Mindfulness for Anxiety, Depression & Wellness

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Meta-analysis: MBI’s for anxiety and depression

- Allows multiple studies to be combined to quantify treatment effect
- 39 studies met criteria for the analysis, primarily MBSR and MBCT studies
- Two types of studies: anxiety or depressive disorders, and other clinical disorders such as chronic pain and cancer

Hoffman et al. 2010
Meta-analysis cont’d

Effect sizes showed MBI’s were moderately effective

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<tr>
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<th>Effect Size</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Anxiety</td>
<td>Depression</td>
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<tr>
<td>All studies</td>
<td></td>
<td>.63</td>
<td>.59</td>
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<tr>
<td>Specific populations</td>
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<td>.97</td>
<td>.93</td>
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Hoffman et al. 2010
Depression treatment & relapse

• Treatment guidelines recommend antidepressant treatment for 6-12 mos. beyond remission of symptoms, but often not followed or patients stop treatment

• Majority of patients have incomplete response, non-response, recurrence, or drop out of treatment

• With each recurrence likelihood of future recurrence increases
MBCT

• Segal, Williams, Teasdale research on depression relapse:
  – *Cognitive reactivity* to sad moods was a predictor of recurrence
  – With each recurrence, milder sadness and ruminative thinking could trigger recurrence
MBCT

- Format similar to MBSR:
  - 8-week classes of 2.5 hrs/wk,
  - Participatory psychoeducational group
  - Classroom and home practice, 1-day retreat
  - Mindfulness practices
MBCT

• Adaptations
  – ↑ emphasis on cognitions – decentering, seeing thoughts as passing mental events, how they influence feelings and behaviors
  – Explicit instructions to practice acceptance rather than judgment or avoidance
  – Classroom discussion focus on depression rather than stress or pain
MBCT

• Adaptations
  — Relapse Prevention Action Plan – awareness of signs of relapse, more flexible, deliberate responses when they arise
  — 3-minute breathing space – facilitate practicing present moment awareness in upsetting everyday situations
<table>
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<tr>
<th>Depression patterns</th>
<th>MBCT skills</th>
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<tbody>
<tr>
<td>Automatic mode</td>
<td>Intentional mode</td>
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<tr>
<td>Avoidance</td>
<td>Curiosity, acceptance</td>
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<tr>
<td>Thinking about implications</td>
<td>Direct experience</td>
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<tr>
<td>Judging/fixing</td>
<td>Non-doing</td>
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MBCT

Developing ability to directly experience difficulties

- Raisin
- Body scan
- Mindful walking/stretching
- Sitting with breath
- Sitting with sounds
- Sitting with thoughts
- Sitting with difficulty
Mindfulness-based cognitive therapy (MBCT)

Antidepressant Monotherapy vs Sequential Pharmacotherapy and Mindfulness-Based Cognitive Therapy, or Placebo, for Relapse Prophylaxis in Recurrent Depression

Zindel V. Segal, PhD; Peter Bieling, PhD; Trevor Young, MD; Glenda MacQueen, MD; Robert Cooke, MD; Lawrence Martin, MD; Richard Bloch, MA; Robert D. Levitan, MD
Segal, et al 2010

• N = 160 with > 2 MDE’s

• 2-step antidepressant treatment algorithm

• Maintenance phase: remitters (52.5%) assigned to 1 of 3 study conditions:
  – M-ADM
  – MBCT + ADM taper
  – Pla + Clin

• 18 month follow-up
• Significant interaction between persistent depressive sx in remission and prevention of relapse p=.03

• Patients with HAM-D > 7 in remission, response to MBCT and M-ADM comparable – 73% decrease compared to placebo p=.03.

• Patients who were asymptomatic in remission had no difference
MBCT for prevention of recurrence

• Evidence-based practice

• Comparable to maintenance Rx

• Included in the UK’s National Institute for Clinical Excellence Clinical Practice Guidelines for Depression
Wellness

• Chronic or repeated activation of the stress response leads to health problems and reduces quality of life

• Wellness involves self-knowledge and self-education about one’s health and active engagement in activities to promote health

• Improved emotional well-being and quality of life
Wellness

• Learning to pay attention and be present with experience –
  – Decreases automatic reactions and stress
  – Encourages health-promoting behavior changes – informed exercise, nutritional awareness, and improved sleep
  – Promotes changes in unhealthy behaviors – smoking, emotional eating, and alcohol/drug use
MBI’s for health behaviors

- MB-EAT
- MBRP
- Mindfulness training for smoking cessation
- MBT-I Mindfulness-based therapy for insomnia
Mindfulness-based approach to wellness

- Holistic – physical, mental and spiritual
- Strength-based – inner resources to promote one’s own well-being
- Participatory – consistent with person-centered planning partnership in supporting a “culture of wellness” for all stakeholders
References


Mindfulness- and Acceptance-Based Behavioral Therapies in Practice (Guides to Individualized Evidence-Based Treatment) by Lizabeth Roemer and Susan M. Orsillo, New York: Guilford. 2008.


MBCT website developed by Segal, Williams, Teasdale [http://www.mbct.com/Index.htm](http://www.mbct.com/Index.htm).
