

This guide is for educational purposes only and not intended as medical advice. If you have a serious clinical condition, please consult a mental health professional.

WHAT IS A MICRODOSE?

A microdose is a small, sub-perceptual dose of a psychedelic medicine. The two most common substances used for microdosing are LSD and psilocybin mushrooms.



Microdose of LSD:
8-12 micrograms
See more on how to prepare LSD here



Microdose of psilocybin mushrooms:

0.1 - 0.3 grams dried mushrooms

See more on how to prepare psilocybin for microdosing here

WHY MICRODOSE?

A high dose of psychedelics can be destabilizing for some individuals. A microdose is sub-perceptual—it is not what many would consider a "trip" and you will not feel "high". It is a low-risk approach you can integrate into daily life.

THE DIFFERENCE BETWEEN MICRODOSING LSD AND PSILOCYBIN



LSD: Generally more energizing and motivating. It gives a gentle, uplifting boost and can help people with depression get out of the "hole" they may find themselves in.



Psilocybin: Generally makes you feel more connected and grounded. Many find it better for anxiety and emotional healing.

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HOW DOES MICRODOSING WORK?

In daily life, we have a "default mode" we use to engage the world. It is made of several interconnected areas in the brain. Neuroscientists call this "**Default Mode Network**" or DMN. This is your brain's network of habits, thought patterns, and unconscious beliefs.

Bestselling author Michael Pollan uses the metaphor of ski tracks: Our mind often gets stuck in the deep ruts of old ski tracks. We think the same thoughts, repeat the same actions, and can't see solutions to our problems.

Psychedelic medicines give your mind a "fresh layer of snow". This gives you the freedom to go in new directions and create new, more positive "tracks" in your brain.

WHAT DOES MICRODOSING DO FOR ADD/ADHD?

At the root of the symptoms of ADD and ADHD is a neurotransmitter called **norepinephrine**, or NE.

One of NE's many roles is to increase attention and focus. Brains with ADD/ADHD typically do not have enough NE¹. However, neuroscientists have found that psychedelics like LSD and psilocybin heighten sensitivity to NE.² This boosted sensitivity gives people with ADD/ADHD improved access to the NE released in their brains, enhancing alertness, concentration, and reaction times.

While there are currently no definitive clinical studies on microdosing for ADD or ADHD, there is compelling data. Pioneering researcher Dr. James Fadiman³ collected self-reported microdosing data for over 10 years. He found 31% of microdosers were self-treating for ADD/ADHD.

Backing up this conclusion is another study on people with ADD/ADHD that compared the self-reported effect of microdosing to conventional ADD/ADHD medications.⁴ While only 40% of people on conventional medications said their "symptoms disappeared", a full 80% of microdosers said the same.

THE RISKS

While there is no definitive clinical data, microdosing appears to have few risks. However, in cases of serious mental illness, microdosing could have unpredictable, adverse effects. We do not recommend microdosing if you have a history of schizophrenia, psychosis, bipolar disorder, or severe anxiety.

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GENERAL GUIDELINES FOR MICRODOSING



INTENTION: Psychedelics tend to amplify what you focus on. When you create a clear intention, you prime yourself to experience positive results.



SET AND SETTING: Microdosing in a poor environment or an upset state can lead to a negative experience. This makes it important to create a relaxed, comfortable environment for yourself. This includes your physical, social, and internal environments.



LESS IS MORE: You shouldn't feel "high" when you microdose. Higher doses can temporarily increase symptoms of anxiety and mental disturbance.



START LOW AND GO SLOW: Finding what works for you is a process of discovery and refinement. Start with low doses and slowly increase to find your optimal dose.



TIMING: It is best to microdose in the morning because it can disturb your sleep patterns. Microdose no more than 2-3x per week with at least two days between doses. This way, you can observe the effects and avoid building up a tolerance.



TAKE BREAKS: Every 6-8 weeks, take a break from microdosing. Assess how things have shifted since you started. This also helps prevent becoming psychologically dependent on it to "feel good".

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GOING DEEPER WITH MICRODOSING

While microdosing for ADD/ADHD opens up a very real possibility to ween off conventional ADD/ADHD medications, there is much more to getting sustainable results over the long-run than we can cover in a simple guide.

Microdosing is a tool, not a magic pill. Like any tool, you can use it skillfully or carelessly. As with many things, the best way to get meaningful results is with expert guidance.

If you would like to take your microdosing journey to the next level, we invite you to check out the Third Wave Microdosing Course here.

You'll get a step-by-step, science-based system for your first 30 days of microdosing specific to managing ADD, focus, creativity, and accelerated personal and spiritual development. You also get exclusive access depth-videos, proven integration techniques, interviews with psychedelic thought leaders, and much more.

Dive deeper with Third Wave's Microdosing Course



Sources:

- The neurobiological basis of ADHD: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3016271/
- Neurophysiological effects of hallucinogens on serotonergic neuronal systems: https://pubmed.ncbi.nlm.nih.gov/7177511/
- 3. James Fadiman, The Psychedelic Explorers Guide, 2011.
- 4. Self-Rated Effectiveness of Microdosing With Psychedelics for Mental and Physical Health Problems Among Microdosers: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6753862/



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