Classification: Hallucinogen

Background: Psilocybin is a phosphate derivative of N,N-dimethyltryptamine that naturally occurs at concentrations of 0.1–1.5% in about a dozen species of the Psilocybe genus of mushrooms as well as in some species of the Panaelous and Conocybe genera. Psilocybin is considered non-addictive and is rarely abused. There are currently no legally prescribed uses for this drug.

Legally Obtained with Prescription As: None

Legally Obtained OTC: None

Street Names: Magic mushrooms, Shrooms, Purple passion, Mushrooms, Blue caps, Boomers, Buttons, Champs, Fungus, God’s flesh, Mexican mushrooms, Musk, Pizza toppings, Simple simon, Silly putty and Zoomers

Mode of Use: Fresh form, treated/preserved (e.g. deliberately dried, cooked or frozen), dry capsules and powders all intended for oral consumption, eaten raw, boiled into tea or cooked with other foods

Appearance: Light brown mushroom tops with long narrow stems, white powder and capsules

Metabolism and Detection: In humans, Psilocybin rapidly converts within the first hour to Psilocin, another pharmacologically active drug, and into the inactive metabolite HIAA (when consumed orally). Psilocybin (psilocin) has a half-life of 1.8–4.5 hours and a typical detection window of < 1 day. In some rare cases it may be detected up to 3 days; however this would only occur with chronic use, which is considered rare due to an increased tolerance easily built to the drug with multiple uses. The user will then get a diminished effect of the drug with each use, requiring higher doses each time. Urine samples should be immediately wrapped in foil to close out any light since the drug rapidly degrades in light exposure. Psilocybin tests in urine are considerably costly.

Physiological Effects: Increased energy, elevated heart rate, pupil dilation, loss of appetite, coldness in the extremities and muscle relaxation

Psychological Effects: Feelings of well-being and heightened perception, dissolution of stress, feelings of freedom, changes to audio, visual, and tactile senses, fear and paranoia

Toxicity: Toxic effects can occur in children by ingesting a single mushroom cap and 3 or more caps in adults. Although true acute overdoses of this drug are exceptionally rare, typically the behaviors associated with its use provide the most risk to the user. Adverse neurological effects or a “bad trip” can lead to suicidal tendencies, paranoia, hallucinations, delirium and psychosis. Death can occur if the person inadvertently consumes other toxic mushroom species.

Screen Test: Available upon request by reference laboratory

Confirmation Test: Available upon request by reference laboratory

For more information, visit www.cordantsolutions.com, email info@cordants.com or call 1-855-625-3778.