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INTERVENTIONS

Articles testing the applied science and implementation of mindfulness-based interventions

Adhikari, K., Kothari, F., Khadka, A. (2018). **The effect of short-term training of vipassana's body-scan on select cognitive functions**. *Psychological Studies.* [link]

An, Y., Zhou, Y., Huang, Q.,...Xu, W. (2018). **The effect of mindfulness training on mental health in long-term chinese male prisoners**. *Psychology, Health & Medicine.* [link]

Basso, J. C., McHale, A., Ende, V.,...Suzuki, W. A. (2018). **Brief, daily meditation enhances attention, memory, mood, and emotional regulation in non-experienced meditators**. *Behavioural Brain Research.* [link]

Chin, B., Slutsky, J., Raye, J., Creswell, J. D. (2018). **Mindfulness training reduces stress at work: A randomized controlled trial**. *Mindfulness.* [link]

Cladder-Micus, M. B., Speckens, A. E., Vrijsen, J. R.,...Spijker, J. (2018). **Mindfulness-based cognitive therapy for patients with chronic, treatment-resistant depression: A pragmatic randomized controlled trial**. *Depression and Anxiety.* [link]

Corthorn, C. (2018). **Benefits of mindfulness for parenting in mothers of preschoolers in chile**. *Frontiers in Psychology*. [link]

Felver, J. C., Clawson, A. J., Morton, M. L.,...DiFlorio, R. A. (2018). **School-based mindfulness intervention supports adolescent resiliency: A randomized controlled pilot study**. *International Journal of School & Educational Psychology.* [link]

Hallman, I. S., O'Connor, N., Hasenau, S., Brady, S. (2017). **Improving the culture of safety on a high-acuity inpatient child/adolescent psychiatric unit by mindfulness-based stress reduction training of staff**. *Journal of Child and Adolescent Psychiatric Nursing*. [link]

Krieger, T., Reber, F., von Glutz, B.,...Berger, T. (2018). **An internet-based compassion-focused intervention for increased self-criticism: A randomized controlled trial**. *Behavior Therapy.* [link]

Kristeller, J. L., Jordan, K. D. (2018). **Mindful eating: Connecting with the wise self, the spiritual self**. *Frontiers in Psychology*. [link]

Krusche, A., Dymond, M., Murphy, S. E., Crane, C. (2018). **Mindfulness for pregnancy: A randomised controlled study of online mindfulness during pregnancy**. *Midwifery*. [link]

Lengacher, C. A., Reich, R. R., Paterson, C. L.,...Park, J. Y. (2018). **A large randomized trial: Effects of mindfulness-based stress reduction (MBSR) for breast cancer (BC) survivors on salivary cortisol and IL-6.** *Biological Research for Nursing.* [link]

Montanari, K. M., Bowe, C. L., Chesak, S. S., Cutshall, S. M. (2018). **Mindfulness: Assessing the feasibility of a pilot intervention to reduce stress and burnout**. *Journal of Holistic Nursing.* [link]

Salmoirago-Blotcher, E., Druker, S., Meleo-Meyer, F.,...Pbert, L. (2018). **Beneficial effects of school-based mindfulness training on impulsivity in healthy adolescents: Results from a pilot RCT**. *EXPLORE.* [link]

Singh, N. N., Lancioni, G. E., Nabors, L.,...Manikam, R. (2018). **Samatha meditation training for students with attention deficit/hyperactivity disorder: Effects on active academic engagement and math performance**. *Mindfulness.* [link]

Vella, E., McIver, S. (2018). **Reducing stress and burnout in the public-sector work environment: A mindfulness meditation pilot study**. *Health Promotion Journal of Australia.* [link]

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Associations

Articles examining the correlates and mechanisms of mindfulness

Barrington, J., Jarry, J. L. (2018). **Does thought suppression mediate the association between mindfulness and body satisfaction?** *Mindfulness.* [link]

Benzo, R. P., Anderson, P. M., Bronars, C., Clark, M. (2018). **Mindfulness for healthcare providers: The role of non-reactivity in reducing stress**. *EXPLORE.* [link]

Bishop, J. R., Lee, A. M., Mills, L. J.,...Lim, K. O. (2018). **Methylation of FKBP5 and SLC6A4 in relation to treatment response to MBSR for posttraumatic stress disorder**. *Frontiers in Psychiatry*. [link]

Bourgault, M., Dionne, F. (2018). **Therapeutic presence and mindfulness: Mediating role of self-compassion and psychological distress among psychologists**. *Mindfulness.* [link]

Carvalho, S. A., Gillanders, D., Palmeira, L.,...Castilho, P. (2018). **Mindfulness, selfcompassion, and depressive symptoms in chronic pain: The role of pain acceptance**. *Journal of Clinical Psychology.* [link]

Dentico, D., Bachhuber, D., Riedner, B. A.,...Lutz, A. (2018). **Acute effects of meditation training on the waking and sleeping brain: Is it all about homeostasis?** *European J Neuroscience.* [link]

Duprey, E. B., McKee, L. G., O'Neal, C. W., Algoe, S. B. (2018). **Stressful life events and internalizing symptoms in emerging adults: The roles of mindfulness and gratitude**. *Mental Health & Prevention.* [link]

Finkelstein-Fox, L., Park, C. L., Riley, K. E. (2018). **Mindfulness' effects on stress, coping, and mood: A daily diary goodness-of-fit study**. *Emotion.* [link]

Fountain-Zaragoza, S., Puccetti, N. A., Whitmoyer, P., Prakash, R. S. (2018). **Aging and attentional control: Examining the roles of mind-wandering propensity and dispositional mindfulness**. *Journal of the International Neuropsychological Society.* [link]

Harel, O., Hadash, Y., Levi-Belz, Y., Bernstein, A. (2018). **Does early emotional responding to initial mindfulness training impact intervention outcomes?** *Mindfulness.* [link]

Höppener, M. M., Larsen, J. K., Strien, T. V.,...Eisinga, R. (2018). **Depressive symptoms and emotional eating: Mediated by mindfulness?** *Mindfulness.* [link]

Lamont, J. M. (2018). **The relationship of mindfulness to body shame, body responsiveness, and health outcomes**. *Mindfulness.* [link]

Lenger, K. A., Gordon, C. L., Nguyen, S. P. (2018). **A word to the wise: Age matters when considering mindfulness in romantic relationships**. *Contemp Family Therapy.* [link]

Mantzios, M., Egan, H., Hussain, M.,...Bahia, H. (2018). **Mindfulness, self-compassion, and mindful eating in relation to fat and sugar consumption: An exploratory investigation**. *Eating and Weight Disorders.* [link]

Manusov, V., Stofleth, D., Harvey, J. A., Crowley, J. P. (2018). **Conditions and consequences of listening well for interpersonal relationships: Modeling active-empathic listening, social-emotional skills, trait mindfulness, and relational quality**. *International J Listening.* [link]

Mettler, J., Mills, D. J., Heath, N. L. (2018). **Problematic gaming and subjective well-being: How does mindfulness play a role?** *International Journal of Mental Health and Addiction.* [link]

Park, J. Y., Lengacher, C. A., Reich, R. R.,...Kiluk, J. (2018). **Translational genomic research: The role of genetic polymorphisms in MBSR**

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program among breast cancer survivors. *Translational Behavioral Medicine.* [link]

Schultz, P. P., Ryan, R. M. (2018). **Cognitive and affective benefits of a mindful state in response to and in anticipation of pain**. *Mindfulness.* [link]

Sugiura, Y., Sugiura, T. (2018). **Mindfulness as a moderator in the relation between income and psychological well-being**. *Frontiers in Psychology*. [link]

Tapper, K., Turner, A. (2018). **The effect of a mindfulness-based decentering strategy on chocolate craving**. *Appetite.* [link]

Van der Lubbe, R. H., De Kleine, E., Schreurs, K. M., Bohlmeijer, E. T. (2018). **Does mindfulness training modulate the influence of spatial attention on the processing of intracutaneous electrical stimuli?** *PLoS ONE*. [link]

Véronique, A. T., Roy, M., Chang, L.,...Rainville, P. (2018). **Reduced fear-conditioned pain modulation in experienced meditators: A preliminary study**. *Psychosomatic Medicine.* [link]

Wang, J., Häusermann, M., Ambresin, A. E. (2018). **Mindfulness and other psycho-social resources protective against mental illness and suicidality among gay men**. *Frontiers in Psychiatry*. [link]

METHODS

Articles developing empirical procedures to advance the measurement and methodology of mindfulness

Chadi, N., Weisbaum, E., Malboeuf-Hurtubise, C.,...Vo, D. X. (2018). **Can the mindful awareness and resilience skills for adolescents (MARS-A) program be provided online? Voices from the youth**. *Children.* [link]

Hanley, A. W., Nakamura, Y., Garland, E. L. (2018). **The nondual awareness dimensional assessment (NADA): New tools to assess nondual traits and states of consciousness occurring within and beyond the context of meditation**. *Psychological Assessment.* [link]

Haslam, A., Salm Ward, T., Wagner Robb, S. (2018). **Survey to assess interest in a mindfulness intervention at a midwifery and women's health clinic**. *Holistic Nursing Practice*. [link]

Hutchinson, J. K., Huws, J. C., Dorjee, D. (2018). **Exploring experiences of children in applying a school-based mindfulness programme to their lives**. *Journal of Child and Family Studies.* [link]

Malboeuf-Hurtubise, C., Taylor, G., Paquette, L., Lacourse, E. (2018). **A mindfulness-based intervention for students with psychiatric disorders in a special education curriculum: A series of n-of-1 trials on internalized and externalized symptoms**. *Front Education*. [link]

McHale, C., Hayward, M., Jones, F. W. (2018). **Building a grounded theory of engagement in mindfulness-based group therapy for distressing voices**. *Qualit Health Research*. [link]

Prenoveau, J. M., Papadakis, A. A., Schmitz, J. C.,...Mendelson, T. (2018). **Psychometric properties of the child and adolescent mindfulness measure (CAMM) in racial minority adolescents from low-income environments**. *Psychological Assessment.* [link]

Siebelink, N. M., Bögels, S. M., Boerboom, L. M.,...Greven, C. U. (2018). **Mindfulness for children with ADHD and mindful parenting (mindchamp): Protocol of a RCT comparing a family mindfulness-based intervention as an add-on to care-as-usual with care-as-usual only**. *BMC Psychiatry*. [link]

Stjernswärd, S., Hansson, L. (2018). **Effectiveness and usability of a web-based mindfulness intervention for caregivers of people with mental or somatic illness. A RCT.** *Internet Interventions*. [link]

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REVIEWS

Articles reviewing content areas of mindfulness or conducting meta-analyses of published research

Carlson, L. E. (2018). **Uptake of mindfulness-based interventions: A phenomenon of wealthy white western women?** *Clinical Psychology: Science and Practice*. [link]

Chopko, B. A., Papazoglou, K., Schwartz, R. C. (2018). **Mindfulness-based psychotherapy approaches for first responders: From research to clinical practice**. *American Journal of Psychotherapy.* [link]

Forner, C. (2018). **What mindfulness can learn about dissociation and what dissociation can learn from mindfulness**. *Journal of Trauma & Dissociation.* [link]

Donald, J. N., Sahdra, B. K., Van Zanden, B.,...Ciarrochi, J. (2018). **Does your mindfulness benefit others? A systematic review and meta-analysis of the link between mindfulness and prosocial behaviour**. *British J Psychology.* [link]

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Montgomery, K., Thompson, A. R. (2018). **The potential role of mindfulness in psychosocial support for dermatology patients**. *Clinics in Dermatology.* [link]

Russell, L., Ugalde, A., Milne, D.,...Livingston, P. M. (2018). **Digital characteristics and dissemination indicators to optimize delivery of internet-supported mindfulness-based interventions for people with a chronic condition: Systematic review**. *JMIR Mental Health*. [link]

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Semple, R. J. (2018). **Yoga and mindfulness for youth with autism spectrum disorder: Review of the current evidence**. *Child Ad Ment H.* [link]

Shute, R. H. (2018). **Schools, mindfulness, and metacognition: A view from developmental psychology**. *Intern J Sch Educ Psych.* [link]

Solano López, A. L. (2018). **Effectiveness of the MBSR program on blood pressure: A systematic review of literature**. *Worldviews on Evidence-Based Nursing.* [link]

TRIALS

Research studies newly funded by the National Institutes of Health (AUG 2018)

Boston University (M. Otto, PI). **Engaging working memory and distress tolerance to aid smoking cessation**. NIH/NIDA project # 1R21DA046963-01. [link]

Duke University (C. Cox, PI). **Optimizing a self-directed mobile mindfulness intervention**. NIH/NCCIH project #1U01AT009974-01. [link]

Johns Hopkins University (T. Mendelson, PI). **Promoting maternal mental health in neonatal intensive care through mindfulness**. NIH/NCCIH project #5R34AT009615-02. [link]

Oregon Health and Science University (K. Mackiewicz, PI). **Mechanisms of action of MBCT-PD: A pilot study**. NIH/NCCIH project #1R21AT010292-01. [link]

Penn State University (D. Fishbein, PI). **Optimizing a mindful intervention for urban youth via stress physiology**. NIH/NCCIH project #1R61AT009856-01. [link]

Washington University (E. Lenze, PI). **Remediating age related cognitive decline: MBSR and exercise**. NIH/NIA project #5R01AG049369-05. [link]

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HIGHLIGHTS

A summary of select studies from the issue, providing a snapshot of some of the latest research

About one-in-five major depressive episodes are not responsive to either medication or psychotherapy and go on to become chronic illnesses. Mindfulness-Based Cognitive Therapy (MBCT) has been shown to be useful as an adjunctive treatment in acute depressions and the prevention of depressive relapse in patents with a history of multiple depressive episodes. Its effectiveness in chronic treatment-resistant depressions has not yet been established.

Cladder-Micus et al. [*Depression and Anxiety*] compared the effectiveness of MBCT as an adjunctive treatment to treatment-as-usual in patients with treatment-resistant chronic depression.

The researchers randomly assigned 106 patients with treatment-resistant chronic depression (female = 62%; mean age = 47 years; mean length of depressive episode = 70 months; mean number of previous episodes = 2.7) to either treatment-as-usual (TAU) or TAU combined with adjunctive MBCT. MBCT was offered in the standard 8-week group format. TAU consisted of medication, psychological treatment, psychiatric nursing support, and day hospitalization as needed. There was no difference between conditions as to the type and amount of TAU received.

Participants were assessed at baseline and post-treatment on symptom severity, remission of illness (no symptoms for two weeks), quality of life, rumination, self-compassion, and mindfulness (using the Five Facet Mindfulness Questionnaire). The MBCT attrition rate was 24.5%, with participants dropping out due to physical complaints, trouble awakening in the morning, and practical considerations (e.g., moving away from the area). Completers did not differ from non-completers in terms of baseline depressive symptoms. The main analyses were performed using an intention-to-treat (ITT) protocol using data from all participants available for post-testing, whether or not they successfully completed the MBCT program. Secondary analyses were conducted using only those MBCT participants who completed 4 or more group sessions.

Results showed that there were no significant immediate post-treatment between-group differences in severity of depressive symptoms when the entire ITT sample was analyzed. When data from completers was analyzed, MBCT completers had significantly fewer depressive symptoms than TAU participants (d = 0.45). Using the entire ITT sample, significantly more MBCT participants (42%) achieved partial or complete symptom remission than TAU participants (22%).

MBCT participants also reported significantly less rumination (d = .39), significantly better quality of life (d= .42), significantly more self-compassion (d = .64), and significantly greater degrees of mindfulness (d = .73) than TAU participants. MBCT participants with higher baseline levels of rumination benefited more from MBCT than those with lower baseline levels (d=1.64).

This study shows that adjunctive MBCT increases mindfulness, self-compassion, and quality of life while reducing rumination in patients with treatment-resistant chronic depression when compared to patients in treatment-as-usual alone.

MBCT reduces symptom severity for those patients who complete the MBCT protocol, and increases the odds of achieving a partial remission of symptoms. MBCT is more effective for depressed patients who experience high levels of rumination. The study is limited by the absence of an active control adjunctive intervention and by its relatively high attrition rate.

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Meditation practice reliably demonstrates beneficial effects for memory, attention, mood, and emotional regulation. It is unclear, however, whether there is a minimum dosage necessary to attain these benefits. **Basso et al. [Behavioural Brain Research]** measured the benefits of meditation in a group of meditation-naïve participants by assigning them to either daily brief guided meditations or to a control group, and measuring their changes in mood and cognition over time.

The researchers randomly assigned 72 meditation-naïve participants to either a meditation audio or a podcast audio. The meditation group listened to 13-minute guided meditations daily for 8 weeks. The meditations included breath-focused exercises and a body scan practice. The podcast group listened to 13-minute excerpts from NPR's Radiolab podcast daily for 8 weeks.

Participants underwent neuropsychological and psychological evaluations and salivary cortisol (a stress hormone) assessments at baseline, 4 weeks, and 8 weeks. Computer-administered neuropsychological tests included measures of attention, working and recognition memory, and response inhibition.

The psychological tests measured mindfulness (Mindful Attention Awareness Scale or MAAS), mood, stress, depression, anxiety, rumination, sleep quality, fatigue, quality of life, self-esteem, and life satisfaction.

Following the final assessments, participants were subjected to a stress-inducing task. They were told to prepare for a job interview and deliver a five-minute presentation on why they should be hired in front of two stone-faced judges. They were then told to perform a difficult serial subtraction problem. Whenever they made an arithmetic mistake, they were instructed to start the problem over from the beginning. Subjective measures of anxiety were taken at baseline, immediately after, and at 10, 20, and 30-minute intervals after the stress-inducing tasks. Salivary cortisol levels were also assessed at each of these time points.

The study had a significant attrition rate: 45% of the participants either dropped out or were excluded due to insufficient participation. The final sample included 42 participants (15 male, 27 female).

There were no differences between the groups at baseline or 4 weeks. At 8 weeks, meditators showed better mood (partial $\eta^2 = 0.11$) (especially reduced anger, hostility, bewilderment, and confusion), less anxiety ($\eta^2 = 0.10$), and less fatigue ($\eta^2 = 0.15$) than controls. Meditators also displayed better working memory ($\eta^2=0.11$) and recognition memory ($\eta^2=0.10$), and made more correct responses on congruent Stroop task trials ($\eta^2 = 0.12$) than controls.

On the other hand, controls showed improved sleep quality over time, while meditators did not ($\eta^2 = 0.18$). Meditators reported experiencing less anxiety during the stress-inducing tasks ($\eta^2 = 0.10$). Meditation participants who showed the largest improvement in mood also showed the least anxiety in response to the stress-inducing task ($r = -0.41$). There were no measurable effects on cortisol levels.

The study showed that 8 weeks of daily brief meditation measurably improves mood, anxiety in response to stress, and aspects of attention and memory. The study also showed that 4 weeks of practice were not sufficient to yield results. This suggests that meditative effects are cumulative and only emerge with repeated practice over time.

The study was limited by its high attrition rate. Additionally, the fact that the interventions did not differentially affect mindfulness scores makes it unclear whether the mood and cognitive benefits were actually attributable to changes in mindfulness.