

Trial examines mindfulness-based cognitive therapy's effect on anxiety

April 16 2014, by Keith Herrell

Faculty members at the University of Cincinnati (UC) College of Medicine will collaborate on a clinical trial designed to gauge the effectiveness of mindfulness-based cognitive therapy on children and adolescents with anxiety symptoms or mood dysregulation.

Melissa DelBello, MD, a professor in the UC Department of Psychiatry and Behavioral Neuroscience, and Sian Cotton, PhD, an associate professor in the UC Department of Family and Community Medicine, are co-principal investigators in the trial. It will be funded by a \$50,000 grant from the Depression and Bipolar Disorder Alternative Treatment Foundation, a New York-based nonprofit organization.

DelBello, who also holds an appointment in the UC Department of Pediatrics, is a UC Health child and adolescent psychiatrist with extensive research experience in [bipolar disorder](#). Cotton is director of the UC Center for Integrative Health and Wellness and UC Health Integrative Medicine.

Mindfulness-based cognitive therapy (MBCT) is a psychotherapeutic intervention that combines mindfulness-based techniques with [cognitive behavioral therapy](#). MBCT-C (modified for children/adolescents) teaches children to pay attention to anxiety-related thoughts, emotions and physical sensations with openness and non-judgment, helping them to consciously choose the most appropriate behaviors for the situation.

"Mindfulness has its origins in Buddhist meditative traditions and has

been around for thousands of years," says Cotton. "It is increasingly being incorporated into empirically supported clinical interventions with promising results."

"The onset of bipolar disorder typically occurs during adolescence," DelBello says of the condition characterized by mood swings, or dysregulation. "In addition, child and adolescent offspring of parents with bipolar disorder have a greater risk of developing mood dysregulation than those without bipolar parents."

DelBello notes that studies show that antidepressants, which are commonly used to treat mood symptoms in youth, may actually worsen outcomes and accelerate the onset of mania or hypomania.

"Therefore, studies evaluating other treatment options for emotional dysregulation for youth with a bipolar parent are urgently needed as an initial step toward establishing early intervention, and ultimately, prevention strategies for bipolar disorder."

The trial, known as a controlled behavioral therapy trial, is open to children and adolescents ages 10-17 who are experiencing anxiety and mood disorders and have at least one parent with bipolar disorder. It will consist of group sessions lasting 75 to 90 minutes, conducted weekly over a 12-week period. Children of similar ages will be grouped together.

"They will learn about relaxation techniques and about paying attention to their current emotions," DelBello says. "The idea is to experience their feelings in the 'here and now' and be able to control the thoughts that lead to the feelings."

Cotton says: "Many people are interested in non-pharmacologic treatment approaches or ones that increase their sense of control and

agency to actively do something to improve their own health. Mindfulness training is one such treatment option with promising outcomes for a variety of both mental and physical health conditions."

Sessions will be led by trained clinicians under the supervision of Richard Sears, PsyD, a Cincinnati clinical psychologist and volunteer associate professor in the psychiatry and [behavioral neuroscience](#) department and a national expert in mindfulness treatment approaches. They will take place near the UC medical campus at the Stetson Building, home of UC Health Psychiatry.

Outcomes will be measured by change from baseline to endpoint in the Pediatric Anxiety Rating Scale (PARS) score as well as other indicators such as changes in mindfulness and emotion regulation.

Provided by University of Cincinnati

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