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MINDFULNESS-BASED REDUCTION STRESS REDUCTION FOR PATIENTS WITH RHEUMATOID ARTHRITIS AND **DEPRESSIVE SYMPTOMS: A PILOT TRIAL**

Isabelle Gaboury^{1*}, Patricia Dobkin², Pasquale Roberge³, Marie-Claude Beaulieu³, Pierre Dagenais³, France Gervais³, Sophie **Roux³, Gilles Boire³**

1*Corresponding author: University of Sherbrooke, Longueuil, Quebec, Canada isabelle.gaboury@usherbrooke.ca 2 Programs in Whole Person Care, Department of Medicine, Faculty of Medicine, Montreal, Quebec, Canada 3 University of Sherbrooke, Sherbrooke, Quebec, Canada

BACKGROUND:

Despite their efficacy at controlling joint inflammation, current treatments of rheumatoid arthritis (RA) leave up to 40% of patients into non-remission. Non-remission, frequently due to persistently negative selfreported impact of RA, was found to be associated with significant persistent depressive symptoms 6-7 months after initiation of arthritis treatment. Mindfulness-Based Stress Reduction (MBSR) is proposed to improve depressive symptoms and RA-related clinical outcomes. To pave the way for an eventual randomized controlled trial, a feasibility and acceptability study of MBSR has been realized.

METHODS:

A standardized 8-week MBSR program was offered to groups of patients with controlled inflammatory disease but high levels of depressive symptoms.

Qualitative interviews based on a theoretical framework of acceptability were conducted. Change in depressive symptoms (CES-D tool), fatigue and pain (SF-36), anxiety (GAD-7), pain, disease activity (PtVAS and SDAI scores) was measured over a 6-month period.

RESULTS:

27 patients have been recruited (3 distinct MBSR groups). Factors leading to a higher rate of success in recruitment were identified. Despite the small sample, the intervention was found to have a clear impact on depressive symptoms (p=0.004), anxiety (p=0.005), and social functioning (from the SF-36; p=0.04). Patients reported that MBSR gave them the opportunity to control their reactions in face of stressful situations.

Perceptions were almost uniformly positive towards MBSR, and most appear to have integrated some part of the intervention in their daily life.

CONCLUSIONS:

Although recruitment was challenging, a MBSR trial on depressed patients with controlled inflammatory disease was found acceptable and feasible within this population. Preliminary clinical results showed positive impacts of such intervention.