We have noticed the publication of a series of small, short-term studies using the ketamine for such varied conditions as suicidal ideation in depression (1), post-traumatic stress disorder (2), and treatment-refractory depression (3). These brief and inconclusive reports have been picked up throughout the internet portraying these uses as “a cure for depression” and “promising therapy for mental illness.” Stories about these preliminary findings have been published with an uncritical eye in such large global internet portals as Huffington Post (4), National Public Radio (5), and CBS (6) for the public and MedPage (7) for physicians.

We believe that this widespread, uncritical coverage of ketamine use could be misleading and damaging for patients, particularly since the drug is readily available worldwide as the illegal club drug “Special K”. As a result of overly positive reports about the drug in such common conditions, the risks of the epidemic of “Special K” use could be greatly increased. Because of the wide illegal access to the drug, patients could self-medicate and incur the serious side effects and long-term effects of the drug.

“Special K’s” active ingredient, the anesthetic ketamine, is an NMDA receptor inhibitor, which still finds some legal use in the US in spite of its prominent hallucinogenic and cognitive impairment side effects; however, by far the broadest use of the drug in the US is from preparations of “Special K” smuggled illegally from Mexico.

We would like to point out an important article concerning “Special K” in a column in the Journal of Thoracic Disease (JTD) (8), for which we are editors. This column, “Between You and Me”, publishes articles from practicing physicians and patients with their observations, thoughts, and experiences concerning medicine.

Dr. Peng Wu of Guangzhou wrote concerning several of her urologic patients who had severe psychiatric and urologic sequelae from long term “Special K” use. His urgent warnings about these problems with the recreational club use of the addictive “Special K” produce a very different view of the widespread, uncritical promotion of small, short-term, inconclusive studies of this agent in situations in which its specific mechanism of action in treating these conditions is certainly not well understood. Since these studies were industry-supported and the authors acknowledge conflicts of interest, the appropriateness of global promotion of the findings at this early stage is questionable.

The purpose of the “Between You and Me” column is to publish such important observations and perspectives of physicians and patients about the realities of medical care and not just the hopes for possible benefit. Dr. Wu’s observations have great value for all, and we welcome others’ views that will provide valuable information for our readers. Clinical trials are not the only kind of article that needs to be published in a medical journal.


4. Ketamine Depression Cure? ‘Special K’ Treats Symptoms Within Hours, Study Reports. Available online: http://www.huffingtonpost.com/2013/05/22/ketamine-cures-depression-study_n_3322006.html


7. IV Ketamine Rapidly Effective in PTSD. Available online: http://www.medpagetoday.com/Psychiatry/AnxietyStress/45314?xid=nl_mpt_guptaguide_2014-04-17&utm_source=guptaguide&utm_medium=email&utm_content=mpt&utm_campaign=04|17|2014&userid=500170&cun=g5625789d10r&email=lgrouse@uw.edu&mu_id=5625789