

# Can mindfulness help patients stay in treatment?

September 16 2015, by David Orenstein

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A common problem with treatments involving changes in diet and other lifestyle behaviors is that patients don't always stick with them rigorously. A new \$4.7-million grant from the National Institutes of Health will allow a team of four Brown University researchers to study whether mindfulness can help patients do better.

The five-year grant covers two phases of research. In one, researchers will systematically review data from dozens of mindfulness intervention studies (about 2,000 participants in all) to see whether mindfulness interventions influenced patient self-regulation related to medical regimen adherence. The study will have enough statistical power to show whether interventions worked or did not work.

The second phase will involve four [randomized controlled trials](#) assessing the impact of mindfulness interventions on measures of medical regimen adherence, including regimens for reducing blood pressure, and supporting dietary changes and weight loss. Studies will take place at Brown, Harvard University, and the University of Massachusetts.

"Based on the first phase of the grant where we merge many datasets, we will see which are the active components of mindfulness interventions in influencing self-regulation related to medical regimen adherence," said Eric Loucks, assistant professor of epidemiology in the Brown University School of Public Health and co-leader of the research. "From those findings, in the second phase of the grant we will customize

ongoing randomized controlled mindfulness intervention trials to better engage with those self-regulation processes, with the goal to greater influence health outcomes."

The grant's other principal investigator is Willoughby Britton, assistant professor (research) of psychiatry and human behavior in the Alpert Medical School. In addition, Cathy Kerr, assistant professor (research) in family medicine, and Jared Lindahl, visiting assistant professor of [religious studies](#) and the Cogut Center for the Humanities, are co-investigators.

"This grant brings together fields that often operate in parallel without communicating with each other," Britton said. "Clinical psychology, neuroscience, religious studies, cognitive science, epidemiology, and psychiatry have a lot to offer each other but are rarely encouraged to work together. This [grant](#) requires interdisciplinary collaboration not only to unify the field but also to bridge the 'science-to-service gap' that often thwarts the dissemination of scientific discovery from reaching the front lines of clinical providers."

Provided by Brown University

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