

Mindfulness training helps patients with inflammatory bowel diseases

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Training in meditation and other mindfulness-based techniques brings lasting improvements in mental health and quality of life for patients with inflammatory bowel diseases (IBD), according to a study in *Inflammatory Bowel Diseases*, official journal of the Crohn's & Colitis Foundation of America (CCFA).

"Our study provides support for the feasibility, acceptability, and effectiveness of a tailored mindfulness-based group intervention for patients with IBD," concludes the research report by Dr. David Castle, a psychiatrist at St. Vincent's Hospital, Melbourne, Australia, and colleagues. More research is needed to demonstrate the clinical benefits of mindfulness techniques—including whether they can help to reduce IBD symptoms and relapses.

Mindfulness Reduces Anxiety and Depression in IBD Patients

The researchers evaluated a mindfulness-based stress reduction (MBSR) program tailored for patients with IBD. The study included 60 adults with IBD: Crohn's disease or ulcerative colitis. The patients' average age was 36 years, and average duration of IBD 11 years. Twenty-four patients had active disease at the time of the study.

The MBSR intervention consisted of eight weekly group sessions plus a daylong intensive session, led by an experienced instructor. The program



included guided meditations, exercises designed to enhance mindfulness in daily life, and group discussions of challenges and experiences. Participants were also encouraged to perform daily "mindfulness meditation" at home.

Thirty-three patients agreed to participate in the MBSR intervention, 27 of whom completed the program. Ratings of mental health, quality of life, and mindfulness were compared to those of the 27 patients who chose not to participate (mainly because of travel time).

The MBSR participants had greater reductions in anxiety and depression scores, as well as improvement in physical and psychological quality of life. They also had higher scores on a questionnaire measuring various aspects of mindfulness—for example, awareness of inner and outer experiences.

Six months later, MBSR participants still had significant reduction in depression and improvement in quality of life, with a trend toward reduced anxiety. The patients were highly satisfied with the mindfulness intervention.

Anxiety, depression, and decreased quality of life are common in patients with IBD. Psychological distress may lead to increased IBD symptoms and play a role in triggering disease flare-ups. Previous studies have shown benefits of MBSR for patients with a wide range of physical illnesses, but there is limited evidence on mindfulness-based interventions for patients with IBD.

The new results show that the MBSR approach is feasible and well-accepted by patients with IBD. The study also suggests that <u>training</u> patients in mindfulness practices to follow in daily life can lead to significant and lasting benefits, including reduced psychological distress and improved quality of life. Dr. Castle comments, "This work



reinforces the interaction between physical and mental aspects of functioning, and underscores the importance of addressing both aspects in all our patients."

The researchers point out some important limitations of their study—including the fact that patients weren't randomly assigned to MBSR and control groups. They also note that the study didn't assess the impact on measures of disease activity, including IBD flares. Dr. Castle and colleagues conclude, "A larger adequately powered, randomised study with an active control arm is warranted to evaluate the effectiveness of a mindfulness group program for <u>patients</u> with IBD in a definitive manner."

Provided by Wolters Kluwer Health

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