



Dear Community Physicians/Clinicians

**PLEASE REPLACE ANY OLD AND OUTDATED REFERRALS WITH THE
ATTACHED RECENTLY UPDATED VERSION.**

We are very happy to offer *The Art of Living Mindfully (ALM)*, an eight week evidence-based course that teaches mindfulness, meditation and cognitive-behavioral based strategies to help participants better cope with stress and challenging emotions.

This MSP Funded course is facilitated by Family Doctors who see 12-18 patients in a 'group medical visit' setting. In order for patients to qualify for MSP coverage of this course they must have an ICD 9 coded diagnosis. Patients who do not meet this criterion can access this or similar courses in the community on a private pay basis - please see our website (bcalm.ca) for suggestions.

OUR COURSE:

- ALM is composed of 8 x 90 minute group sessions taught once a week.
- Mindfulness meditation is used to enable patients to “pay attention in a particular way - on purpose, to the present moment, non-judgmentally”. Practicing mindfulness allows the cultivation of awareness, compassion, and acceptance. On the basis of ongoing research that has revolutionized how we understand the mind, our emotions, and how to nurture well-being for ourselves and others, we teach basic meditation skills of awareness and in turn apply CBT strategies that can lead to emotional regulation and more skilled interactions.

COURSE REQUIREMENTS:

- MSP coverage is dependent on a participant having a specific diagnosis – a situation of ‘general stress’ is not enough to qualify. This course and similar ones have been found to be helpful for patients with insomnia, chronic pain, anxiety disorders, chronic illness and depression.
 - Please remember that the wellness skills learned in this course are valuable and useful for people even if they do not meet the MSP criteria for funding. Our website has links to recommended community based programs that are private pay
- Participants are expected to commit to attending all 8 consecutive sessions
- They must be able to attend 90 minute sessions (both physically and from a social skills point of view as this is facilitated as a Group Medical Visit)
- A willingness to learn and a commitment to practice meditation is key
- Participants must be able to share briefly (verbal check in) in the group each week as a means of monitoring their progress
- There is a \$40 administration and materials fee

PLEASE NOTE: Although we teach in a group setting we do not offer “group therapy”. The purpose of this course is education and skill development in mindfulness. Facilitators are available to answer questions and for coaching during sessions only, and participants are asked to maintain a therapeutic relationship with a primary clinician or physician for their ongoing care and in the event that they require emergency assistance.

SPECIAL NOTE: Patients with acute severe depression, acute suicidality, psychosis, active symptoms of PTSD/flashbacks, history of violent behaviours, or those currently using substances to the degree that it would impair their participation in the course are NOT APPROPRIATE REFERRALS.

REFERRAL PROCESS:

Please *thoroughly* fill out the attached referral form (or print it from our website: bcalm.ca) and fax it to 250-984-7755. We will contact your patient directly with further information and registration opportunities.

Thank you for your ongoing support of our program!



The Art of Living Mindfully

Referral Form

Fx: 250-984-7755

info@bcalm.ca

BCALM.ca

PLEASE COMPLETE ALL INFORMATION BOXES BELOW INCLUDING EMAIL ADDRESS.
INCOMPLETE OR ILLEGIBLE REFERRALS WILL BE RETURNED.

Date of Referral:		
Client Name:		Phone:
Address:		**Client Email Address:** **
DOB:	Age: 21+ y/o	PHN:
Referred by: Clinic: Phone: Fax:		Family Physician: Phone: Fax:

What are the major stressors this patient is currently experiencing?

Please provide relevant history:

Diagnosis and ICD9 code:

CONDITIONS: Please indicate all that apply:

<input type="checkbox"/> Depression	<input type="checkbox"/> Anxiety	<input type="checkbox"/> Insomnia	<input type="checkbox"/> Addiction
<input type="checkbox"/> PTSD	<input type="checkbox"/> Personality Disorder	<input type="checkbox"/> Chronic Pain	<input type="checkbox"/> Acute Stress Situation

List other conditions:

MEDICATIONS: Please indicate all that apply:

<input type="checkbox"/> Antidepressants	<input type="checkbox"/> Mood stabilizers	<input type="checkbox"/> Anti-psychotics
<input type="checkbox"/> Anti-anxiety	<input type="checkbox"/> Opioids	<input type="checkbox"/> Hypnotics/Sedatives

List other medications:

Please confirm this patient is appropriate for group based learning:

<input type="checkbox"/> substance use would not interfere with ability to learn/participate	<input type="checkbox"/> is not at risk to harm self or others
<input type="checkbox"/> does not have a disorder that might interfere with group process	<input type="checkbox"/> is not cognitively impaired
<input type="checkbox"/> does not have active psychosis, PTSD, mania or dissociation	<input type="checkbox"/> does not have criminal or legal issues pending

We request that the referring clinician be available to the client for therapeutic support if the need arises.
This program cannot provide emergency/additional sessions or support.

Evidence for Mindfulness-Based Approaches – Meta-Analysis

Hoffman, S.G., Sawyer, A.T., Witt, A.A., and Oh, D. (2010). The Effect of Mindfulness-Based Therapy on Anxiety and Depression: A Meta-Analytic Review. *J Consult Clin Psychol.* 78(2): 169-183.

Although mindfulness-based therapy has become a popular treatment, little is known about its efficacy. The objective of this study was to conduct an effect size analysis of this popular intervention for anxiety and mood symptoms in clinical samples. A literature search was conducted using PubMed, PsycInfo, the Cochrane Library, and manual searches. The search identified 39 studies totaling 1140 participants receiving mindfulness-based therapy for a range of conditions, including cancer, generalized anxiety disorder, depression, and other psychiatric or medical conditions. **Effect size estimates suggest that mindfulness-based therapy was moderately effective for improving anxiety (Hedges' $g = 0.63$) and mood symptoms (Hedges' $g = 0.59$) from pre to post-treatment in the overall sample.** In patients with anxiety and mood disorders, this intervention was associated with effect sizes (Hedges' g) of 0.97 and 0.95 for improving anxiety and mood symptoms, respectively. **These effects sizes were robust**, unrelated to publication year or number of treatment sessions, and were maintained over follow-up. These results suggest that mindfulness-based therapy is a promising intervention for treating anxiety and mood problems in clinical populations.

Evidence for Mindfulness Based Approaches from Controlled Trials

Wellness and Stress Reduction in Various Populations

- Shapiro, S.L., Schwartz, G.E., & Bonner, G. (1998). Effects of mindfulness-based stress reduction on medical and premedical students. *Journal of Behavioral Medicine*, 21, 581- 599
- Williams, K.A., Kolar, M. M., Reger, B. E. & Pearson, J. C. (2001). Evaluation of a wellness-based mindfulness stress reduction intervention: A controlled trial. *American Journal of Health Promotion*, 15(6), 422-432.
- Reibel, D. K., Greeson, J. M., Brainard, G. C. & Rosenzweig, S. (2001). Mindfulness-based stress reduction and health-related quality of life in a heterogeneous patient population. *General Hospital Psychiatry*, 23(4), 183- 192.

Positive Mood and Immune Response in Adults in Workplace

- Davidson, R.J., Kabat-Zinn, J., Schumacher, J., Rosenkranz, M., Muller, D., Santorelli, S.F., Urbanowski, F., Harrington, A., Bonus, K., Sheridan, J.F. (2003). Alterations in brain and immune function produced by mindfulness meditation. *Psychosomatic Medicine*, 4, 564-70

Anxiety Disorders

- Miller, J.J., Fletcher, K., & Kabat-Zinn, J. (1995). Three-year follow-up and clinical implications of a mindfulness meditation-based stress reduction intervention in the treatment of anxiety disorders. *Gen Hosp Psychiatry*. 3,192-200.

Chronic pain

- Astin J.A., Berman, B.M, Bausell, B., Lee, W.L., Hochberg, M., & Forys, K.L.(2003). The efficacy of mindfulness meditation plus Qigong movement therapy in the treatment of fibromyalgia: a randomized controlled trial. *J Rheumatology*, 10,2257-62.

Quality of Life in Cancer Patients

- Specia, M., Carlson, L., Goodey, E. & Angen, M. (2000). A randomized wait-list controlled trial: The effects of a mindfulness meditation based stress reduction program on mood and symptoms of stress in cancer outpatients. *Psychosomatic Medicine*, 62, 613-622.

Skin Diseases

- Kabat-Zinn, J., Wheeler, E., Light, T., Skillings, A., Scharf, M.J., Cropley, T.G., Hosmer, D., & Bernhard, J.D. Influence of a mindfulness meditation-based stress reduction intervention on rates of skin clearing in patients with moderate to severe psoriasis undergoing phototherapy (UVB) and photochemotherapy (PUVA). *Psychosomatic Medicine*,5,625-32.

Prevention of Recurrence of Depression

- Teasdale, J.T., Segal, Z.V., Williams, J.M., Ridgeway, V., et al, (2000); Prevention of relapse/recurrence in major depression by mindfulness-based cognitive therapy. *Journal of Consulting and Clinical Psychology*, 68, 615-623.