

Transtherapeutic Mindfulness

Mindfulness is a natural quality of awareness characterized by attending to the present moment, nonjudgmentally, and without reacting to negative thoughts or negative emotions implicated in mood disorders and other psychiatric conditions.¹ A relatively new clinical perspective suggests that, by specifically targeting transdiagnostic processes that are shared across numerous mental disorders—such as negative thinking, the tendency to experience negative affect, and emotional reactivity—mindfulness training offers a viable approach to treating mood disorders and a number of common, stress-related comorbidities, including sleep disturbance, chronic pain, and substance misuse.^{2,3} Therefore, as a clinician, using mindfulness to address transdiagnostic mental processes that underlie mood symptoms can be quite efficient and therapeutic.

Although more rigorous clinical trials with longer-term follow-up are needed to determine efficacy definitively for most specific diagnoses, there is sufficient evidence at present to support mindfulness-based therapy for symptoms of stress, anxiety, and depression across a host of mental and medical disorders, and among apparently healthy but stressed individuals who are at increased risk for developing mood disorders.^{4,5} In addition, a recent meta-analysis showed that changes in transdiagnostic mental processes—including cognitive and emotional reactivity, rumination, and worry—as well as changes in self-reported mindfulness, partially accounted for clinical outcomes, including mental health.⁶

In practice, the core qualities of mindfulness, including present-focused attention, nonjudgment, nonreactivity, and compassion, can be considered “transtherapeutic” in that they target and counteract transdiagnostic pathologic processes, thereby increasing resilience to stress and, by extension, a variety of stress-related mental disorders, including mood disorders.²

Finally, research suggests that different mindfulness practices, such as mindful breathing, sitting meditation, body scan, mindful yoga, and loving kindness, can produce different effects on transdiagnostic outcome measures,^{7,8} allowing a clinician to move toward personalized mindfulness practices based on each patient’s individual needs, symptoms, and preference.

References

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HeartSpeak

Mild fluctuations in mood are a natural part of the human experience¹; however, when the intensity of these fluctuations is extreme, or prolonged, or interferes with quality of life, then intervention is necessary. The prevailing approach toward mood disorders focuses mainly on identifying distorted thinking and its ensuing behavior.² However, with the prevalence of depressive disorders growing at an alarming rate,³ despite the increased use of cognitive interventions and antidepressants,⁴ perhaps a variety of approaches is needed.

HeartSpeak is a novel method for easing mood-related disorders and stress-related diseases, and uses concepts from the field of affective science, or the science of feeling. While affective psychology is not a new concept,⁵ it seems to have taken a back seat to the now popular cognitive approaches. In contrast, HeartSpeak uses the paradigm that there are two minds: (1) the Logical Mind, and (2) the Emotional Mind.^{1,6} While the former mind thinks, rationalizes, and explains, the latter mind simply feels. Therefore, in HeartSpeak, a patient primarily engages the Emotional Mind, feeling the way free of debilitating moods, putting the Logical Mind aside for the time being.

It is suspected that it is the separation of the two minds that is the key to HeartSpeak’s clinical success. There is a growing body of research to support sensory-based processes for influencing emotional centers in the brain.^{7,8} HeartSpeak makes use of this concept, using little dialogue, and focusing on sensing the feelings fully until resolution is achieved.

In addition, in HeartSpeak, it is recognized that emotional reactions consist of a composite of feelings, some of which can be identified as belonging to an emotional family (e.g., anger, fear), others as part of the stress response (e.g., the