effects of THC (Murray et al., 2022). In that study, we found that unlike LSD or psilocybin (Carhart-Harris et al., 2016; Komater et al., 2015; Muthukumaraswamy et al., 2013), THC did not induce broadband reductions in neural oscillations. One limitation of the current report is that additional neurophysiological measures were not included, such as THC's potential effects on neural entropy, which might have informed the relationship between brain states and altered states of consciousness. Related to this point, the current report was limited by the measures included to assess an overall picture of ASC after THC. Additional questionnaires that operationalize beneficial effects such as psychological insight, or detrimental effects such as positive psychotic symptoms, would have provided a more complete picture. Similarly, while we were selective with our NLP measures prior to analysis, we note that a variety of NLP measures could have been applied to our data, including sentiment analysis. Sentiment analysis could have informed whether the ASC experience after THC accompanied positive, negative, or neutral emotional states. Our study was also limited by the sample and size. One strength was that an equal number of males and females were recruited within two major age groups (*peri*-adolescent vs. adult), enabling examination of sex and age as biological variables. We examined but did not find sex differences in our participants. For review on this topic, see work by Cooper and Craft (Cooper & Craft, 2018). Our prior report did identify age-related differences in cognitive and behavioral effects (Murray et al., 2022), however these age-related differences did not extend to the measures reported here. Our sample was limited by the fact that no participant was over the age of 34, and participants were not equally distributed in self-reported race/ethnicity. Lastly, we note the inherently exploratory nature of our study as a limitation, as we had no prior anticipation for the magnitude or directionality of effects of THC on many of our measures.

Together, our findings indicate that THC reliably induces robust altered states of consciousness with features shared with classical psychedelics, while also enhancing language entropy and self-reported mind-wandering and mindfulness. These observations point to the utility of THC as a tool for examining features of ASC and for informing the neurobiological basis of potentially beneficial and detrimental effects, from insightfulness and mindfulness to psychosis-mimicking effects. We note that these effects are not mutually exclusive, and ASC may differentially enhance and impair aspects of consciousness simultaneously (Bayne & Carter, 2018). Future studies may work to determine the veracity of reported insightfulness and mindfulness across ASC induction modalities.

CRedit authorship contribution statement

Conor H. Murray: Conceptualization, Project administration, Methodology, Data curation, Formal analysis, Visualization.
Bhargav Srinivasa-Desikan: Methodology, Data curation, Formal analysis, Software, Visualization.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

Data Availability Statement

The data that support the findings of this study are available from the corresponding author upon request.

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Appendix A. Supplementary material

Supplementary data to this article can be found online at <https://doi.org/10.1016/j.concog.2022.103357>.

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