Enjoying the years in your life: An interview with George McBride, CCO at Clerkenwell Health

Paul Ferretti spoke to George McBride, CCO at Clerkenwell Health, about psychedelic treatments, innovating in mental health and living a better life.

Temps de lecture : minute

25 October 2023

Could you tell our readers more about Clerkenwell Health's mission?

At <u>Clerkenwell Health</u>, we're laser focused on helping people access the latest in mental health treatment. Alike many people, we're very concerned that the prevalence of mental health conditions is growing and efficacy of the available treatment is very low. As a matter of fact, we feel like treatments, infrastructure and outcomes for mental health conditions are all stuck in the 80s. On the other hand, we have seen huge innovation and change for physical healthcare in the last 40 years.

We want to help patients access new treatments that are in development or that have recently been approved. The flipside of that is that, as well as helping patients, we want to help companies that are developing new mental health treatments. We think that the infrastructure they have to work with to research treatments isn't good enough. We are therefore trying to develop more capacities to develop and research innovative mental health treatments with a focus on psychedelics.

How can psychedelic assisted treatments treat complex mental health conditions?

There's been research into psychedelics and their potential to treat mental health conditions in the modern scientific world since the 1950s, and there's been use of these by different communities since immemorial times. Nevertheless, we're still trying to figure out the method of action and how these work.

The accepted theory at the moment is the one pushed by *Robin Carhart-Harris* and others, saying that it is a matter neuroplasticity.

Neuroplasticity is the action of increasing the flexibility in your mind through psychedelics and allowing you to develop new patterns of thought and behaviours. We think that a lot of mental health conditions are linked to negative patterns of thought and rumination that create negative behaviours, whether it's obsessive compulsive disorder, anxiety disorder, depression, and trauma based disorder. There is still a lot of work going in how important the therapy is, how important the care is, but what we're well aware of is that it's how you actually care for patients that has a huge impact on the outcome of treatments.

For example, the *Imperial College London* did a study comparing escitalopram, which is an SSRI (Selective serotonin reuptake inhibitor) with therapy, to psilocybin, a component of magic mushrooms, with therapy. Their conclusion was that, more than anything else, it's actually caring for the patient that helps a lot. But there is also the question of how much the psychedelics are the essential part of it. Most of these treatments are still in development so we don't know everything about how they work yet.

What was the idea that gave birth to Clerkenwell Health?

My co-founder <u>Dr. Henry Fischer</u> and I both worked for the <u>Beckley Foundation</u> in 2014/2015, which is a research institution that has funding psychedelic research for decades. We both got very interested by the university-like research that was being done in the UK and the USA, and we were both very excited about the potential of these treatments. We successfully campaigned for the legalisation of medical cannabis in the UK, through a non profit organisation that we were founding members of called *Volteface*.

In 2019, we realised there was a commercial interest in developing psychedelics. We wanted to do our own work and we started to look at the options of where we could run our clinical trials, but we didn't think that any of them were good enough. They were either too busy, or they were a small room on the end of a psychiatric ward of a university hospital. We didn't think they were ideal places to be having psychedelic experiences, and there were simply not enough people trained on how to deliver these treatments.

Instead of trying to develop our own drug, we wanted to focus on actually helping patients access these treatments and helping the companies that were already already funded to research them. We wanted to do something that lifted all boats, something that was for the greater good of the whole research field, and we thought the thing to focus on was building research capabilities and improving patients' access to these treatments. That is why we started to build Clerkenwell, i.e. clinics in which people can receive these treatments, training therapist who can deliver these treatments, and building a team of scientific and regulatory experts that can design and manage the research.

How big is the Clerkenwell Health team?

We're 23 full time members of staff, which is still comparatively small for a clinical research business, but we want to grow through partnerships. We want to keep the team quite small and focus on what we do.

We've got 8 people on the site in Central London, which includes a psychiatrist, a medical doctor, mental health research nurses, administrative staff, equality managers and a pharmacist, and in the head office we've got the commercial business development team and the scientific and regulatory team.

What is the biggest challenge your company has been facing so far?

It's very difficult trying to actually build an alternative model for mental health, where you're trying to help people, not by giving them daily drugs that have an obvious benefit to the pharmaceutical companies selling them. This is a much harder thing to try and make work in a capitalist world.

We really want to help people access these medicines but we are also very focused on how you do that in a way that makes financial sense for the people who are involved, so it can go on and work in the long run. It is not an easy thing to try and make this make sense for everyone, i.ie. the patients and everyone involved in developing the drugs, financially as well as therapeutically.

Do you think your company's results and new discoveries will encourage more

hospitals, universities and drug developers to improve researches regarding psychedelic assisted treatments?

I think so. We've already had a huge amount of interest from Brussels, individual clinicians and researchers who want help setting up the facilities to do this sort of research, and we've already started helping some of those organisations get ready to run this kind of research. Building this has definitely has helped a lot of people to be encouraged to do this kind of work, and we hope that we can be helping more clinics and NHS sites to get upscaled in order to do this kind of treatment.

Would you have any advice for other entrepreneurs?

Nothing is as straightforward as you ever think it will be. What's challenging is often the people. Working on your people skills is the most important thing you can do as an entrepreneur. It's easy enough to build a model or a business plan, but doing things in the real world means building relationships and dealing with people. Humans are ultimately the most complicated part of anything.

Is there someone who inspires you?

There are a lot of people who inspire me. I'm usually inspired by people of science, in particular *Roland Griffiths*. He was one of the pioneers of this research field, and has worked on some of the early research into psychedelics treatments to help people with end of life anxiety. People with terminal illnesses struggle to come into terms with their own mortality. He himself was dealing with a terminal cancer diagnosis, and had some of the most inspiring attitude towards his own mortality.

I think that's particularly interesting, because a lot of healthtech startups at the moment are focused on longevity, which is all about keeping people alive for longer, playing on their fear of death. What I like about psychedelic research, is that it's not about the years in your life, it's about the life in your years. It's about living well, not about living longer. It's death that makes life meaningful. If psychedelic can help people better come to terms with their own mortality, then that's a fantastic thing.

Somebody else who inspires me is my grandmother. She is 95 years old, and she went to hospital for the first time when she was 93. She gave birth to 4 children in her own house, on the floor, and was also born on the floor of her own house. Growing up in Ireland at the time, she didn't have neither electricity nor central heating in her house, but still managed to reach the age of 93 before she went to hospital. I'm 36 but I've been to hospital about 93 times! She's got genes I would love to have. Moreover, she's still living a very productive happy life at 95. She shows that living longer is worth it if you enjoy life all the way until the end of the journey.

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George McBride is CCO at Clerkenwell Health.

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