Adverse Childhood Experiences and complex PTSD: A Theoretical Model
Exploring Psychedelic Drugs as a Therapeutic Treatment

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Abstract

Complex posttraumatic stress disorder (cPTSD) has several detrimental consequences, including severe anxiety, emotional detachment, mood irregularities, and vivid flashbacks to trauma. In many cases, cPTSD can be linked back to adverse childhood experiences (ACEs). Treatments for cPTSD that involve psychedelic drugs are potentially beneficial, but unfortunately they are understudied in psychology labs due to their classification as a Schedule I substance. Thus, theoretical work is needed to explain potential mechanisms involved in treatment programs. In this new theoretical model, I clarify the mechanistic links between ACEs and cPTSD and then examine why psychedelic drugs may be an ideal therapeutic tool for the treatment of cPTSD.

Toxic stress theory posits that exposure to extreme, frequent, and persistent ACEs without the presence of a supportive caretaker chronically activates the stress response system (Jones et al., 2021). Toxic stress results in dysregulation of the limbic-hypothalamic-pituitary-adrenal (LHPA) axis, elevating levels of catecholamines, cortisol, and proinflammatory cytokines (Thermo Fisher Scientific, n.d.). The toxic stress induced by ACEs causes cPTSD due to the persistent exposure to multiple adverse events leading to re-experience of the traumatic events, avoidance behaviors, and paranoia. Psychedelic drugs unlock repressed memories, engaging positively with negative self-concept and dysregulated emotions, which are both characteristic of the Disturbances of Self-Organization symptom cluster of cPTSD.

Presentation of this theoretical model would allow for public recognition of the potential benefits of this treatment and further exploration into this topic.

Keywords: PTSD, psychedelics, adverse childhood experiences, stress