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## Mindfulness therapy is no fad, experts say

*There is solid evidence that mindfulness therapy, which combines elements of Buddhism and yoga, can relieve anxiety and improve mood.*

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Of all fields of medicine, psychology seems especially prone to fads. Freudian dream analysis, recovered memory therapy, eye movement desensitization for trauma — lots of once-hot psychological theories and treatments eventually fizzled.

Now along comes mindfulness therapy, a meditation-based treatment with foundations in Buddhism and yoga that's taking off in private practices and university psychology departments across the country.

"Mindfulness has become a buzzword, especially with younger therapists," said Stefan Hofmann, a professor of psychology at Boston University's Center for Anxiety and Related Disorders.

Mindfulness therapy encourages patients to focus on their breathing and their body, to notice but not judge their thoughts and to generally live in the moment. It may sound a bit squishy and New Agey to some, but Hofmann and other experts say mindfulness has something that discredited theories of the past never had: solid evidence that it can help.

"I was skeptical at first," Hofmann said. "I wondered, 'Why on Earth should this work?' But it seems to work quite well."

Hofmann and colleagues burnished the scientific credentials of mindfulness therapy with a review article in the April issue of the Journal of Consulting and Clinical Psychology. After combining results of 39 previous studies involving 1,140 patients, the researchers concluded that mindfulness therapy was effective for relieving anxiety and improving mood.

The treatment seemed to help ease the mental stress of people recovering from cancer and other serious illnesses, but it had the strongest benefits for people diagnosed with mood disorders, including generalized anxiety disorder and recurring depression.

Jordan Elliott, a 26-year-old marketer for a New York publishing company, said mindfulness training had helped pushed his once-disabling anxiety — about work, the weather, the meaning of life — into the background. "The anxiety is still there, but it's not as bad as it was," he said.

Elliott started getting one-on-one therapy four years ago at the American Institute for Cognitive Therapy in New York. It was hard at first, partly because he was skeptical of the technique and partly because he didn't feel particularly mindful. "I was such a nervous wreck I could hardly sit still for three minutes," he said.

Now he starts every day with a 10-minute meditation. He sits cross-legged in his apartment, TV and music off, and thinks about his breathing.

"When a negative thought pops off in my head, I say to myself, 'There's a thought. And feelings aren't facts.' "

Elliott said he was taking Prozac before he started mindfulness therapy, but he no longer needed medication to keep his anxiety under control.

"It's pretty clear that people can improve their health if they can encourage this practice in their lives," said David Fresco, an associate professor of psychology at Kent State University in Ohio. "But we have to be careful not to move beyond the data too quickly."

Fresco warns that mindfulness treatment is unlikely to help someone suffering from severe and ongoing depression. Those patients, he said, need a more active approach to recovery, perhaps including antidepressants and cognitive behavioral therapy, a type of counseling that encourages patients to question the validity of their negative thoughts.

Once recovery from depression begins, however, mindfulness therapy could provide a valuable defense against future episodes, said Zindel Segal, a professor of psychiatry at the University of Toronto who was one of the pioneers behind mindfulness-based cognitive therapy, or MBCT, a treatment that combines mindfulness with cognitive behavioral therapy.

In December, Segal and colleagues published a study in the Archives of General Psychiatry suggesting that the treatment was as effective as antidepressants for preventing relapses of depression.

The study involved 84 patients who had recovered from at least two bouts of major depression. The patients were broken up into three groups: One had eight weekly group sessions of the therapy, one took an antidepressant and one took a placebo. Over 18 months, about 70% of patients taking a placebo suffered at least one more episode of depression. By comparison, only about 30% of patients receiving therapy or taking an antidepressant had a setback.

Segal said mindfulness therapy could help patients avoid rumination, the process of endlessly chewing on incidents from the past. Rumination is a driving force behind depression, he said, and it just doesn't mesh with mindful thinking. He also believes that by encouraging patients to focus on their current thoughts, mindfulness can discourage anxiety and worry — up to a point.

"If you're having panic attacks in the mall, mindfulness therapy on its own isn't going to be enough," he said.

Segal adds that mindfulness treatment changes the relationship people have with their emotions, so much so that shifts in brain activity even show up in magnetic resonance imaging tests.

"When your mind has a thought, such as, 'My colleague just insulted me at the office,' you can explore the consequences of that thought," he said. "Thoughts have a less intense grip because you are an observer."

Hofmann said most patients could pick up mindfulness fairly easily, but it's not for everyone.

"It takes quite a bit of intelligence," he said. "It's good for people who like intellectual stimulation."

In addition, children, older people (who tend to be more set in their ways) and rigid thinkers may have trouble understanding or embracing the treatment, he said.

Hofmann hopes that the ongoing flood of mindfulness studies will help clarify the benefits and limitations of the approach and ultimately shape the way that the therapy is offered in the real world.

"Some therapists embrace these new and sexy treatments without a lot of critical thinking because they sound cool," he said.

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