

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Universitätsspital Basel Confirmation No.:
Serial No.: 17/883,502 Group No.:
Filing or 371(c) Date: August 08, 2022 Examiner:
Entitled: Effects of mescaline and of mescaline analogs (scalines) to assist psychotherapy

THIRD-PARTY PRE-ISSUANCE SUBMISSION

Examiner:

The following documents, which are also identified in the Form PTO/SB/429 filed herewith, are submitted for your consideration as being of potential relevance to the examination of the present application

1. U.S. Pat. App. Pub. No. 2020/0147038 “Assessing and treating psychedelic-responsive subjects” (Published May 14, 2020)
2. COUNTYOURCULTURE, “Leminger’s Scalines” Published October 20, 2020; retrieved from Web Archive, Isomer Design.
<https://web.archive.org/web/20201020135327/https://isomerdesign.com/countyourculture/2012/05/04/leminger-allylescaline/>, retrieved January 19, 2023
3. BRAUN (1978) “Mescaline analogs: substitutions at the 4-position” NIDA Research Monograph. 22: 27-37.
4. SAM, “A Lysergic-Mescalito Experience LSD & Mescaline” Published on October 13, 2019; <https://erowid.org/experiences/exp.php?ID=100568>, retrieved January 19, 2023
5. WOLBACH (1962) “Cross tolerance between mescaline and LSD-25 with a comparison of the mescaline and LSD reactions” Psychopharmacologia. 3(1): 1-14
6. WOLBACH (1962) “Comparison of psilocin with psilocybin, mescaline and LSD-25” Psychopharmacologia. 3(3): 219-223
7. U.S. Pat. App. Pub. No. 2021/0015833 “Oral soft gel capsule containing psychedelic compound” (Published January 21 2021)
8. SAMANTHE, “The Grinch Who Took Mescaline” Published on December 13, 2001; [Mescaline - Erowid Exp - 'The Grinch Who Took Mescaline'](#), retrieved January 19, 2023
9. GRINSPOON (1986) “Can drugs be used to enhance the psychotherapeutic process?” American journal of psychotherapy. 40(3): 393-404
10. STEVENSON (1957) “Comments on the Psychological Effects of Mescaline and Allied Drugs” Journal of Nervous and Mental Disease. 125(3): 438-441
11. U.S. Pat. App. Pub. No. 2019/0246591 “Insect and cannabis production systems and methods”

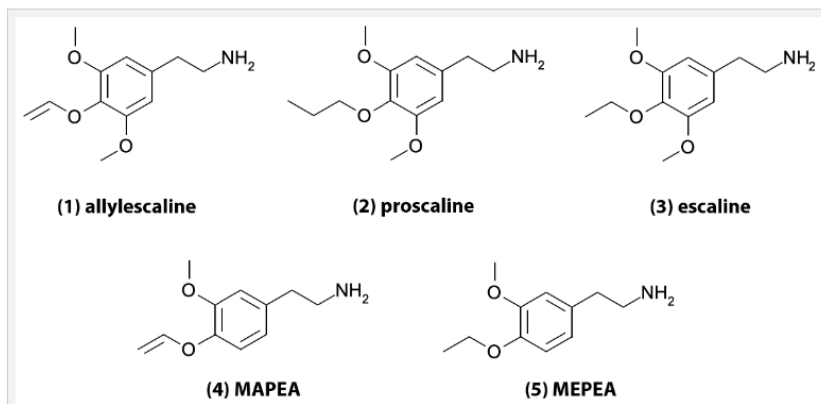
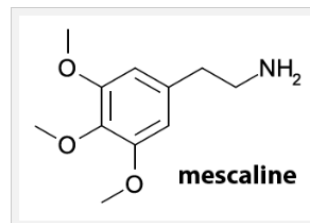
(Published August 15, 2019)

12. EROWID, “Mescaline Dosage” Modified and published on February 21, 2015; [Erowid Mescaline Vault : Dose/Dosage](#), retrieved January 19, 2023
13. SASKIP, “The Point of It All LSD & Mescaline” Published on June 15, 2020; [LSD & Mescaline - Erowid Exp - 'The Point of It All'](#), retrieved January 19, 2023

Attached hereto is a claim chart providing a concise description of the relevance of each reference in the document list to the elements of the presently pending claims.

U.S.S.N. 17/883,502 Pending Claims	References
<p>1. A method of inducing a psychedelic state in an individual, including the steps of: administering a composition chosen from the group consisting of mescaline, a salt thereof, analogs thereof, and derivatives thereof to an individual; and inducing a psychedelic state in the individual while reducing the risk of nausea or vomiting within a psychedelic treatment session and reducing the risk of cardiovascular stimulation within a psychedelic treatment session.</p>	<p>1. U.S. Pat. App. Pub. No. 2020/0147038 “Assessing and treating psychedelic-responsive subjects” (Published May 14, 2020)</p> <p>From [0017] “In some embodiments, the psychedelic agent is selected from lysergic acid diethylamide, psilocybin, and pharmaceutically acceptable salts thereof. In some embodiments, the psychedelic agent is a 5-HT_{2A} agonist (e.g., LSD, psilocybin, DOI (±)-1-(2,5-dimethoxyphenyl)-2-aminopropane hydrochloride; (R)-DOI ((R)-1-(2,5-dimethoxy-4-iodophenyl)-2-aminopropane) (greater than 95% R enantiomer); LA-SS-Az (2'S,4'S)-(+)-9,10-Didehydro-6-methylergoline-8β-(trans-2,4-dimethylazetidide); 2C-BCB (4-Bromo-3,6-dimethoxybenzocyclobuten-1-yl) methylamine); ayahuasca; 3,4,5-trimethoxyphenethylamine (mescaline); 5-methoxy-N,N-dimethyltryptamine (5-meo-DMT); ibogaine; a compound of formula (I); a compound of formula (II); or a compound of formula (III), or a pharmaceutical acceptable salt thereof).”</p> <p>From [0081] “As used herein, a “psychedelic agent” refers to a compound capable of inducing an altered state of consciousness, i.e., a marked deviation in the subjective experience or psychological functioning of a normal individual from his or her usual waking consciousness. Altered states of consciousness can be monitored, evaluated, and/or quantified using any of a variety of methods known in the art including, without limitation, Dittrich's APZ (Abnormal Mental States) questionnaire, and its revised versions, OAV and 5D-ASC (see, for example, Dittrich et al., A Pharmacopsychiatry 1998, 31:80; Studerus et al., PLoS ONE 2010, 5)...etc”</p> <p>From [0085] “As used herein, a “psychotherapy” refers to a non-pharmaceutical therapy in which the subject is psychologically engaged, directly or indirectly (e.g., by dialogue), in an effort to restore a normal psychological condition; to reduce the risk of developing a psychological condition, disorder, or one or more symptoms thereof; and/or to alleviate a psychological condition, disorder, or one or more symptoms thereof. Psychotherapy includes Behavioral Activation (BA), Cognitive Behavioral Therapy (CBT), Interpersonal psychotherapy (IPT), Psychoanalysis, Hypnotherapy, Psychedelic Psychotherapy, Psycholytic Psychotherapy, and other therapies. In some embodiments, a subject undergoes psychotherapy in conjunction with (e.g., prior to, during, and/or after) a pharmaceutical therapy, such as a psychedelic therapy.”</p> <p>2. COUNTYOURCULTURE, “Leminger’s Scalines” Published October 20, 2020; retrieved from Web Archive, Isomer Design. https://web.archive.org/web/20201020135327/https://isomerdesign.com/countyourculture/2012/05/04/leminger-allylescaline/, retrieved January 19, 2023</p> <p>“I got a call out of absolutely nowhere, from a Stanislov Wistupkin, that he had discovered a number of new psychedelic drugs which he would like to share with me. They were simple phenethylamines, one with an ethoxy group at the 4-position, and one with an allyloxy group there. Both, he said, were mood elevators active between 100 and 300 milligrams... - Alexander Shulgin”</p>

Otakar Leminger was a little-known Czechoslovakian chemist who worked for years in industry and lived on the banks of the Elbe River in Ústí north of Prague. When he retired in the early 1970s he published a paper entitled "A Contribution to the Chemistry of Alkoxyated Phenethylamines" in which he describes the synthesis of several novel phenethylamines which he tested on himself to determine activity.

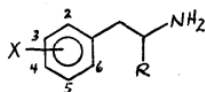


“(1) allylescaline, 3,5-dimethoxy-4-allyloxy-phenethylamine (2) proscaline, 3,5-dimethoxy-4-n-propoxy-phenethylamine (3) escaline, 3,5-dimethoxy-4-ethoxy-phenethylamine (4) MAPEA, 3-methoxy-4-allyloxy-phenethylamine (5) MEPEA, 3-methoxy-4-ethoxy-phenethylamine

3. BRAUN (1978) “Mescaline analogs: substitutions at the 4-position” NIDA Research Monograph. 22: 27-37.

From page 29 “

TABLE I
HUMAN ACTIVITY OF 2-CARBON AND ANALOGOUS 3-CARBON-CHAIN
PSYCHOTOMIMETICS (a)



X =	2-Carbon R=H	3-Carbon R=CH ₃	Rel. potency CH ₃ v. H
4-OCH ₃	MPEA	PMA	>5x
3,4-OCH ₃	DMPEA	3,4-DMA	4x
3,1,0CH ₂ O-4		MDA	>2x
3,4,5-OCH ₃	mescaline	TMA	2x
2,3,4-OCH ₃	2,3,4-TMPEA	TMA-3	?
2,4,5-OCH ₃	TMPEA	TMA-2	>15x
2,5-OCH ₃ -4-Br		DOB	10x
2,5-OCH ₃ -4-I		DOI	>8x
2,5-OCH ₃ -4-CH ₃		DOM (STP)	4x
2,5-OCH ₃ -4-Et		DOET	5x
2-OCH ₃ -3-OCH ₂ O-4		MMDA-3a	>2x
3-OCH ₃ -4-OCH ₂ O-5		MMDA	>2x
3,5-OCH ₃ -4-OfEt	escaline		1½x
3,5-OCH ₃ -4-OPr	proscaline		?
3,5-OCH ₃ -4-SCH ₃	thiomescaline		?

From page 34 “These three mescaline analogs (table I) have been assayed in normal subjects by procedures previously outlined (Shulgin et al. 1969). Both of the alkoxy

homologs are effective as psychotomimetics at dosages of 60 mg orally, with clear threshold effects being noted in some subjects at levels as low as 10 mg. **These bases differ from mescaline in that the onset of action occurs sooner (within the first hour) and there is no nausea noted**, but otherwise the time course and much of the qualitative content of the intoxication are similar to those of mescaline.”

4. SAM, “A Lysergic-Mescalito Experience LSD & Mescaline” Published on October 13, 2019; <https://erowid.org/experiences/exp.php?ID=100568>, retrieved January 19, 2023

DOSE:	1.5 tablets		LSD	(blotter / tab)
	650 mg	oral	Mescaline	(powder / crystals)
	repeated	smoked	Cannabis	(plant material)
		oral	Pharms - Citalopram	(daily)

BODY WEIGHT: 75 kg

“So, I had decided having experienced synthetic **mescaline** twice before at decent dosages, I would experiment by **combining it with LSD**, as this was the last of my stash and I had heard great things about this particular combination and here was an opportunity to try it. I’d really enjoyed the past mescaline experiences but found the visual domain much less inspiring than what I experience with cactus, so I hoped that the LSD would more fully open the doors of our visual perception. **My sister and I were taking 650mg (approx) of the mescaline, and one and half tabs of acid.** My friend is sensitive to the **nausea of mescaline so he took around 500mg with two tabs of the acid.**”

“The come up was gentle, the acid first. I felt some stomach awareness but this passed, and **I didn’t purge this time with the mescaline, or feel much in the way of nausea.** The last two times I did. My friend was sick and felt better immediately.”

5. WOLBACH, (1962) “Cross tolerance between mescaline and LSD-25 with a comparison of the mescaline and LSD reactions” *Psychopharmacologia*. 3(1): 1-14

From **page 5** “The difference in the various area measurements after **1.5 meg/kg of LSD** on the first and second controls were evaluated by a t-test for paired observations (EDWARDS). Data on the two sets of controls after **5.0 mg/kg of mescaline** were treated similarly. **Increase in blood pressure was significantly greater after LSD.** There were no significant differences on other parameters (Table 2).”

From **page 6** “

Table 2. *Reproducibility of responses to LSD and mescaline in first and second controls (N = 10)*

Measure	LSD-25	Mescaline
Temperature	+ 0.282 ± 0.372	- 0.516 ± 0.480
Pulse rate	+ 14.95 ± 13.68	+ 18.65 ± 14.12
Blood pressure	+ 33.35 ± 14.03 ¹	- 10.30 ± 9.71
Pupillary change	+ 0.325 ± 1.75	- 0.263 ± 1.27
Kneejerk	- 6.24 ± 12.95	+ 2.75 ± 21.83
Responses to questionnaire.	+ 10.35 ± 9.68	- 4.60 ± 8.56
Clinical grade	+ 0.150 ± 0.211	+ 0.100 ± 0.221

Figures represent the mean differences ± the standard errors of the differences between responses to LSD-25 (1.5 mcg/kg) and mescaline (5.0 mg/kg) in the first and second controls.

+ Indicates an increased response on the second control.

- Indicates a decreased response in the second control.

¹ Indicates significance (*P* < 0.05).

”

6. WOLBACH (1962) “Comparison of psilocin with psilocybin, mescaline and LSD-25” *Psychopharmacologia*. 3(3): 219-223

From page 221 “

Experiment 1. The mean values on the area figures for the various parameters after the different doses of psilocin are shown in the Table.

Table. *Total course of the psilocin reaction*

Measure	Treatment			
	Placebo ¹	Psilocin (mcg/kg)		
		37.5	75	150
Temperature ²	+ 2.7 ± 0.3	+ 4.0 ± 0.4	+ 4.3 ± 0.4	+ 5.2 ± 0.25
Pulse rate ²	+ 37.8 ± 14.5	+ 37.2 ± 10.6	+ 16.6 ± 12.4	+ 41.1 ± 12.3
Systolic blood pressure ²	+ 15.6 ± 13.5	+ 33.4 ± 14.9	+ 41.8 ± 10.5	+ 57.8 ± 10.4
Pupillary diameter ²	+ 0.2 ± 1.4	+ 6.5 ± 1.2	+ 8.7 ± 0.8	+ 14.6 ± 1.6
Kneejerk ²	- 20.7 ± 11.1	- 47.4 ± 15.7	- 38.6 ± 9.2	- 67.9 ± 17.1
No. positive answers ³	0.1 ± 0.3	19.1 ± 4.7	49.0 ± 7.8	94.1 ± 6.4
Clinical grade ⁴	0 ± 0	1.6 ± 0.2	2.6 ± 0.2	3.3 ± 0.2

¹ Data from ISBELL (1959) on 9 subjects.

² Figures are the means (10 subjects) ± standard errors of areas under time-action curves (“degree-hours”, “beat-hours”, etc.). The signs indicate increases (+) or decreases (-) in the measures after drugs as compared with pre-drug controls.

³ Means ± standard errors of numbers of questions scored positively in the 7½ hours after the drugs, which were not scored positively before drugs were given.

⁴ Means ± standard errors on a scale of 0-4.

”

From page 221 “For comparison, values obtained after administration of a placebo taken from another experiment (Isbell 1959) are included in this table. Data on LSD and mescaline can be found in the paper of Wolbach et al. (1962), **Like LSD and mescaline, psilocin caused significant increases in body temperature, systolic blood pressure, pupillary diameter and decreased the threshold for kneejerk.**”

2. The method of claim 1, further including the

1. U.S. Pat. App. Pub. No. 2020/0147038 “Assessing and treating psychedelic-responsive subjects” (Published May 14, 2020)

From **Abstract** “The invention features methods of identifying a subject as being likely to have a positive therapeutic response to a **psychedelic agent**. Methods of the

<p>step of treating a medical condition chosen from the group consisting of anxiety disorder, anxiety associated with life-threatening illness, depression, addiction, personality disorder, compulsive-obsessive disorder, post-traumatic stress disorder, eating disorder, cluster headache, and migraine.</p>	<p>invention also include administering a psychedelic agent to a subject (e.g., a subject that has been identified as likely to respond positively thereto) to improve mental or physical well-being in the subject (e.g., by treating stress, anxiety, addiction, depression, compulsive behavior, by promoting weight loss, by improving mood, by treating or preventing a condition (e.g., psychological disorder), or by enhancing performance).”</p> <p>From [0017] “In some embodiments, the psychedelic agent is selected from lysergic acid diethylamide, psilocybin, and pharmaceutically acceptable salts thereof. In some embodiments, the psychedelic agent is a 5-HT_{2A} agonist (e.g., LSD, psilocybin, DOI (±)-1-(2,5-dimethoxyphenyl)-2-aminopropane hydrochloride; (R)-DOI ((R)-1-(2,5-dimethoxy-4-iodophenyl)-2-aminopropane) (greater than 95% R enantiomer); LA-SS-Az (2'S,4'S)-(+)-9,10-Didehydro-6-methylergoline-8β-(trans-2,4-dimethylazetidide); 2C-BCB (4-Bromo-3,6-dimethoxybenzocyclobuten-1-yl) methylamine); ayahuasca; 3,4,5-trimethoxyphenethylamine (mescaline); 5-methoxy-N,N-dimethyltryptamine (5-meo-DMT); ibogaine; a compound of formula (I); a compound of formula (II); or a compound of formula (III), or a pharmaceutical acceptable salt thereof).”</p> <p>7. U.S. Pat. App. Pub. No. 2021/0015833 “Oral soft gel capsule containing psychedelic compound” (Published January 21 2021)</p> <p>From [0002] “The present invention provides for an oral soft gel capsule that includes: (i) a soft capsule shell; (ii) psychedelic compound selected from the group consisting of psilocybin, psilocin, mescaline, Lysergic acid diethylamide (LSD), ketamine, salvinorin A, ibotenic acid, muscimol, N,N-dimethyltryptamine (DMT), 3,4-Methylenedioxymethamphetamine (MDMA), methyl diethanolamine, also known as N-methyl diethanolamine (MDEA), 3,4-methylenedioxy amphetamine (MDA), and combinations thereof; and (iii) liquid vehicle compatible with the capsule shell, and effectively dissolves and/or suspends the psychedelic compound.”</p> <p>From [0005] “The present invention also provides for a method of treating in a subject at least one of obsessive compulsive disorder (OCD), depression, pain, irritability, fibromyalgia, post-traumatic stress disorder (PTSD), cluster headaches, paranoia, psychosis, anxiety, panic attacks, flashbacks, smoking addiction, alcohol addiction, drug addiction, and cocaine addiction. The method includes orally administering to the subject an oral soft gel capsule described herein, in an amount and for a period of time sufficient to effectively treat the disease or disorder.”</p>
<p>3. The method of claim 1, wherein the individual has an insufficient therapeutic response or adverse effects after</p>	<p>6. WOLBACH (1962) “Comparison of psilocin with psilocybin, mescaline and LSD-25” Psychopharmacologia. 3(3): 219-223</p> <p>From Page 219 “Experiments. Two experiments were performed. In the first experiment 10 subjects received in randomized order 0.75 mcg/kg and 1.5 meg/kg of LSD; 2.5 mg/kg and 5.0 mg/kg of mescaline; and 37.5 mcg/kg, 75 meg/kg and 150 mcg/kg of psilocybin. The data on LSD and mescaline are also being reported separately in a paper dealing with cross tolerance between mescaline and LSD (WoL~AcI~ et al., in press).”</p>

the use of other psychedelics substances and said method is used as a second-line treatment.

From **Page 220** “Drugs. All drugs were given **intramuscularly at 8 a.m. Mescaline Hydrochloride**”

From **Page 221-222** “**Psilocin appeared to differ from LSD and mescaline only in potency and time course. Symptoms after psilocin appeared within a few minutes, were nearly at peak within 30 minutes, and had largely sub-sided in less than 4 hours. Peak effects of LSD occurred in 1-1/2 hours, and were largely dissipated within 5 to 6 hours. The peak effects after mescaline occurred at 2 to 2 1/2 hours and persisted longer than the effects of either LSD or psilocin.**”

4. The method of claim 1, wherein the individual has a need for a qualitatively different psychedelic response after the use of other psychedelics substances and said method is used as an alternative treatment option.

3. BRAUN (1978) “Mescaline analogs: substitutions at the 4-position” NIDA Research Monograph. 22: 27-37.

From **page 29** “

TABLE I
HUMAN ACTIVITY OF 2-CARBON AND ANALOGOUS 3-CARBON-CHAIN PSYCHOTOMIMETICS (a)

X =	2-Carbon R=H		3-Carbon R=CH ₃		Rel. potency CH ₃ v. H
4-OCH ₃	MPEA	>400mg (b)	PMA	60mg (c)	>5x
3,4-OCH ₃	DMPEA	150mg (d)	3,4-DMA	~400mg (e)	4x
3, OCH ₂ O-4		>200mg (f)	NDA	100mg (e)	>2x
3,4,5-OCH ₃	mescaline	350mg (g)	TMA	200mg (h,1)	2x
2,3,4-OCH ₃	2,3,4-TMPEA	~400mg (j)	TMA-3	>100mg (c)	?
2,4,5-OCH ₃	TMPEA	>300mg (k,1)	TMA-2	20mg (m)	>15x
2,5-OCH ₃ -4-Br		10mg (n)	DOB	1mg (o)	10x
2,5-OCH ₃ -4-I		>8mg (e)	DOI	1mg (e)	>8x
2,5-OCH ₃ -4-CH ₃		20mg (n)	DOM (STP)	5mg (e)	4x
2,5-OCH ₃ -4-Et		20mg (p)	DOET	4mg (e)	5x
2-OCH ₃ -3-OCH ₂ O-4		>60mg (c)	MMDA-3a	30mg (e)	>2x
3-OCH ₃ -4-OCH ₂ O-5		>250mg (q)	MMDA	150mg (r)	>2x
3,5-OCH ₃ -4-OEt	escaline	60mg (e,s)		40mg (p)	1½x
3,5-OCH ₃ -4-OPr	proscaline	60mg (e,s)		?	?
3,5-OCH ₃ -4-SCH ₃	thiomescaline	30mg (s)		?	?

From **page 34** “These **three mescaline analogs (table I)** have been assayed in normal subjects by procedures previously outlined (Shulgin et al. 1969). Both of the **alkoxy homologs are effective as psychotomimetics at dosages of 60 mg orally**, with clear threshold effects being noted in some subjects at levels as low as 10 mg. **These bases differ from mescaline in that the onset of action occurs sooner (within the first hour) and there is no nausea noted**, but otherwise the time course and much of the qualitative content of the intoxication are similar to those of mescaline.”

5. The method of claim 1, wherein the individual has a need for a more attenuated response, with a slower

6. WOLBACH (1962) “Comparison of psilocin with psilocybin, mescaline and LSD-25” Psychopharmacologia. 3(3): 219-223

From **Page 219** “Experiments. Two experiments were performed. In the first experiment **10 subjects received in randomized order 0.75 mcg/kg and 1.5 meg/kg of LSD; 2.5 mg/kg and 5.0 mg/kg of mescaline; and 37.5 mcg/kg, 75 meg/kg and 150 mcg/kg of psilocybin.** The data on LSD and mescaline are also being reported separately in a paper dealing with cross tolerance between mescaline and LSD (WoL~AcI~ et al., in press).”

onset of the psychological, or physiological response of the psychedelic (attenuated and prolonged response) compared with other psychedelics and said inducing step provides an effect chosen from the group consisting of less nausea and vomiting than psilocybin, less cardiovascular stimulation than psilocybin, reduced thermogenic acute effects compared with psilocybin, less bad drug effects including anxiety, fewer or less intensive headaches than psilocybin, an overall slow and attenuated effect onset compared with

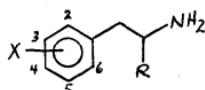
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2,5-OCH ₃ -4-Br		10mg (n)	DOB 1mg (o) 10x
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2,5-OCH ₃ -4-CH ₃		20mg (n)	DOM (STP) 5mg (e) 4x
2,5-OCH ₃ -4-Et		20mg (p)	DOET 4mg (e) 5x
2-OCH ₃ -3-OCH ₂ O-4		>60mg (c)	MMDA-3a 30mg (e) >2x
3-OCH ₃ -4-OCH ₂ O-5		>250mg (q)	MMDA 150mg (r) >2x
3,5-OCH ₃ -4-OEt	escaline	60mg (e,s)	40mg (p) 1½x
3,5-OCH ₃ -4-OPr	proscaline	60mg (e,s)	? ?
3,5-OCH ₃ -4-SCH ₃	thiomescaline	30mg (s)	? ?

From **page 34** “These **three mescaline analogs (table I)** have been assayed in normal subjects by procedures previously outlined (Shulgin et al. 1969). Both of the **alkoxy homologs are effective as psychotomimetics at dosages of 60 mg orally**, with clear threshold effects being noted in some subjects at levels as low as 10 mg. **These bases differ from mescaline in that the onset of action occurs sooner (within the first hour) and there is no nausea noted**, but otherwise the time course and much of the qualitative content of the intoxication are similar to those of mescaline.”

<p>psilocybin, reduced peak response at longer effect duration and overall effect than comparable treatment options such as psilocybin, an overall intensive subjective experience while exhibiting a favorable acute adverse effects profile, and combinations thereof.</p>	
<p>6. The method of claim 1, wherein said inducing step is performed in the individual to increase feelings of trust and openness beneficial in enhancing the therapeutic alliance and catalyze the effects of psychotherapy for any indication.</p>	<p>1. U.S. Pat. App. Pub. No. 2020/0147038 “Assessing and treating psychedelic-responsive subjects” (Published May 14, 2020)</p> <p>From [0052] “In some embodiments of any of the preceding aspects, the method further includes administering to the subject the psychedelic agent (e.g., a 5-HT.sub.2A agonist, e.g., LSD, psilocybin, DOI (\pm)-1-(2,5-dimethoxyphenyl)-2-aminopropane hydrochloride; (R)-DOI ((R)-1-(2,5-dimethoxy-4-iodophenyl)-2-aminopropane) (greater than 95% R enantiomer); LA-SS-Az (2'S,4'S)-(+)-9,10-Didehydro-6-methylergoline-8β-(trans-2,4-dimethylazetidide); 2C-BCB (4-Bromo-3,6-dimethoxybenzocyclobuten-1-yl) methylamine) ayahuasca; 3,4,5-trimethoxyphenethylamine (mescaline)...etc”</p> <p>From [0001] “Therapeutic benefits of psychedelic drugs, such as lysergic acid diethylamide and psilocybin, are being actively researched in humans. Studies in healthy volunteers have shown long-term increases in trait optimism (Carhart-Harris et al., Psychological Medicine 2016, 46:1379-1390), well-being (Id. and Griffiths et al., Psychopharmacology 2011, 218:649-665), and openness (Carhart-Harris et al., Psychological Medicine 2016, 46:1379-1390; MacLean et al., Journal of Psychopharmacology 2011, 25:1453-1461)...etc”</p> <p>From [0085] “As used herein, a “psychotherapy” refers to a non-pharmaceutical therapy in which the subject is psychologically engaged, directly or indirectly (e.g., by dialogue), in an effort to restore a normal psychological condition; to reduce the risk of developing a psychological condition, disorder, or one or more symptoms thereof; and/or to alleviate a psychological condition, disorder, or one or more symptoms thereof. Psychotherapy includes Behavioral Activation (BA), Cognitive Behavioral Therapy (CBT), Interpersonal psychotherapy (IPT), Psychoanalysis, Hypnotherapy, Psychedelic Psychotherapy, Psycholytic Psychotherapy, and other therapies. In some</p>

	<p>embodiments, a subject undergoes psychotherapy in conjunction with (e.g., prior to, during, and/or after) a pharmaceutical therapy, such as a psychedelic therapy.”</p> <p>8. SAMANTHE, “The Grinch Who Took Mescaline” Published on December 13, 2001; Mescaline - Erowid Exp - 'The Grinch Who Took Mescaline', retrieved January 19, 2023</p> <p>“When I was getting confused I kept thinking, 'this must be a dream I'll wake up from' -- I contemplated what it would be like to be in a catatonic state of 'not remembering who I am' yet I didn't let that send me into a panic. I just accepted it, reminding myself there's a beginning, a middle and an end -- these words seemed to hold a vague meaning (again, this phrase was something the sitter had suggested we tell ourselves if we felt 'stuck'), but I didn't try to figure it out, I just trusted instead. I also thought, 'I am right here right now, and that's just where I need to be.' I felt cuddly and snuggly, and as the afternoon wore on I thought I really wanted physical contact, hugging, how nice it would feel. I did snuggle a little with two of the other trippers as I returned to baseline. I wanted to be near people, to connect.”</p> <p>9. GRINSPOON (1986) “Can drugs be used to enhance the psychotherapeutic process?” American journal of psychotherapy. 40(3): 393-404</p> <p>From page 394-395 “There was also interest in making therapeutic use of the powerful psychedelic experiences of regression, abreaction, intense transference, and symbolic drama to improve or speed up psychodynamic psychotherapy. Two basic kinds of therapy emerged, one aimed at exploring the psychodynamic unconscious and the other making use of a mystical or conversion experience. The first type, psycholytic (literally, mind-loosening) therapy, required relatively small doses and several or even many sessions with LSD, mescaline, or psilocybin.”</p>
<p>7. The method of claim 1, wherein said inducing step is performed in the individual to produce an inward oriented focus of attention and subjective insight to enhance psychotherapy.</p>	<p>10. STEVENSON (1957) “Comments on the Psychological Effects of Mescaline and Allied Drugs” Journal of Nervous and Mental Disease. 125(3): 438-441</p> <p>From page 439 “Another relevant experience is the subject’s realization of the instability of his own perceptions and of his own thought images. He may have acquired a strengthened awareness of his own self.”</p> <p>From page 440 “Some-thing like this may also explain what happens during the mescaline experience. Watching the images pass before the observing self, the subject may suddenly have a realization of the separateness of that Self from the images.”</p>

<p>8. The method of claim 1, wherein said inducing step is performed in the individual to induce neuroregenerative processes beneficial in medical conditions chosen from the group consisting of Alzheimer's disease, dementia, predementia, and Parkinson's disease.</p>	<p>11. U.S. Pat. App. Pub. No. 2019/0246591 “Insect and cannabis production systems and methods” (Published August 15, 2019)</p> <p>From [2093] “In embodiments, the concentrated volatiles may be mixed with serotonin, psilocybin, psilocin, baeocystin, lysergic acid diethylamide (LSD), or mescaline.”</p> <p>From [0598] “...In embodiments, the psilocybin mushrooms and/or the alimentary composition, improves memory and cognition, motor skills and coordination, the ability to solve complex computer coding challenges, hearing, vision, sensory function, learning, or neurogenesis.”</p> <p>1. U.S. Pat. App. Pub. No. 2020/0147038 “Assessing and treating psychedelic-responsive subjects” (Published May 14, 2020)</p> <p>From [0052] “In some embodiments of any of the preceding aspects, the method further includes administering to the subject the psychedelic agent (e.g., a 5-HT.sub.2A agonist, e.g., LSD, psilocybin, DOI (±)-1-(2,5-dimethoxyphenyl)-2-aminopropane hydrochloride; (R)-DOI ((R)-1-(2,5-dimethoxy-4-iodophenyl)-2-aminopropane) (greater than 95% R enantiomer); LA-SS-Az (2'S,4'S)-(+)-9,10-Didehydro-6-methylergoline-8β-(trans-2,4-dimethylazetidide); 2C-BCB (4-Bromo-3,6-dimethoxybenzocyclobuten-1-yl) methylamine) ayahuasca; 3,4,5-trimethoxyphenethylamine (mescaline)...etc”</p> <p>From [0016] “...In some embodiments, the methods of the invention can be used to treat a symptom of the psychological disorder (e.g., a psychosomatic symptom or a somatic symptom (e.g., chronic pain, anxiety disproportionate to severity of physical complaints, pain disorder, body dysmorphia, conversion, hysteria, neurological conditions without identifiable cause, or psychosomatic illness))....”</p>												
<p>9. The method of claim 1, wherein the composition is administered in a dose of 1-800 mg.</p>	<p>12. EROWID, “Mescaline Dosage” Modified and published on February 21, 2015; Erowid Mescaline Vault : Dose/Dosage, retrieved January 19, 2023</p> <div data-bbox="397 1333 909 1871" style="background-color: black; color: white; padding: 10px;"> <p style="text-align: center;">Mescaline Dosage by Erowid</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th colspan="2" style="background-color: #333; color: yellow;">Oral Mescaline HCl Dosages</th> </tr> </thead> <tbody> <tr> <td style="background-color: #333; color: white;">Threshold</td> <td style="background-color: #333; color: white;">100 mg</td> </tr> <tr> <td style="background-color: #333; color: white;">Light</td> <td style="background-color: #333; color: white;">100 - 200 mg</td> </tr> <tr> <td style="background-color: #333; color: white;">Common</td> <td style="background-color: #333; color: white;">200 - 300 mg</td> </tr> <tr> <td style="background-color: #333; color: white;">Strong</td> <td style="background-color: #333; color: white;">300 - 500 mg</td> </tr> <tr> <td style="background-color: #333; color: white;">Heavy</td> <td style="background-color: #333; color: white;">500 - 700 mg</td> </tr> </tbody> </table> <p style="margin-top: 10px;"> Onset : 45 - 60 minutes Peak : T + 4 hours Duration : 4 - 8 hours Normal After Effects : 2 - 4 hours </p> </div>	Oral Mescaline HCl Dosages		Threshold	100 mg	Light	100 - 200 mg	Common	200 - 300 mg	Strong	300 - 500 mg	Heavy	500 - 700 mg
Oral Mescaline HCl Dosages													
Threshold	100 mg												
Light	100 - 200 mg												
Common	200 - 300 mg												
Strong	300 - 500 mg												
Heavy	500 - 700 mg												

10. The method of claim 1, wherein said administering step is further defined as administering a dose chosen from the group consisting of a micro dose of mescaline hydrochloride (1-100 mg) inducing no to minimal subjective effects and equivalent to <20 µg of LSD base, a low dose of mescaline hydrochloride (100-200 mg) inducing mild psychedelic effects and equivalent to 20-40 µg of LSD, a moderate to medium dose of mescaline hydrochloride (300-400 mg) inducing a moderate to medium strong psychedelic experience with mainly positive drug effects and equivalent to 60-80 µg of LSD, a medium to

5. WOLBACH, (1962) "Cross tolerance between mescaline and LSD-25 with a comparison of the mescaline and LSD reactions" *Psychopharmacologia*. 3(1): 1-14

From page 8 "

Table 5. Comparison of pattern of subjective response on questionnaire after mescaline and LSD-25

Category ¹	Number of questions ²	Total responses possible	Number of responses in category				
			placebo ³	LSD		mescaline	
				0.75	1.5	2.5	5.0
General	7	70	0	18	30	19	26
Difficulty in thinking . . .	4	40	0	0	14	3	4
Alteration in mood	3	30	0	14	15	6	9
Alteration in touch	4	40	0	13	20	15	26
Alteration in hearing	4	36	0	16	20	11	18
Visual distortion	10	40	0	10	39	12	23
"Elementary" hallucinations	5	45	0	8	20	8	20
"True" hallucinations	4	40	0	2	6	1	5
Depersonalization	13	130	0	26	44	23	34

¹ Refers to type of question, e.g., "feeling strange" (general); "feet look old" (depersonalization); "am happy" (mood); "things look small" (visual distortion); "is difficult to concentrate" (thinking), etc.

² Number of subjects times number of questions in category.

³ Based on responses of 10 different subjects in another experiment.

From page 8 "Both drugs induced anxiety, **alterations in mood (generally "euphoric")**, difficulty in thinking and concentration, sensory perceptual distortion particularly visual, and both caused true- and pseudo-hallucinations. **The subjective symptoms reported after mescaline were very similar to those described in the literature.** Table 5 illustrates the similarity of the patterns of the subjective response after LSD and mescaline."

From page 2 "Drugs and doses. **LSD tartrate and mescaline hydrochloride** were administered intramuscularly in doses of **0.75 mcg/kg and 1.5 mcg/kg (LSD)**, and **2.5 mg/kg and 5.0 mg/kg (mescaline)**. The drug concentrations employed for LSD and mescaline were 30 mcg/ml and 1000mg/ml respectively, in distilled water."

13. SASKIP, "The Point of It All LSD & Mescaline" Published on June 15, 2020; LSD & Mescaline - Erowid Exp - 'The Point of It All', retrieved January 19, 2023

DOSE:	750 mg	oral	Mescaline	
T+ 0:00				
T+ 1:30		oral	LSD	
T+ 23:30	repeated	vaporized	Cannabis	(extract)
BODY WEIGHT:		220 lb		

"Just as the legend goes in fear and loathing, the **mescaline HCl** came on slow, then I started cursing the guy who sold it to me, and then...intensity...I lit some incense, turned on the TV, and somewhat hesitantly dosed the **1000 ug of LSD**....Literally before I knew it, another half hour had passed, and I was there. The Dead Zone. **My**

<p>high dose of mescaline hydrochloride (500 mg) equivalent to 100 µg of LSD base and inducing a full “good effect” psychedelic response with mainly positive drug effects and moderate ego-dissolution and a moderate risk of producing anxiety, and a high dose of mescaline hydrochloride (800 mg) equivalent to 150-200 µg of LSD base and inducing a full and very strong psychedelic response including marked “ego-dissolution” and having a high risk of producing anxiety.</p>	<p>ego was no more, completely eradicated and shut in a dark closet like a parent giving their child a time out.”</p>
<p>11. A method of therapy, including the steps of: administering an intermediate “good effect dose” of a composition</p>	<p>8. SAMANTHE, “The Grinch Who Took Mescaline” Published on December 13, 2001; Mescaline - Erowid Exp - 'The Grinch Who Took Mescaline', retrieved January 19, 2023</p>

chosen from the group consisting of mescaline, salt of mescaline, analogs thereof, and derivatives thereof to an individual; and inducing positive acute drug effects that are known to be associated with more positive long-term responses in psychiatric patients.

DOSE: T+ 0:00	100 mg	oral	Mescaline	(capsule)
T+ 0:45	100 mg	oral	Mescaline	(capsule)
T+ 1:30	100 mg	oral	Mescaline	(capsule)
BODY WEIGHT:		125 lb		

“It was the third and last group session of a course of tripping that spanned nine months. The material was **mescaline** again, **300 mg**, taken in three doses spaced 45 min. apart, starting at about 1 PM... The poetry that I discerned in this answer helped to smooth me out and get beyond my temporary obsession with my heart, which stemmed from **a period of anxiety disorder and panic attacks when I was 19** (see the 'terror blossom' report)... So I finally kept a promise to myself, by starting yoga. I also decided to **abstain from drinking any alcohol for six months**, just to see what that's like, and to explore Cannabis, which I discovered I've been chronically overdosing myself on for years (for an illustration, read any of my old Cannabis trip reports).”

13. SASKIP, “The Point of It All LSD & Mescaline” Published on June 15, 2020; LSD & Mescaline - Erowid Exp - 'The Point of It All', retrieved January 19, 2023

DOSE: T+ 0:00	750 mg	oral	Mescaline	
T+ 1:30		oral	LSD	
T+ 23:30	repeated	vaporized	Cannabis	(extract)
BODY WEIGHT:		220 lb		

“Just as the legend goes in fear and loathing, the **mescaline HCl** came on slow, then I started cursing the guy who sold it to me, and then...intensity...I lit some incense, turned on the TV, and somewhat hesitantly dosed the **1000 ug of LSD**....Literally before I knew it, another half hour had passed, and I was there. The Dead Zone. **My ego was no more**, completely eradicated and shut in a dark closet like a parent giving their child a time out.”

“I am an extremely introverted person, and **suffer from moderate social anxiety**... **Since my trip, I have made many changes to my life. I go to bed and wake up and more reasonable times, think carefully about every dietary choice I make, I exercise regularly, have significantly less social anxiety, and overall feel much more optimistic about the future.** I've already lost almost 10 pounds just making these changes for a little under a week because of how much exercise I have been doing. I feel great! I can't remember the last time I felt so youthful, and the best part is that I still have so far to go. I absolutely can't wait to see how I look and feel after 3 months!”

12. The method of claim 11, wherein the “good effect dose” is further defined as 500 mg of the composition.

5. WOLBACH, (1962) “Cross tolerance between mescaline and LSD-25 with a comparison of the mescaline and LSD reactions” *Psychopharmacologia*. 3(1): 1-14

From page 8 “

Table 5. Comparison of pattern of subjective response on questionnaire after mescaline and LSD-25

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¹ Refers to type of question, e.g., “feeling strange” (general); “feet look old” (depersonalization); “am happy” (mood); “things look small” (visual distortion); “is difficult to concentrate” (thinking), etc.

² Number of subjects times number of questions in category.

³ Based on responses of 10 different subjects in another experiment. ”

From page 8. “Both drugs induced anxiety, **alterations in mood (generally "euphoric")**, difficulty in thinking and concentration, sensory perceptual distortion particularly visual, and both caused true- and pseudo-hallucinations. The subjective symptoms reported after mescaline were very similar to those described in the literature. Table 5 illustrates the similarity of the patterns of the subjective response after LSD and mescaline.”

13. A method of therapy, including the steps of: administering an “ego-dissolution” dose of a composition chosen from the group consisting of mescaline, a salt of mescaline, analogs thereof, and derivatives thereof to an individual; and providing the experience of

13. SASKIP, “The Point of It All LSD & Mescaline” Published on June 15, 2020; LSD & Mescaline - Erowid Exp - 'The Point of It All', retrieved January 19, 2023

DOSE:	750 mg	oral	Mescaline	
T+ 0:00				
T+ 1:30		oral	LSD	
T+ 23:30	repeated	vaporized	Cannabis	(extract)
BODY WEIGHT:	220 lb			

“Just as the legend goes in fear and loathing, the **mescaline HCl** came on slow, then I started cursing the guy who sold it to me, and then...intensity...I lit some incense, turned on the TV, and somewhat hesitantly dosed the **1000 ug of LSD**...Literally before I knew it, another half hour had passed, and I was there. The Dead Zone. **My ego was no more**, completely eradicated and shut in a dark closet like a parent giving their child a time out.”

ego-dissolution.																							
<p>14. The method of claim 13, wherein the “ego-dissolution” dose is further defined as 800 mg of the composition.</p>	<p>13. SASKIP, “The Point of It All LSD & Mescaline” Published on June 15, 2020; LSD & Mescaline - Erowid Exp - 'The Point of It All', retrieved January 19, 2023</p> <table border="1" data-bbox="399 363 1162 636"> <tr> <td>DOSE:</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>T+ 0:00</td> <td>750 mg</td> <td>oral</td> <td>Mescaline</td> <td></td> </tr> <tr> <td>T+ 1:30</td> <td></td> <td>oral</td> <td>LSD</td> <td></td> </tr> <tr> <td>T+ 23:30</td> <td>repeated</td> <td>vaporized</td> <td>Cannabis</td> <td>(extract)</td> </tr> </table> <table border="1" data-bbox="407 575 786 625"> <tr> <td>BODY WEIGHT:</td> <td>220 lb</td> </tr> </table> <p>“Just as the legend goes in fear and loathing, the mescaline HCl came on slow, then I started cursing the guy who sold it to me, and then...intensity...I lit some incense, turned on the TV, and somewhat hesitantly dosed the 1000 ug of LSD...Literally before I knew it, another half hour had passed, and I was there. The Dead Zone. My ego was no more, completely eradicated and shut in a dark closet like a parent giving their child a time out.”</p>	DOSE:					T+ 0:00	750 mg	oral	Mescaline		T+ 1:30		oral	LSD		T+ 23:30	repeated	vaporized	Cannabis	(extract)	BODY WEIGHT:	220 lb
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T+ 1:30		oral	LSD																				
T+ 23:30	repeated	vaporized	Cannabis	(extract)																			
BODY WEIGHT:	220 lb																						

Electronic Acknowledgement Receipt

EFS ID:	47401738
Application Number:	17883502
International Application Number:	
Confirmation Number:	9378
Title of Invention:	EFFECTS OF Mescaline AND OF Mescaline ANALOGS (SCALINES) TO ASSIST PSYCHOTHERAPY
First Named Inventor/Applicant Name:	Matthias Emanuel LIECHTI
Customer Number:	48924
Filer:	Sisi Li
Filer Authorized By:	
Attorney Docket Number:	0614.00169
Receipt Date:	20-JAN-2023
Filing Date:	08-AUG-2022
Time Stamp:	12:02:04
Application Type:	

Payment information:

Submitted with Payment	yes
Payment Type	CARD
Payment was successfully received in RAM	\$72
RAM confirmation Number	E20231JC02003295
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Authorized User	

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Warnings:

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3	Request for Notification of Non-compliant Third-Party Submission	Third-party-notification-request.pdf	23614 80dbb45607019780ee469a10091aaace3dcdecf85	no	1
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Warnings:

Information:

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Warnings:

Information:

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Information:

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Warnings:					
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Information:					
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Total Files Size (in bytes):			9834809		

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New Applications Under 35 U.S.C. 111

If a new application is being filed and the application includes the necessary components for a filing date (see 37 CFR 1.53(b)-(d) and MPEP 506), a Filing Receipt (37 CFR 1.54) will be issued in due course and the date shown on this Acknowledgement Receipt will establish the filing date of the application.

National Stage of an International Application under 35 U.S.C. 371

If a timely submission to enter the national stage of an international application is compliant with the conditions of 35 U.S.C. 371 and other applicable requirements a Form PCT/DO/EO/903 indicating acceptance of the application as a national stage submission under 35 U.S.C. 371 will be issued in addition to the Filing Receipt, in due course.

New International Application Filed with the USPTO as a Receiving Office

If a new international application is being filed and the international application includes the necessary components for an international filing date (see PCT Article 11 and MPEP 1810), a Notification of the International Application Number and of the International Filing Date (Form PCT/RO/105) will be issued in due course, subject to prescriptions concerning national security, and the date shown on this Acknowledgement Receipt will establish the international filing date of the application.

Electronic Acknowledgement Receipt

EFS ID:	47401970
Application Number:	17883502
International Application Number:	
Confirmation Number:	9378
Title of Invention:	EFFECTS OF Mescaline AND OF Mescaline ANALOGS (SCALINES) TO ASSIST PSYCHOTHERAPY
First Named Inventor/Applicant Name:	Matthias Emanuel LIECHTI
Customer Number:	48924
Filer:	Sisi Li
Filer Authorized By:	
Attorney Docket Number:	0614.00169
Receipt Date:	20-JAN-2023
Filing Date:	08-AUG-2022
Time Stamp:	12:18:46
Application Type:	

Payment information:

Submitted with Payment	yes
Payment Type	CARD
Payment was successfully received in RAM	\$72
RAM confirmation Number	E20231JC18433513
Deposit Account	
Authorized User	

The Director of the USPTO is hereby authorized to charge indicated fees and credit any overpayment as follows:

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File Listing:

Document Number	Document Description	File Name	File Size(Bytes)/ Message Digest	Multi Part /.zip	Pages (if appl.)
1	Concise Description of Relevance	Concise-description-generated.pdf	35029 f6e2cb62474824427af44af940fedd548e1660fa	no	3

Warnings:

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2	Third-Party Submission Under 37 CFR 1.290	Third-party-preissuance-submission.pdf	57092 91f92ecf1f3a0d8d937c903c9240385f10322f2c	no	3
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Warnings:

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Warnings:

Information:

6	Non Patent Literature	SASKIP.pdf	718250 0874fa046fd0a6eb311449ae984720b1bd04d4de	no	4
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7	Fee Worksheet (SB06)	fee-info.pdf	37517 779121d11742b31a63baa4b03e7f008ae7ce265	no	2
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Total Files Size (in bytes):	2033275
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