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Correction to “On the Relationship between Classic Psychedelics and Suicidality: A Systematic Review”

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Upon further review, we identified two suicidality-related events that were not described in the original manuscript. Both of these events were deemed not attributable to the administration of a psychedelic by the authors of the primary outcome trials. One completed suicide was reported by Griffiths et al. (2016) 11 days following the administration of a very low dose (placebo-like) of psilocybin (1 mg/70 kg psilocybin). Importantly, this individual was not administered an “active” dose of psilocybin during the course of the study.¹ One suicide attempt was reported by Anderson et al. (2020) approximately 2 months after the administration of an active dose of psilocybin (21–25.2 mg/70 kg).² For further details, see the supporting information of the respective manuscripts. Although these events are likely not attributable to psychedelic therapy itself, they point to the importance of closely attending to safety within psychedelic therapy and research.

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