

Ketamine FAQs

What is Ketamine?

Ketamine is a dissociative anesthetic agent historically used by first responders, emergency room, operating room, and intensive care unit personnel to provide sedation and pain relief. In 2000, the psychiatric benefits of ketamine were discovered.

How does Ketamine work?

Ketamine affects the Glutamate system of neurotransmitters. The Glutamate system plays a role in how the brain communicates within itself by altering interneural messaging and responses.

How is Ketamine different than traditional antidepressants?

Traditional antidepressants work by increasing the concentration of neurotransmitters in the brain. Neurotransmitters (serotonin, norepinephrine, and dopamine) are how brain cells communicate with each other. By increasing the concentration of neurotransmitters, brain cells are able to transmit their messages easier. Ketamine does not change brain cells' ability to communicate with each other; ketamine changes the message sent and the subsequent response.

What conditions does Ketamine treat?

Ketamine has been shown to be effective treating the symptoms of: Treatment-resistant Major Depressive Disorder, Suicidal Ideation, Post Traumatic Stress Disorder, Obsessive-Compulsive Disorder, and Bipolar Disorder. Ketamine is most effective treating classic symptoms of depression.

How is Ketamine given?

Ketamine can be given orally, intramuscular, intranasal, or intravenous. The Ketamine Wellness Center uses intravenous administration; this is the most personalizable method and is the method used in the scientific studies.

What is the process?

You can qualify for treatment by a referral from a healthcare provider or by a self-referral. All applicants are reviewed by the Medical Director prior to approval to ensure appropriateness and safety; additional medical information may be requested. If approved, patients receive a loading phase of 6 infusions over 2-3 weeks. Maintenance infusions follow the loading phase. This is individualized to each patient's needs.

Upon arrival at the clinic, patients discuss their symptoms, side effects, and progress with the provider. An IV is placed and the infusion is started. Patients' vital signs are monitored throughout the infusion. The ketamine infusion runs over 30-45m. Most patients are ready to walk out within 15m of completion of their infusion.



What will I feel during the infusion?

Each patient's experience is unique. The most common shared experience is a dissociation of their mind from their body, floating above their physical selves. The therapeutic quality of ketamine, in this setting, is alleviation of psychiatric symptoms; all other experiences are side effects. The therapeutic effects of ketamine will occur regardless of the intensity of the side effects and have lasting effects.

What are the side effects of Ketamine?

The most common side effects of ketamine include sedation, increased blood pressure, increased heart rate, and increased gastric secretions. The side effects of ketamine are felt most strongly during the infusion and dissipate rapidly once the infusion has completed. Total recovery from side effects typically occurs within 2-4 hours.

Is Ketamine safe?

Yes. Ketamine has a long, proven history of safe use with humans.

Is Ketamine known as a 'party drug?'

Ketamine is often referred to as a 'party drug.' Although ketamine has this moniker in the media, its yearly recreation use in the United States is 0.13% of the population. Similarly, methamphetamine usage is 1.8%, cocaine 1.7%, and heroin 0.8%.

When can I expect to see results?

The onset of the therapeutic effects from ketamine varies depending on the individual. Scientific studies have demonstrated a 70% response rate in enrolled patients with Treatment-Resistant Major Depressive Disorder. The majority of patients begin to see a shift in their symptoms around the 4th loading phase infusion.

Will Ketamine cure my depression?

There is no cure for depression. Ketamine is effective at alleviating the symptoms of Major Depressive Disorder. It is recommended that patients receive counseling and continue the psychiatric medications they are currently taking. It is also recommended that patients abstain from alcohol during treatment.

How will I know when I need maintenance infusions?

The Maintenance Phase is individualized to each patient's needs. The duration of symptom alleviation following the Loading Phase is unique to each person. There are currently no scientific studies demonstrating a universally applicable maintenance schedule. Each patient's cadence of maintenance clarifies itself over time though discussions with their provider and personal introspection. When patients begin to feel a return of their symptoms, they are advised to have a maintenance infusion.