Going beyond MBSR: Classical Mindfulness based Integrative Cognitive Behavioral Therapy for

Lobsang Rapgay, PhD
Assistant Clinical Professor in Psychiatry
Research Psychologist
Director
Innovative Interventions for Generalized Anxiety Disorder
Objectives of Presentations

1. Need for new treatments for GAD (Heimberg, 2004)
2. Clinical features of GAD
3. Objectives, functions and practice of classical mindfulness
4. Potential therapeutic functions of CM for GAD
5. Classical Mindfulness based CBT for GAD
   - 2 clinical presentations of the effect of classical mindfulness on the EEG of two GAD patients
   - 2 clinical case presentation of the treatment of GAD with a 15 session Classical Mindfulness based CBT
Need for new treatments for GAD

1. Current treatments are effective for about 50% of GAD patients (Newman et al., 1999)
2. Relapse rate in those who respond to treatment are high
3. New theories about the psychopathology of GAD
Clinical features of GAD

1. Excessive, uncontrollable and pervasive worry
2. Presence of three of the following six symptoms
3. Fear of future oriented threatening information
4. Control of internal experiences
5. Detachment from perceptions and experiences
6. Verbal linguistic rather than imaginal processing
7. Overestimation and catastrophic thinking
8. Avoidance of cognitive, affect and behavior
9. Intolerance of uncertainty
10. Interpersonal conflict
11. Intolerance of any threat due to narcissistic reasons
Objectives, functions and practice of classical mindfulness

1. Definition
2. Two Objectives: bare attention and insight
3. Six functions: attention, awareness, cognitive regulation, exposure, labeling, quiet stillness
4. 15 Minutes of CM practice daily
5. Practice Steps
6. Ways to apply CM to the treatment of GAD
Potential therapeutic functions of CM for GAD

1. Facilitate change in mental states
2. Disengagement of appraisal stimuli or cognition which blocks ruminative thinking
3. Activates metacognitive mode of processing which may facilitate cognitive restructuring
4. Increases flexible ways of responding to threat
5. Reduces motivational condition for worry
6. Reduces reliance on verbal rules that distract from experience and flexibility
7. Present moment attention facilitates avoidant style of responding
8. Cognitive strategy to control aversive thoughts
Classical mindfulness based Integrative CBT for GAD

Integration of I and II:

I. Classical mindfulness: 5 steps
   (a) Attention and Awareness, Attention and Awareness, (b) Cognitive Regulation, (c) Labeling, (d) Exposure, and (e) Quiet Stillness

II. Integrative Cognitive Behavioral Therapy: 5 steps
    (a) Psychoeducation, (b) Autonomic Regulation, © Cognitive restructuring, (d) Exposure, (e) Interpersonal
Clinical case studies : EEG

1. 28 year old married white man with long history of GAD with mild depression

Baseline EEG

<table>
<thead>
<tr>
<th>Theta</th>
<th>Beta</th>
</tr>
</thead>
<tbody>
<tr>
<td>26</td>
<td>4</td>
</tr>
</tbody>
</table>

Post two weeks training in CM

<table>
<thead>
<tr>
<th>Theta</th>
<th>Beta</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>9</td>
</tr>
</tbody>
</table>

Post four weeks

<table>
<thead>
<tr>
<th>Theta</th>
<th>Beta</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>8</td>
</tr>
</tbody>
</table>
2. 38 year old white single woman with GAD

<table>
<thead>
<tr>
<th></th>
<th>Baseline EEG</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Theta</td>
<td>Beta</td>
</tr>
<tr>
<td>18</td>
<td>5</td>
</tr>
</tbody>
</table>

Post two weeks of CM

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Post 4 weeks after treatment</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>8</td>
</tr>
</tbody>
</table>
Clinical case study: CMICBT

1. Case study of the effects of a 15 session Classical Mindfulness based Integrative CBT on a 32 year old Lebanese American woman with GAD

   Pre-treatment baseline:
   BAI: 42
   After 7 sessions
   BAI: 24
   Post-treatment
   BAI: 12
continuation

2. A 28 year old divorced South American woman with GAD and mild depression

Pretreatment Baseline

BAI: 44

After 7 sessions

BAI: 20

Post-treatment

BAI: 13