

Are all meditation techniques the same?

July 20 2010

As doctors increasingly prescribe meditation to patients for stress-related disorders, scientists are gaining a better understanding of how different techniques from Buddhist, Chinese, and Vedic traditions produce different results.

A new paper published in [Consciousness and Cognition](#) discusses three categories to organize and better understand meditation:

1. Focused attention—concentrating on an object or emotion;
2. Open monitoring—being mindful of one's breath or thoughts;
3. Automatic self-transcending—meditations that transcend their own activity—a new category introduced by the authors.

Each category was assigned EEG bands, based on reported [brain patterns](#) during [mental tasks](#), and meditations were categorized based on their reported EEG.

"The idea is that meditation is, in a sense, a 'cognitive task,' and EEG frequencies are known for different tasks," said Fred Travis, Ph.D., co-author, and Director of the Center for Brain, [Consciousness](#), and Cognition at Maharishi University of Management.

Focused attention, characterized by beta/gamma activity, included meditations from Tibetan Buddhist (loving kindness and compassion),

Buddhist (Zen and Diamond Way), and Chinese (Qigong) traditions.

Open monitoring, characterized by theta activity, included meditations from Buddhist (Mindfulness, and ZaZen), Chinese (Qigong), and Vedic (Sahaja Yoga) traditions.

Automatic self-transcending, characterized by alpha1 activity, included meditations from Vedic ([Transcendental Meditation](#)) and Chinese (Qigong) traditions.

Between categories, the included meditations differed in focus, subject/object relation, and procedures. These findings shed light on the common mistake of averaging meditations together to determine mechanisms or clinical effects.

"Meditations differ in both their ingredients and their effects, just as medicines do. Lumping them all together as "essentially the same" is simply a mistake," said Jonathan Shear, Ph.D., co-author, professor of philosophy at Virginia Commonwealth University in Richmond, and the author of several books and publications on meditation.

"Explicit differences between meditation techniques need to be respected when researching physiological patterns or clinical outcomes of [meditation](#) practices," said Dr. Travis. "If they are averaged together, then the resulting phenomenological, physiological, and clinical profiles cannot be meaningfully interpreted."

Provided by Maharishi University of Management

Citation: Are all meditation techniques the same? (2010, July 20) retrieved 19 September 2024 from <https://medicalxpress.com/news/2010-07-meditation-techniques.html>

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