# Mindfulness-based interventions for co-occurring mental health and addictive disorders

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# ASAM Disclosure of Relevant Financial Relationships 27th Annual Cape Cod Symposium on Addictive Disorders

#### Presentation: Mindfulness-based interventions for cooccurring mental health and addictive disorders

#### 9/13/14

Name	Commercial Interests	Relevant Financial Relationships: What Was Received	Relevant Financial Relationships: For What Role	No Relevant Financial Relationships with Any Commercial Interests
Carl Fulwiler				X



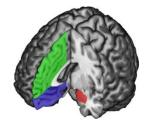
# **Emotion dysregulation in mental health and addictive disorders**



What is mindfulness and how is it used in treating mental disorders and addiction?



Overview of the core elements of MBCT & MBRP and how they differ



How does it work?

# **Emotion regulation deficits**



A person with social anxiety clenches her hands to avoid shaking as she tries to answer a professor's question. A person with alcohol dependence drinks himself into oblivion following a bitter divorce. A person with bulimia has a spat with a friend and then gorges herself, all the while feeling out of control. A person with obsessive-compulsive disorder feels intense anxiety and washes his hands until they bleed. A person with depression fights back tears during an unpleasant work meeting.

Werner & Gross (2009)
In Kring & Sloan (Eds) Emotion Regulation and Psychopathology. Guilford, NY

- Mood and anxiety disorders, borderline and antisocial personality disorders, PTSD, alcohol and drug use disorders
- Nearly 200 DSM diagnoses involve emotion dysregulation



Fad or breakthrough?

### **Habits of mind and behavior**

**Auto-pilot** 



**Multi-tasking** 



Past ← ? → Future

#### A definition of Mindfulness

The awareness that emerges from paying attention on purpose and non-judgmentally to the unfolding of experience from moment to moment

# Mindfulness = Focused Attention + Open Monitoring

Focused attention – directing and sustaining attention on a chosen object, noticing when mind wanders – disengaging and redirecting to object of attention

Open monitoring – non-directed, non-reactive moment to moment awareness of all aspects of experience



#### Models of clinical interventions

Dialectical Behavior Therapy (DBT) and Acceptance and Commitment Therapy (ACT):

- CBT-based with training in mindfulness skills
- Mindfulness one component among several
- Guided exercises vs. formal meditation

#### Models of clinical interventions

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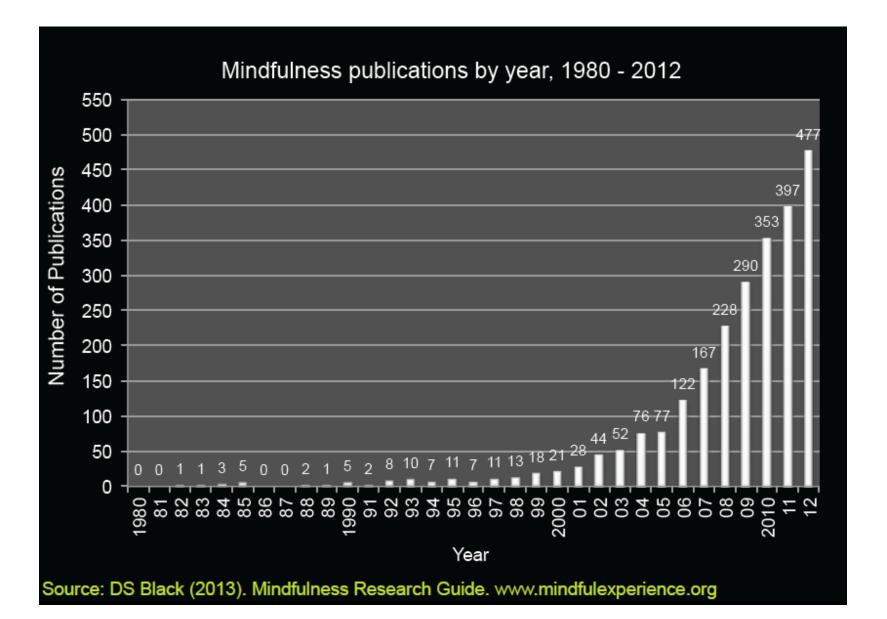
- CBT-based with training in mindfulness skills
- Mindfulness one component among several
- Guided exercises vs. formal meditation

#### Practice is at the core of MBSR, MBCT, MBRP:

- Teaching formal meditation practices
- Daily practice 30-45 min.
- Teachers have extensive personal practice & formal training in retreat setting

### **Mindfulness-Based Stress Reduction**







# Meditation Programs for Psychological Stress and Well-Being

#### **Original Investigation**

### Meditation Programs for Psychological Stress and Well-being A Systematic Review and Meta-analysis

Madhav Goyal, MD, MPH; Sonal Singh, MD, MPH; Erica M. S. Sibinga, MD, MHS; Neda F. Gould, PhD; Anastasia Rowland-Seymour, MD; Ritu Sharma, BSc; Zackary Berger, MD, PhD; Dana Sleicher, MS, MPH; David D. Maron, MHS; Hasan M. Shihab, MBChB, MPH; Padmini D. Ranasinghe, MD, MPH; Shauna Linn, BA; Shonali Saha, MD; Eric B. Bass, MD, MPH; Jennifer A. Haythornthwaite, PhD

JAMA Intern Med. 2014 Jan 6. doi: 10.1001/jamainternmed.2013.13018

# Goyal et al. 2014 – Methods

- Databases searched: MEDLINE, PsycINFO, EMBASE,
   PsycArticles, Scopus, CINAHL, AMED, Cochrane Library
- Tools used: Systemic review software; random-effects meta-analyses using standardized mean differences (effect size [ES]; Cohen d)
- Only included RCTs with active control groups
- Excluded studies in which meditation was not the foundation – yoga, tai chi, ACT, DBT
- 18, 753 citations title-abstract reviewed, 1,651 full-text articles reviewed 47 trials (N=3515) met inclusion/exclusion criteria

# Goyal et al. 2014 – Results

# Mindfulness meditation programs had <u>moderate</u> <u>evidence</u> of improved anxiety, depression and pain

Outcome	8 weeks	Range	3-6 mos	Range
Anxiety	0.38	[0.12-0.64]	0.22	[0.02-0.43]
Depression	0.30	[0.00-0.59]	0.23	[0.05-0.42]
Pain	0.33	[0.03- 0.62]		

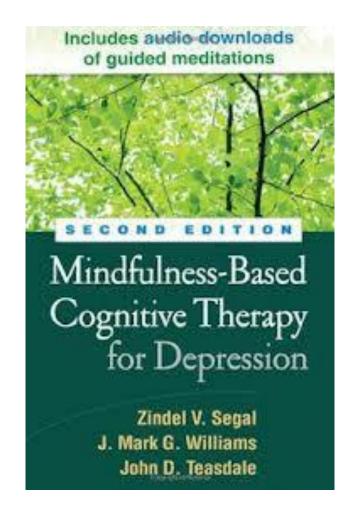
# Goyal et al. 2014 – Results

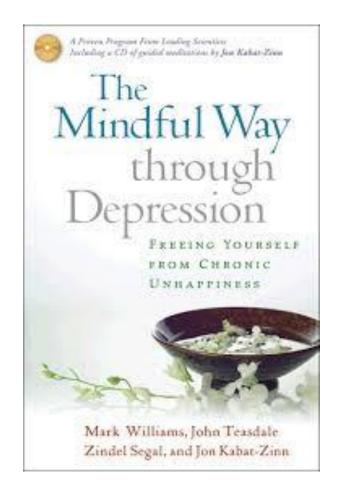
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- Insufficient evidence of effect on <u>substance use</u>\*
- No evidence mindfulness better than active treatment (drugs, CBT and other behavioral therapies)

### Mindfulness-based cognitive therapy for depression

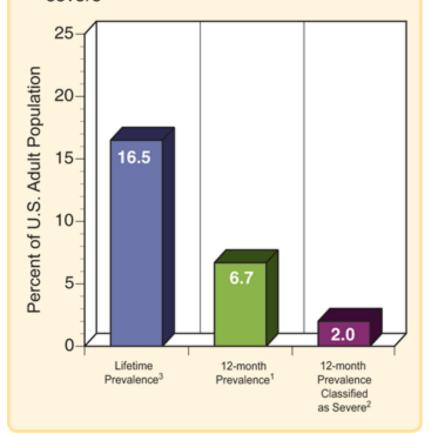




# **Depression**

#### **Prevalence**

- 12-month Prevalence: 6.7% of U.S. adult population<sup>1</sup>
- Severe: 30.4% of these cases (e.g., 2.0% of U.S. adult population) are classified as "severe"<sup>2</sup>



- The leading cause of disability in the U.S. for ages 15-44
- 2<sup>nd</sup> leading cause of disability worldwide

WHO The Global Burden of Disease, 2008

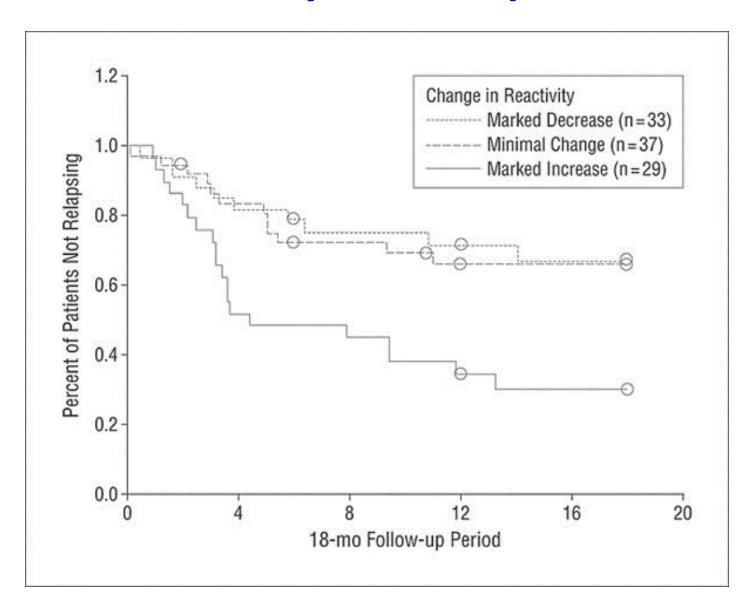
# Depression treatment outcomes and recurrence

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

With each recurrence likelihood of future recurrence increases

Alternatives to long-term antidepressant medication?

# **Emotional reactivity and Relapse**



ELSEVIER

Contents lists available at ScienceDirect

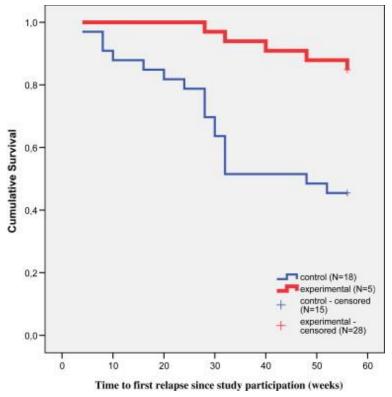
#### Behaviour Research and Therapy





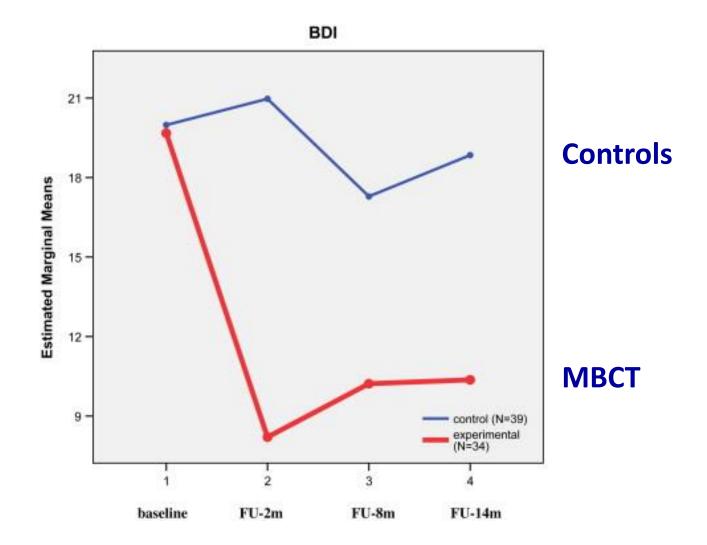
The effects of mindfulness-based cognitive therapy on recurrence of depressive episodes, mental health and quality of life: A randomized controlled study

#### K.A. Godfrin, C. van Heeringen\*



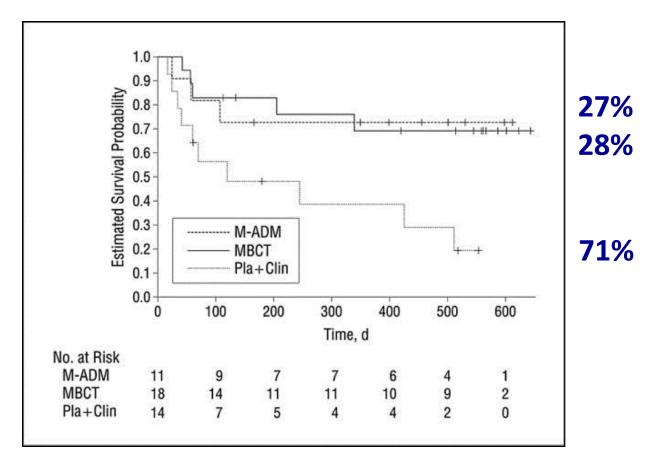
#### **Survival Analysis**

# Improved depressive symptoms and quality of life



# 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



# **Emerging evidence for efficacy of MBCT for current episodes of depression**

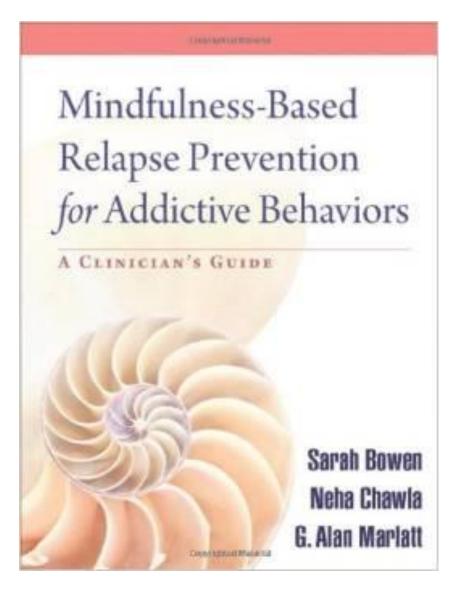
#### **Geschwind 2012 Br J Psychiatry**

- N = 130 randomized to MBCT vs. TAU
- Reduction in depression scores greater with MBCT:
   30-35% improvement vs. 10%, p<.001</li>

#### van Aalderen 2012 Psychol Med

- Subjects with recurrent depression randomized to MBCT+TAU (n=102) or TAU alone (n=103)
- MBCT as effective for patients who were currently depressed as for patients who were in remission

# Addiction like major depression – a chronic, relapsing condition



# Mindfulness-Based Relapse Prevention (MBRP)

- Mindfulness practices with relapse prevention skills training
- Patterned after Mindfulness-Based Cognitive Therapy (Segal et al. 2002)
  - Group format, 8 weekly 2-2.5 hr. sessions
  - Daily home practice w/ CD
- Aftercare or post-detoxification/stabilization

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- Build a lifestyle that promotes mindfulness practice and recovery

### Research on MBRP – Populations studied

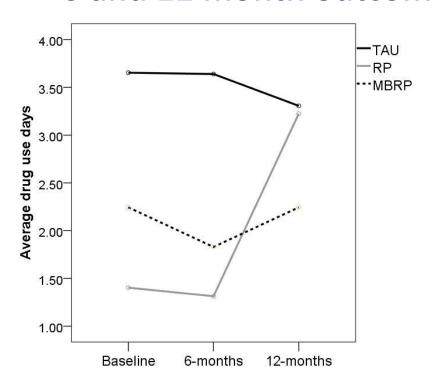
- Adults in outpatient treatment
- Adults who recently completed detox or intensive outpatient treatment
- Incarcerated adults with a history of substance abuse
- Smokers

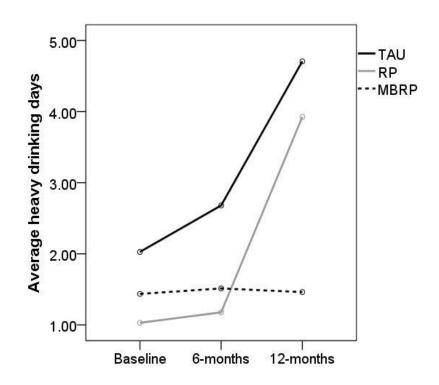
# Research on MBRP: First RCT – Pilot feasibility study (Bowen et al 2009)

- N=168 from community treatment facilities
- Avg. age 40; 71.5% male; 42.1 % ethnic/racial minority
- MBRP vs. RP post-intervention (detox or IOP) vs. TAU
- Pre-post, 2 and 4 month outcomes
- 54% reporting regular meditation practice at 4-month follow-up – 4.7 d/wk, 30 min/session
- 4 month outcomes:
  - days of use 2.1 vs. 5.4 (p = .02)

# Research on MBRP: Full-scale RCT (Bowen 2014)

- RCT N=286 from community treatment facilities
- Avg. age 40; 71.5% male; 42.1 % ethnic/racial minority
- MBRP vs. RP post-intervention (detox or IOP) vs. TAU
- 6 and 12 month outcomes





# Research on MBRP: Full-scale RCT (Bowen 2014)

#### 6 months:

- MBRP & RP significantly longer time to first drug use and heavy drinking (vs. TAU)
- Significantly fewer days of drug use

#### 12 months:

- MBRP significantly fewer days of drug use (vs. RP/TAU)
- Significantly lower probability of heavy drinking
- \* Self-report largely confirmed by drug screens

#### Switch out of:

- Automatic pilot
- Avoidance
- Thinking about
- Judging and fixing
- Reactivity
- Unhealthy habits

#### To:

- Awareness; Intentional mode
- Curiosity and acceptance
- Directly experiencing
- Non-doing and being
- Skillful responding
- Taking care of ourselves and staying well

#### **Class structure:**

- Guided practice
- Inquiry
- Worksheets, handouts, homework

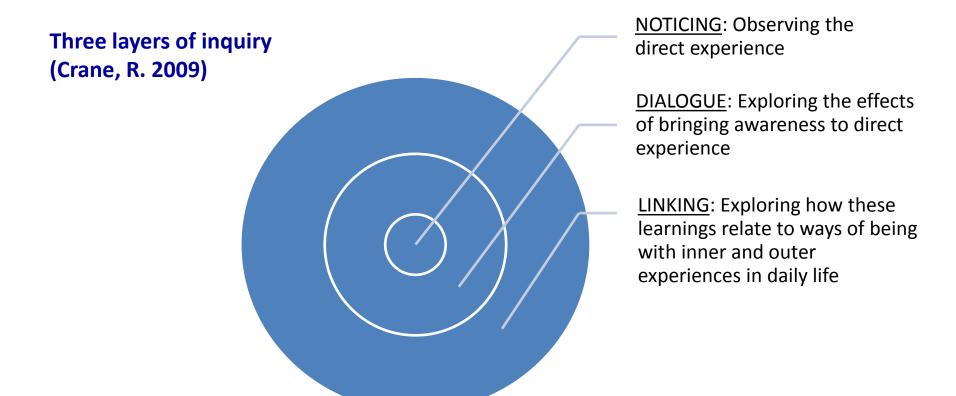
#### **Teaching style:**

- Embodied mindful presence awareness,
   acceptance, compassion reflects personal practice
- Experiential teaching emphasizes investigating experience directly
- Inquiry focuses on present-moment experience vs.
   story-telling and interpretation

#### <u>Inquiry</u>

This requires the instructor to sharpen his/her ability to listen closely, allow space, refrain from the impulse to give advice, and instead, to inquire directly into the actuality of the participant's experience."

Jon Kabat-Zinn, Santorelli 2005



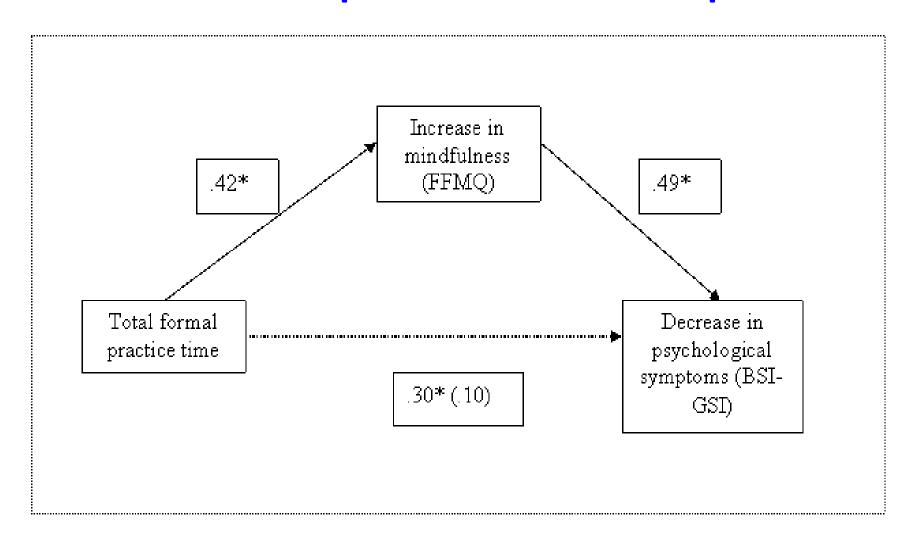
#### **Formal practices:**

- Body scan
- Mindful movement/yoga
- Walking meditation
- Mindfulness of breath/body/sounds/thoughts

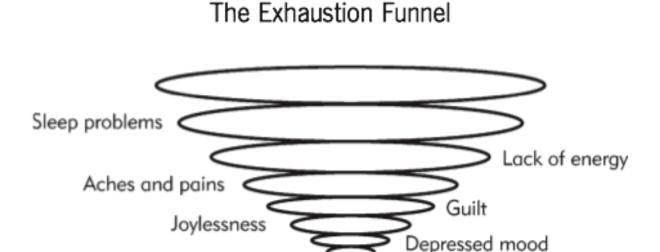
#### **Informal practices:**

- Mindfulness of daily activities
- Moment to moment awareness

# Practice, practice – Formal meditation practice mediates improvement



## Cultivating awareness of the link between activity and mood



Excessive focus on work or other stressors, gradually giving up of activities that we enjoy and nourish us, depletes our energy and resources and leaves us vulnerable to relapse

Exhaustion

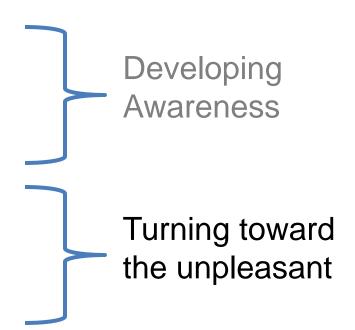
#### **MBCT Sessions**

- 1. Awareness and automatic pilot
- 2. Living in our heads
- 3. Gathering the scattered mind



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- 5. Allowing and letting be
- 6. Thoughts are not facts



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#### Day of practice

- 7. How can I best take care of myself?
- 8. Maintaining and extending new learning

Developing Awareness

Turning toward the unpleasant

Staying well, taking action when mood is low

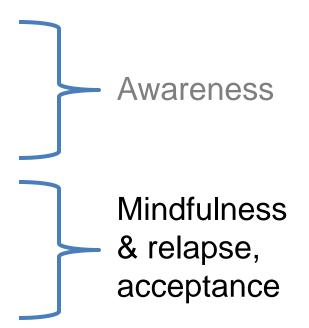
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#### Day of practice

- 7. Self-care and lifestyle balance
- 8. Social support and continuing practice



## **Informal practices**

#### **MBCT**:

- 3 step breathing space
- 3 step breathing space with difficulty

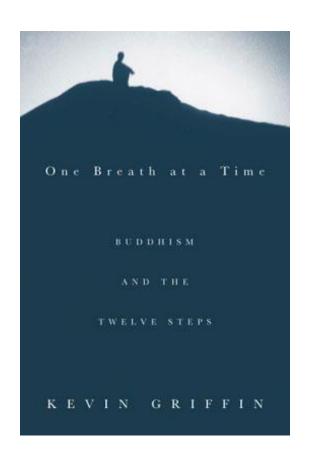
#### MBRP:

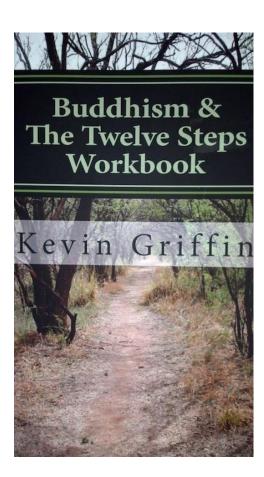
- S.O.B.E.R. breathing space
- Urge surfing

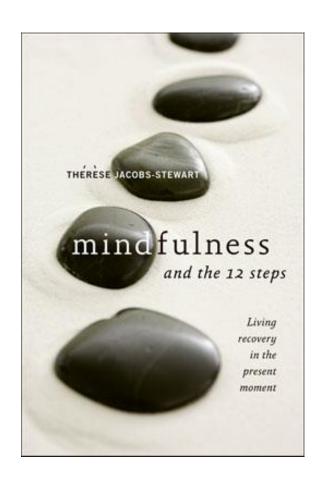
### S.O.B.E.R. Breathing space

- S Stop: pause wherever you are
- O Observe: what is happening in your body & mind
- B Breath: bring focus to the breath as an 'anchor' to help you focus and stay present
- E Expand awareness: to your whole body & surroundings
- R Respond: mindfully vs. automatically









#### Admitted we were powerless over alcohol...

Awareness that we are suffering – that we are the cause of our own suffering and have caused suffering in others

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Accessing deep inner sources of wisdom that we share with all beings

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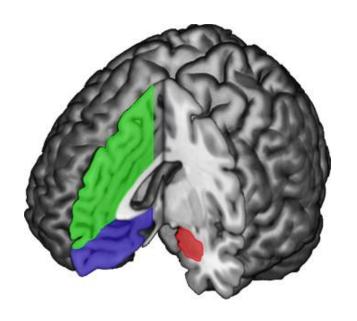
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Accessing deep inner sources of wisdom that we share with all beings

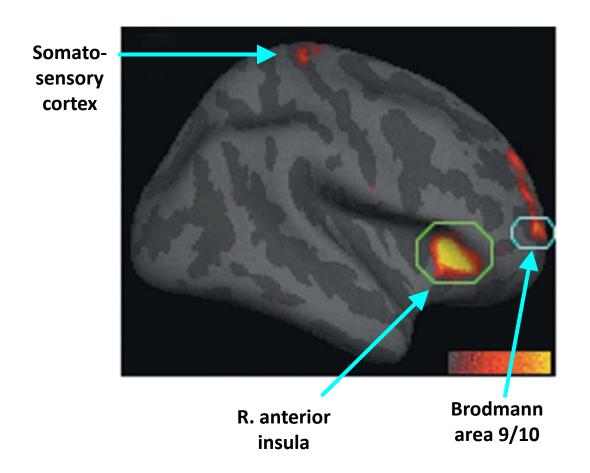
#### Decided to turn if over to a higher power

Letting go of delusions of control, following a wisdom path with an ethical foundation of generosity, compassion and lovingkindness

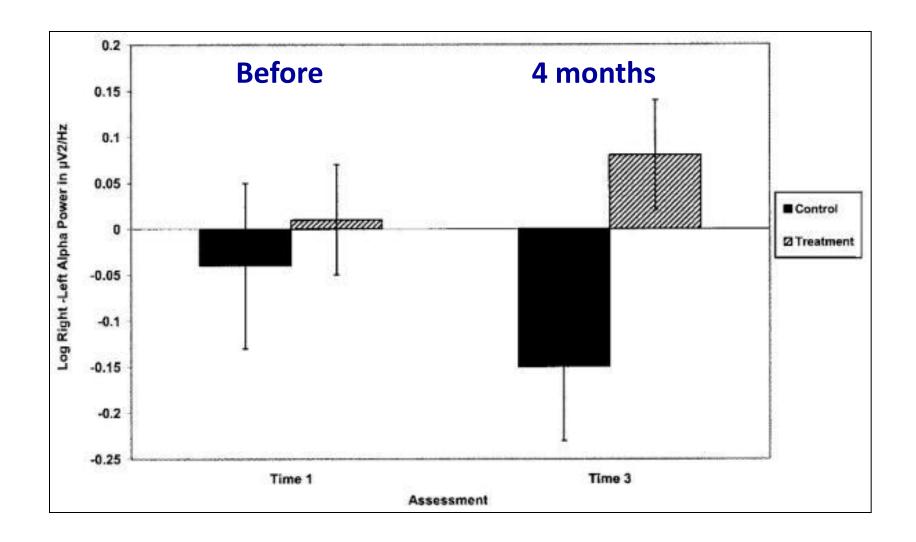
## How does it work?



# Meditation experience is associated with increased cortical thickness in specific areas



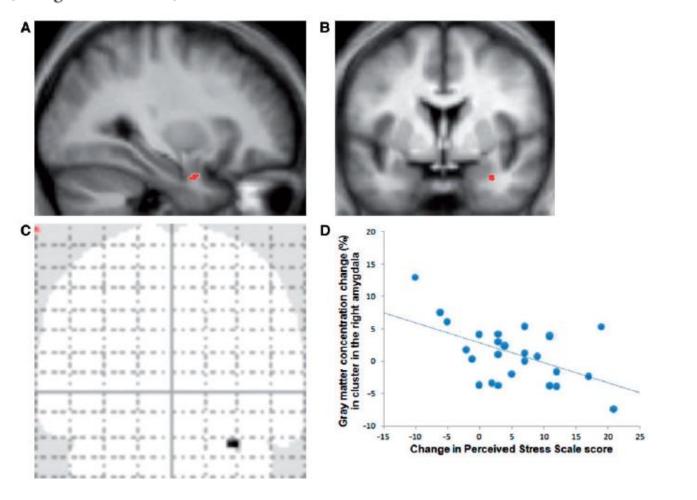
## 8-week MBSR training results in lasting changes in the brain



doi:10.1093/scan/nsp034 SCAN (2010) 5, 11–17

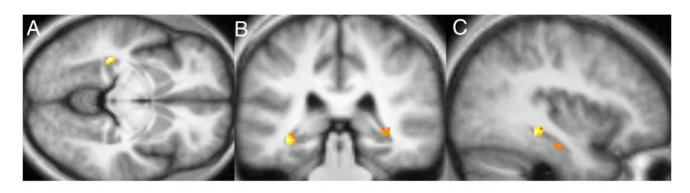
## Stress reduction correlates with structural changes in the amygdala

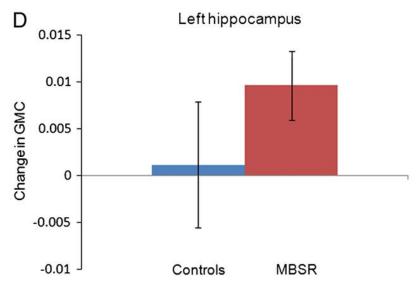
Britta K. Hölzel, 1,2 James Carmody, Karleyton C. Evans, Elizabeth A. Hoge, Jeffery A. Dusek, 5,6 Lucas Morgan, Roger K. Pitman, and Sara W. Lazar



#### Mindfulness practice leads to increases in regional brain gray matter density

Britta K. Hölzel<sup>a,b,\*</sup>, James Carmody<sup>c</sup>, Mark Vangel<sup>a</sup>, Christina Congleton<sup>a</sup>, Sita M. Yerramsetti<sup>a</sup>, Tim Gard<sup>a,b</sup>, Sara W. Lazar<sup>a</sup>





## Minding One's Emotions: Mindfulness Training Alters the Neural Expression of Sadness

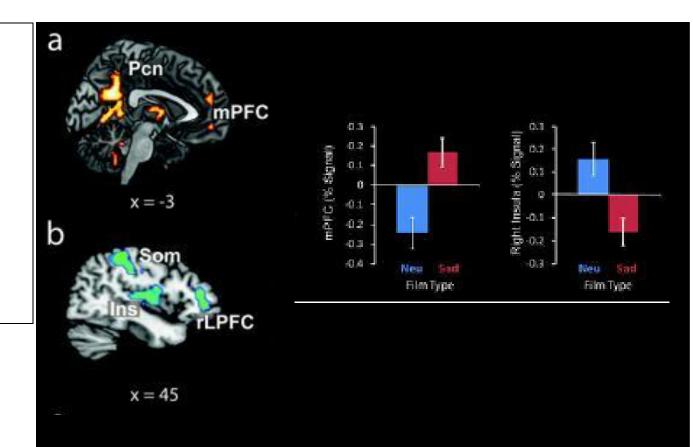
Norman A. S. Farb and Adam K. Anderson University of Toronto Helen Mayberg Emory University

Jim Bean and Deborah McKeon St. Joseph's Health Centre, Toronto, Canada Zindel V. Segal Centre for Addiction and Mental Health, Toronto, Canada and University of Toronto

Sadness provocation elicits:

a) neural <u>activation</u> in midline self-referential processing areas,

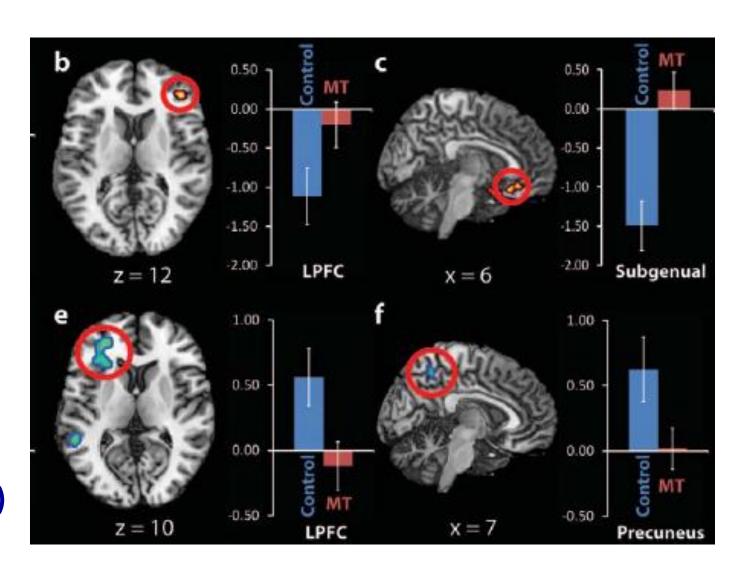
b) <u>deactivation</u> in visceral & somatic processing areas



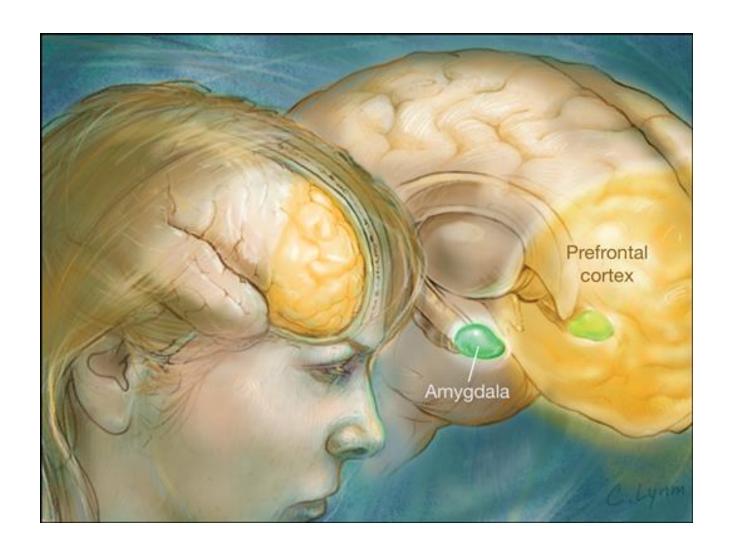
## Mindfulness training reduces neural reactivity

Reduced deactivation (red = MT > control)

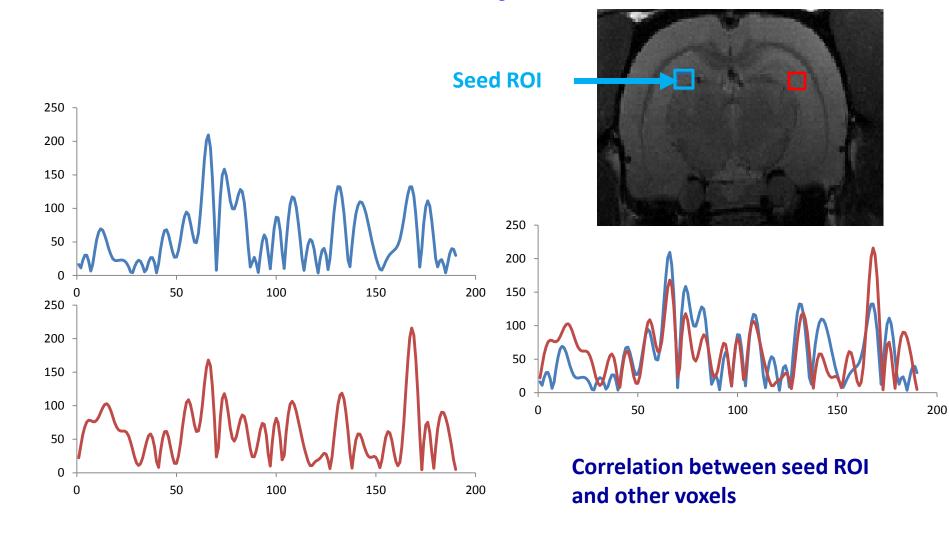
Reduced
activation
(blue =
Control > MT)



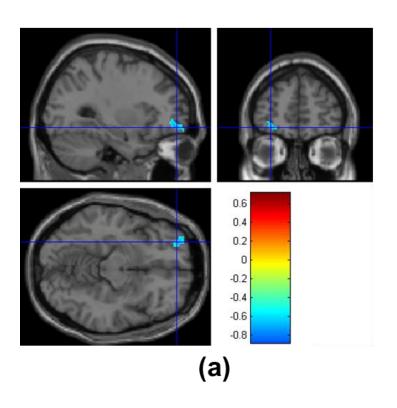
## **Emotion regulation pathways**

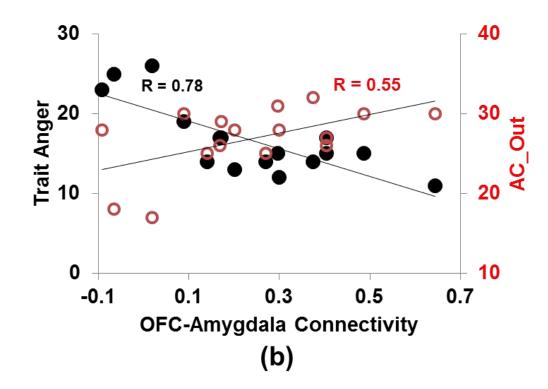


## Resting state fMRI provides a measurement of functional brain connectivity

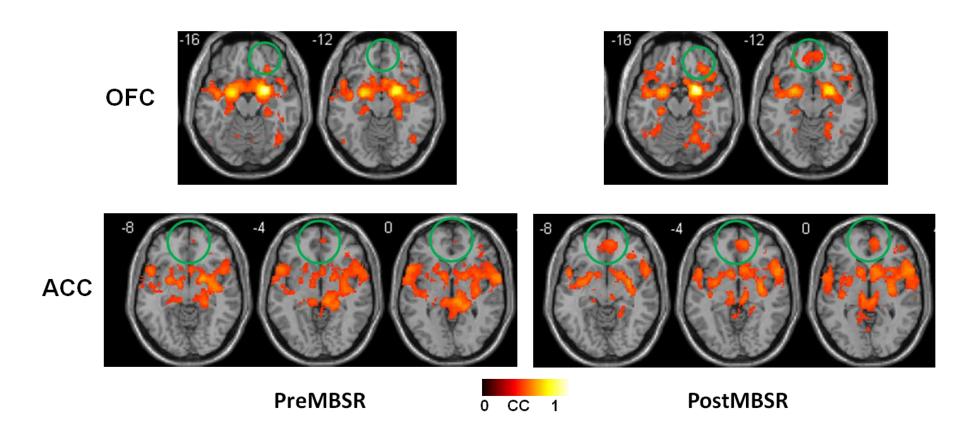


## Amygdala-orbitofrontal functional connectivity is inversely related to trait differences in anger

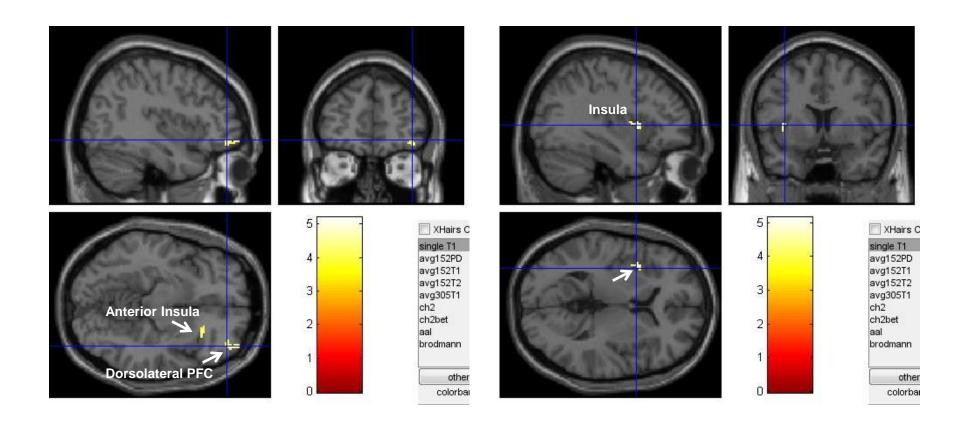




# MBSR training changes amygdala functional connectivity



# Second sample: increased amygdala-prefrontal and amygdala-insula connectivity



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- Rigorous clinical trials have demonstrated the effectiveness of mindfulness for depression, anxiety and prevention of relapse to addictive disorders
- Improved emotion regulation achieved through sustained meditative practice depends on changes in the brain's emotion regulation circuitry
- A mindfulness approach is compatible with the 12 steps

#### **Additional information**

**MBSR UMass Center for Mindfulness** 

umassmed.edu/cfm

**MBCT Oxford Mindfulness Center** 

oxfordmindfulness.org

**Mindfulness-Based Relapse Prevention** 

mindfulrp.com

**Professional training in MBCT and MBRP** 

UCSD Professional Training Inst.

mbpti.org

Omega Inst., Rhinebeck NY

eomega.org

**12 steps and Mindfulness** 

Kevin Griffin

kevingriffin.net

Thérèse Jacobs Stewart

mindroads.com

Buddhist Recovery Network

buddhistrecovery.org

#### **Copy of presentation:**

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Publications and Products -> Presentations -> Wellness



http://www.umassmed.edu/ PageFiles/39837/MindfulnessBasedInterventions.pdf



Questions? carl.fulwiler@umassmed.edu

