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CLINICAL VIGNETTE

Stress Management: Meditation In Clinical Practice

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Case Report

A 57-year-old smoker with hyperlipidemia began seeing me 12 years ago. On his initial visit, he acknowledged much stress in his life for the past year and, coinciding with this stress, began having GE reflux symptoms. Over the years, he continued with these symptoms and, despite urging him to stop smoking and his having a desire to stop, he felt his stress was too overwhelming to allow him to do so. He came under the care of a gastroenterologist who recommended an SSRI for his stress, which he declined. Some years later, he began having palpitations, headaches and chest pains. He underwent cardiac stress testing which was negative. Two years ago, he stopped smoking and began exercising, but his stress level remained high. He declined on various occasions seeing a psychotherapist. He continued to have episodic chest pain and gastrointestinal symptoms, which he was able to correlate with stress in his life. He said he was now ready to help attack his stress. He agreed to start with some mind-awareness meditations at home and he began doing them regularly. Several months later, he reported no recent chest pains and his gastrointestinal symptoms had improved markedly.

T.P. is a healthy 52-year-old who first saw me 7 years ago with normal blood pressure readings. Several months ago he underwent a stress treadmill prior to being accepted as a volunteer firefighter and in the recovery stages of the test, his blood pressure (BP) rose to 212/84 hhMg. He stated he was under much stress around the time. Monitoring his BP on his own, most of his readings were in the 145-155/86-96 range. He embraced the idea of beginning mind-awareness meditation, as he very much wanted to avoid medications. Within 1 month, his BP had come into the less than 140/85 range, although he still had occasional readings higher when he was "rushed" or "tense" at work.

The art of medicine involves a heightened awareness of the mind-body connection. Hardly a day goes by when the average internist, among many other practitioners, doesn't come across a patient who has somatic manifestations of something emanating from some psychological factor(s). In 1975, a Harvard cardiologist, Herbert Benson, published a book, The Relaxation Response, which was the impetus for what would generate innumerable studies examining the mind-body connection.[1] While it was long observed that many patients' blood pressure readings were higher in the office than outside the office, Dr. Benson speculated that the reason had to do with patients being "nervous" and thus that stress may play a role in hypertension. Dr. Benson set out to study this connection. With others, he studied the effects of Transcendental Meditation (TM) on physiologic responses, namely heart rate, metabolic rate and breathing rate and demonstrated that these parameters were all lowered in those who practiced this meditation. While the book was embraced by the public at large, Dr. Benson faced much criticism from the medical community. His book was viewed as nothing more than a "best-seller" and many believed that the findings represented nothing more than a placebo effect--- that is, if patients believed that meditation would help them, then that would account for its positive effects. Since then, the field of mind-body connection has blossomed. Research abounds studying the link between stress and a myriad of medical conditions, and much of what Dr. Benson espoused has been borne out. Furthermore, the literature has a plethora of randomized controlled studies which have concluded that meditation-based stress management techniques have many health benefits.[2-4]

TM, of course, is just one type of meditation technique, involving the repetition of a word or phrase silently or aloud. Another technique is mindfulness meditation, whereby one observes various sensations or thoughts as they arise while

relaxing oneself. Along these lines, one resource I have taken advantage of can be found right in our own backyard, via the website www.marc.ucla.edu. The Mindfulness Awareness Research Center, part of the UCLA Cousins Psychoneuroimmunology Institute, has fostered research and education in the field of mindfulness awareness. Its outreach is geared toward the general public, health professionals and students via education programs in the schools. The Center offers classes and workshops, as well as something called C-Space, a room in the Semel/NPI Institute dedicated to UCLA Health System employees offering free yoga, tai chi, guided meditation and stretch/pilates. There are also currently drop-in sessions at UCLA Family Commons by the Third Street Promenade in Santa Monica, the Hammer Museum in Westwood and at Ronald Reagan UCLA Medical Center. All of these programs appear on the website.

I have given out the website above to a number of my patients who say they are open to the idea of guided meditation. On the homepage, one can link onto "mindful meditations" and find a series of 3-minute to 19-minute guided meditations one can listen to on any computer or MP3 player via download. I personally like the 12-minute "Breath, Sound, Body" meditation, but I tell patients even shorter ones are of value. The key to its success in helping patients get more control over their stress is to do these on a regular basis-most days of the week, as I tell my patients. I also tell them that they cannot expect to see benefit after practicing these for a short time. It is analogous to exercise, whereby one has to get into a regular routine to derive the most from it. Another website that uses similar guided imagery is from the University of Vermont Center for Health & Wellbeing: http://www.uvm.edu/~chwb/counseling/mindfulness/mindfulnessaudio.html.
For patients who do not have access to a computer, one can print out exercises to give to the patient. Many can be found via the internet. One such website is: http://www.ccalliance.org/events/current/conference/Harazduk%20Handout.pdf

With regard to my 2 patients described at the beginning, they both embraced the mindful meditations from the UCLA MARC website. While it is not possible to say that this meditation is what caused resolution of symptoms or the improvement in blood pressure control, it is my belief that there was a causal relationship. I have heard similar anecdotal reports from other patients, although I also have had less than positive feedback. In addition, I have heard reports from patients who, in the midst of a stressful event---such as at work--- have felt a need to invoke their meditation exercise and find they derive solace in doing so.

One of the biggest obstacles to patients embarking on and keeping up any kind of stress management program---whether it be meditation, yoga, tai chi, biofeedback or psychotherapy---is their reported lack of time to do so. It is indeed ironic that the most stressed individuals cannot find (or make) the time to help deal with their stress. I am a big proponent of any management technique that helps, and any of the methods I mentioned above can be useful. Advantages of the mindful meditations, such as those on the UCLA and University of Vermont websites, are that they take very little time, can be done in various venues and don't require attending classes or being taught in a formal manner. It must also be realized that these brief guided meditations may not be enough for many people and that further efforts, when feasible, in the meditation realm may provide greater gains.

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