

Mindfulness Medicine: Basics for Pediatricians

*Mindful Strategies to Deal with Stress, Anxiety and Conflict:
Self and patient care*

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Future of Pediatrics, 2019



Overview

- Definitions of, anxiety, stress and conflict
- Stressors: patients, families, caregivers and providers.
- Mindfulness intervention strategies and resources

What are Stress, Anxiety and Conflict?

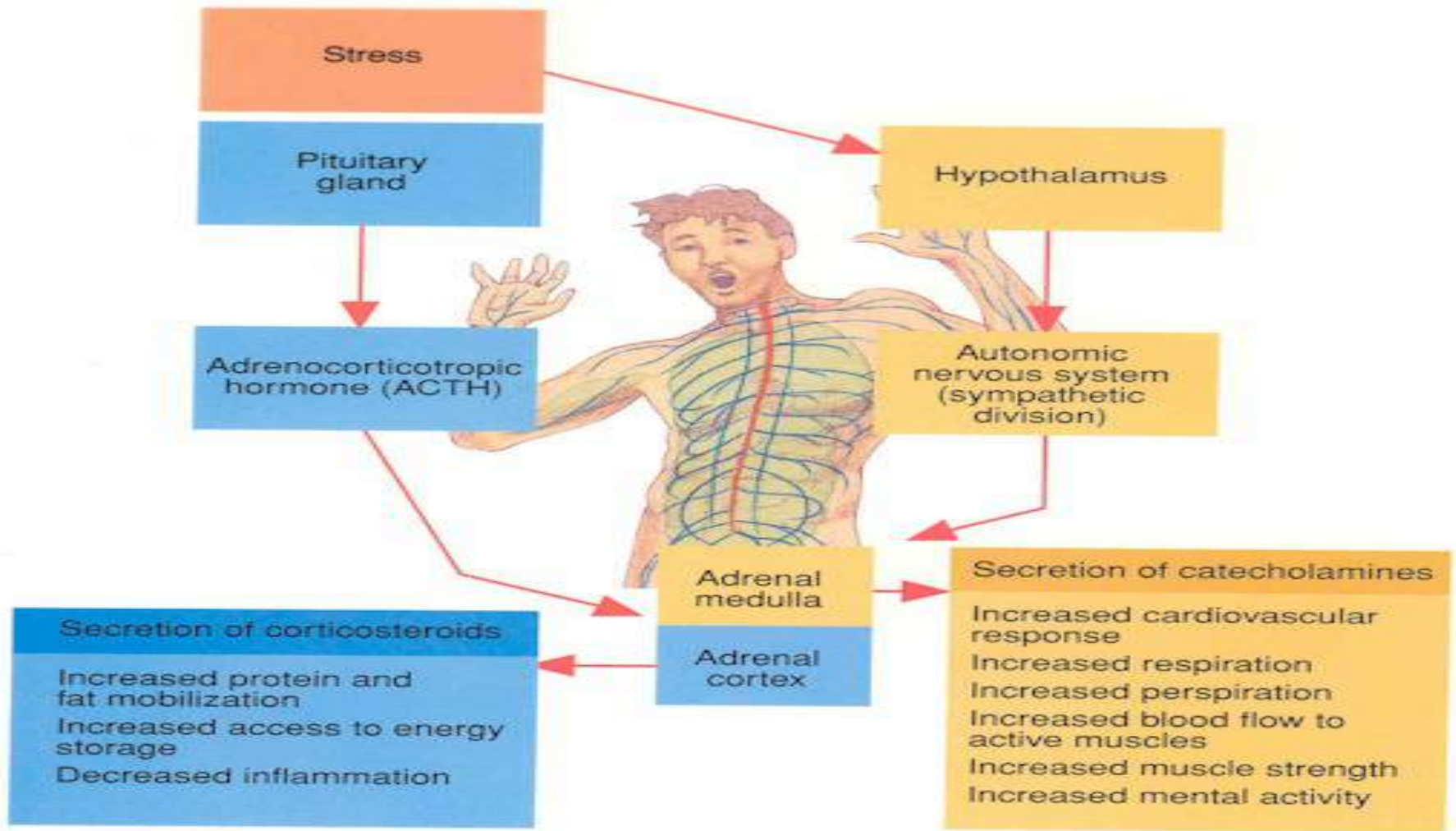
Stress results from interactions with the environment in which there is perceived or actual threat.

Anxiety is a psychophysiological phenomena originating in the body and/or brain and affects our behavior, thoughts and interactions with the environment.

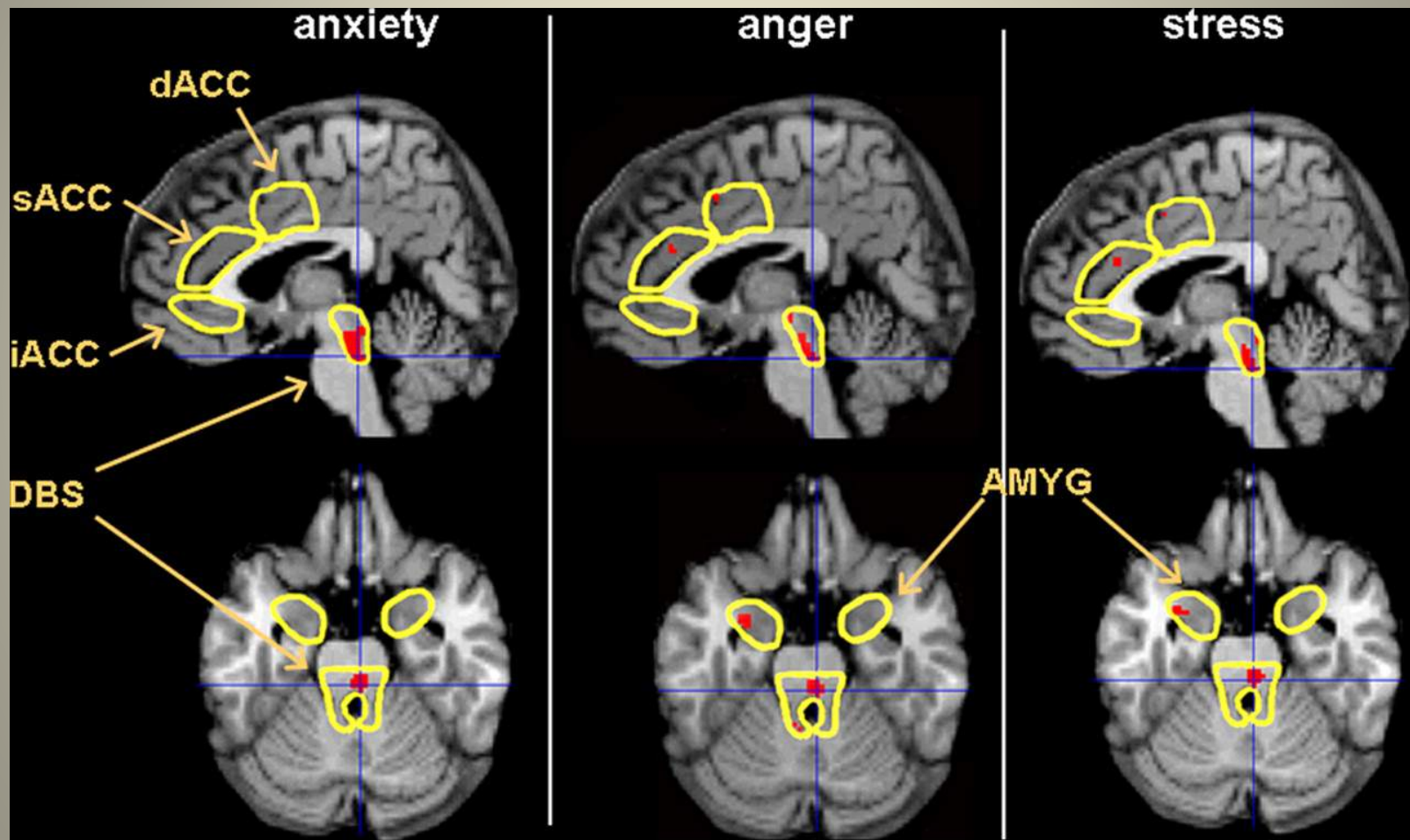
Conflict is transient or chronic interactions, with outside forces (e.g., people, institutions) that are obstacles or threats, or a failure to have our needs met

What are Stress, Anxiety and Conflict?

Brain-body pathways in stress



What are Stress, Anxiety and Conflict?



NEW RESEARCH IN

Physical Sciences

Social Sciences

Biological Sciences

Meditation experience is associated with differences in default mode network activity and connectivity



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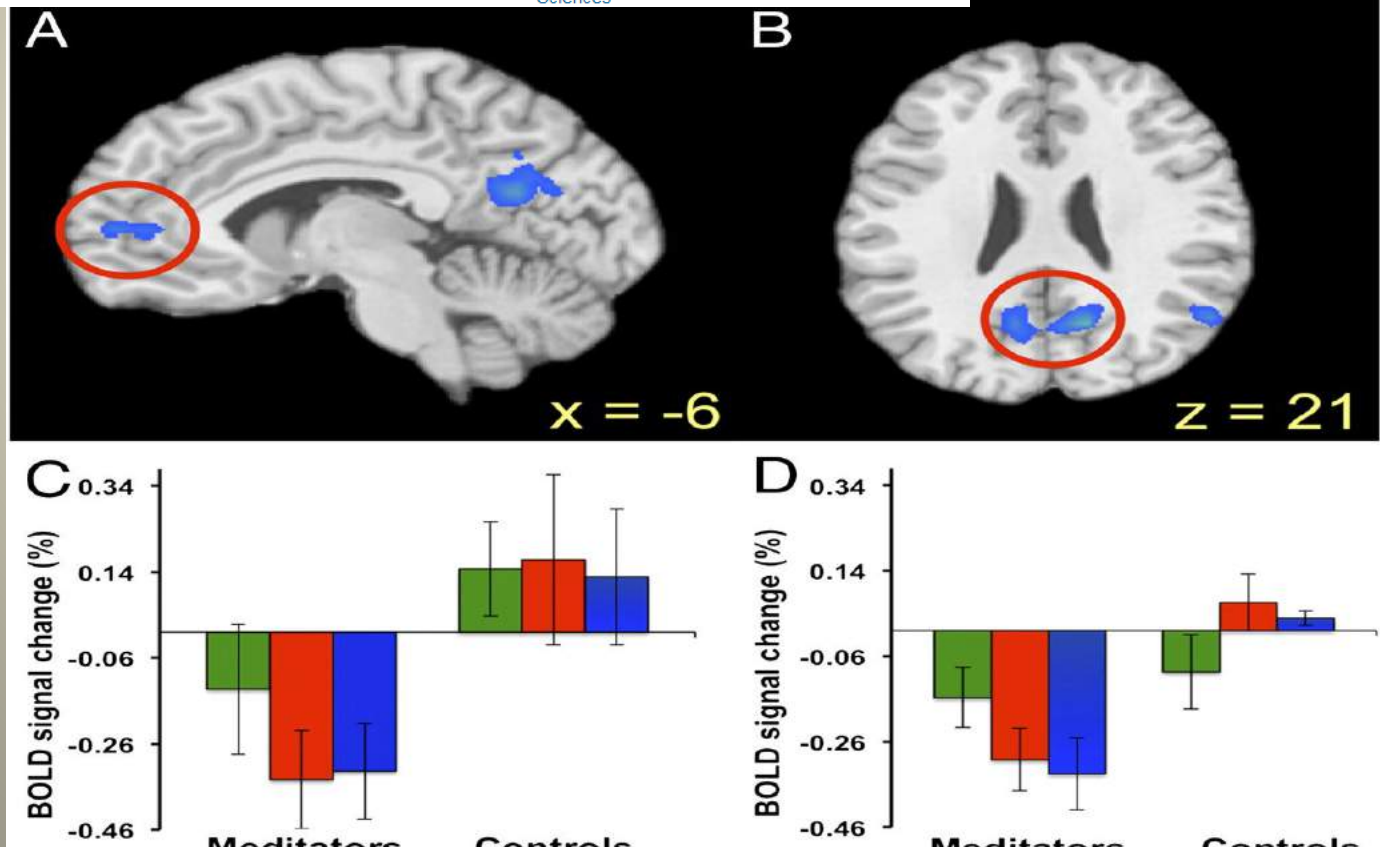
Judson A. Brewer, Patrick D. Worhunsky, Jeremy R. Gray, Yi-Yuan Tang, Jochen Weber, and Hedy Kober

PNAS December 13, 2011 108 (50) 20254–20259; <https://doi.org/10.1073/pnas.1112029108>

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ARTICLE CLASSIFICATIONS

Biological Sciences » Psychological and Cognitive Sciences



Are Stress, Anxiety and Conflict Bad?

YES

- Change body and brain chemistry
- Increase morbidity – Illness
- Interference with goals and pursuit and realization of happiness

&

NO

- Essential part of human experience
- Coping changes body and brain chemistry
- Improves cognition, awareness and self efficacy

Central Tenet of Mindfulness Practices

“Between stimulus and response there is a space. In that space is our power to choose our response. In our response lies our growth and our freedom”

Attributed to: Viktor E. Frankl, Author - Man's Search for Meaning, 1946

Mindfulness Based Coping Strategies



MIND BODY INTERACTION

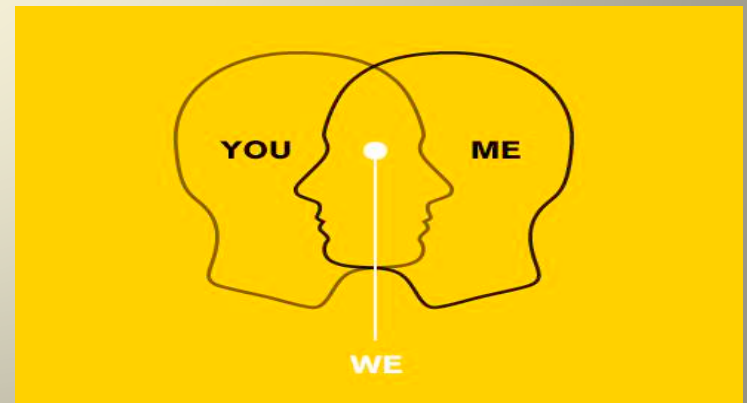


**"It's not how much we
give but how much
LOVE we put into giving."
— Mother Teresa**

COMPASSION



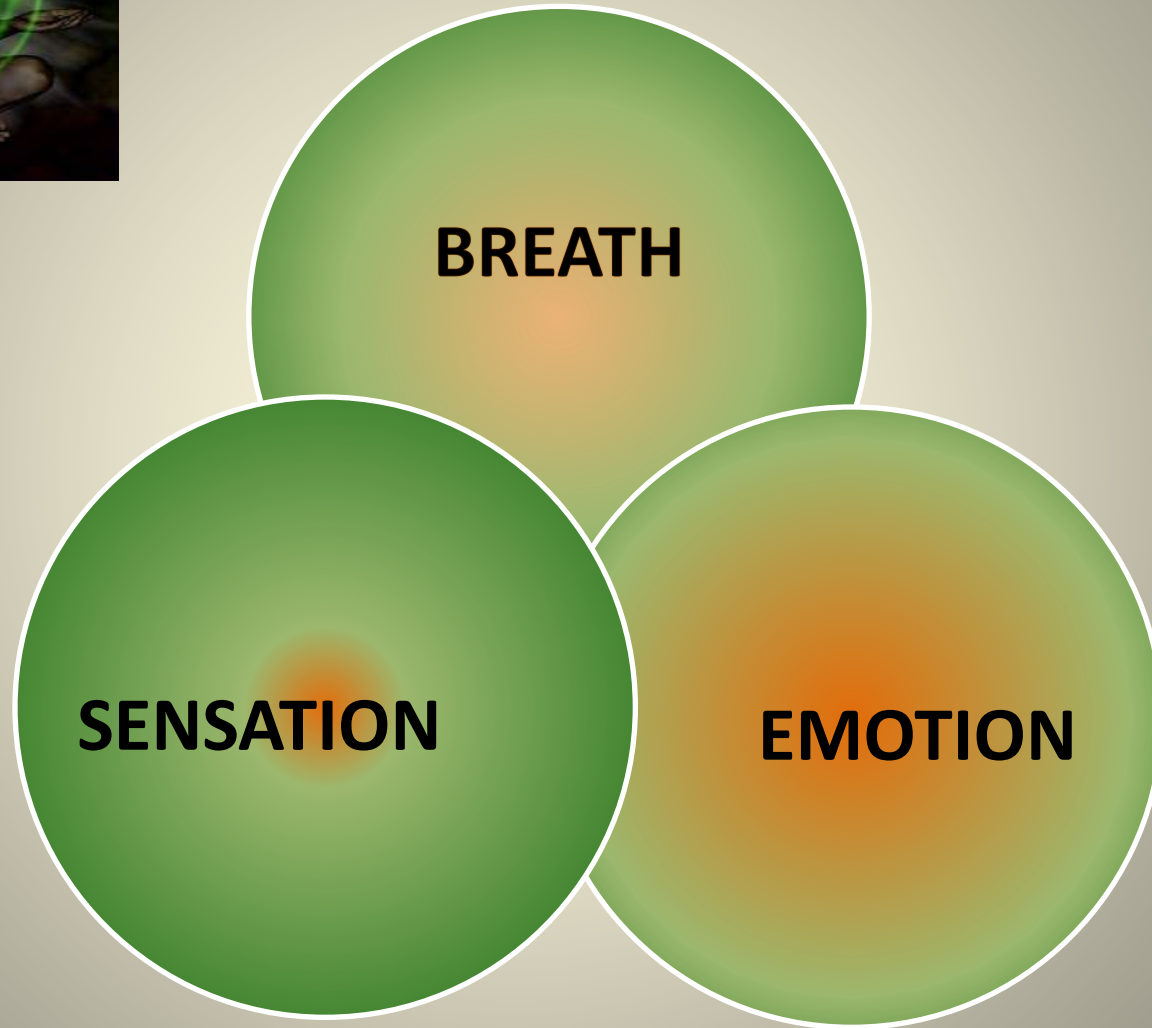
ACCEPTANCE



MINDFUL COMMUNICATION



MIND BODY INTERACTION



Mom: Welcome home darling, how was school

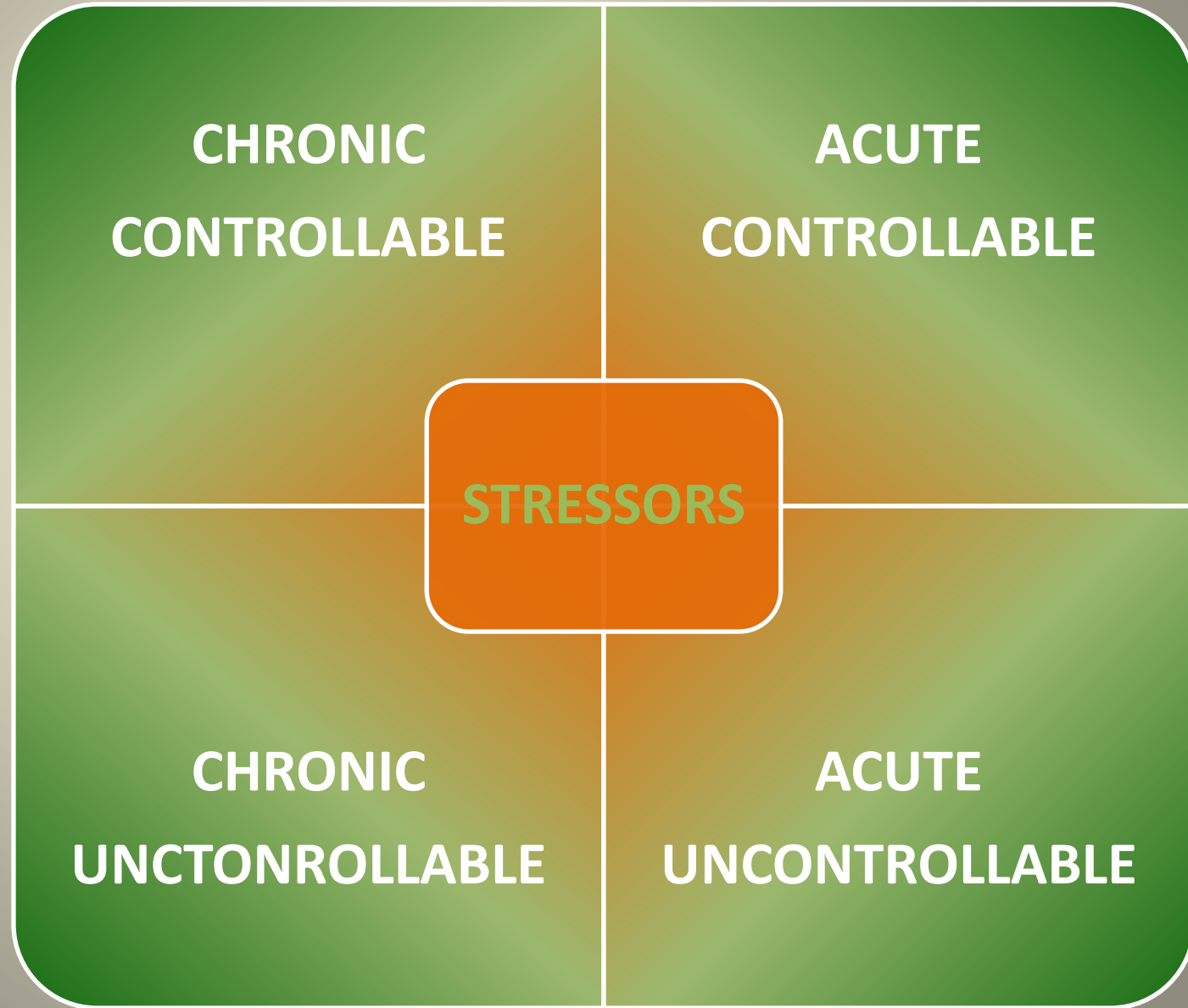
A: Eh. Ok. I turned in my home work

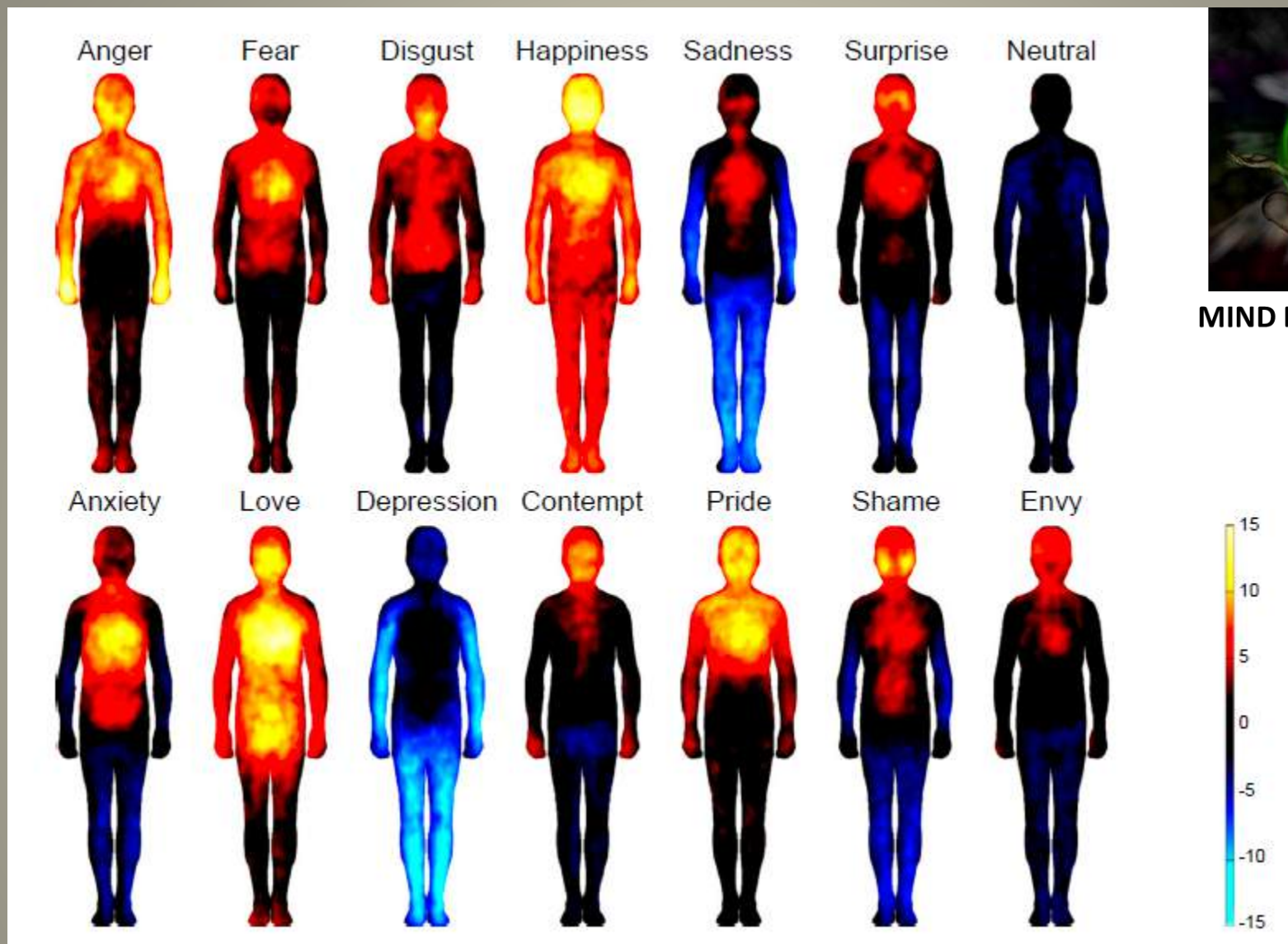
Mom: Eh? What is up.

A: We had health today....I think I failed our mindfulness exercise. I am terrible at clearing my mind....I don't understand it....!

- The whole class **meditated** at second meeting today.
- Once we finished, A asked right away, "Are we hollow inside?" J asked what he meant.
A: I thought my brain was hollow. My neck and my stomach felt hollow.
J: That's interesting. Why do you think A might have said that?
E: You get more ideas when you're calmed down.
Ge: I felt my bones were dinosaur bones. I felt heavy in my belly.
W: I felt tall.
H: I felt calm
A: I felt hollow.

ACCEPTANCE





MIND BODY INTERACTION

Fig. 2. Bodily topography of basic (*Upper*) and nonbasic (*Lower*) emotions associated with words. The body maps show regions whose activation increased (warm colors) or decreased (cool colors) when feeling each emotion. ($P < 0.05$ FDR corrected; $t > 1.94$). The colorbar indicates the t -statistic range.

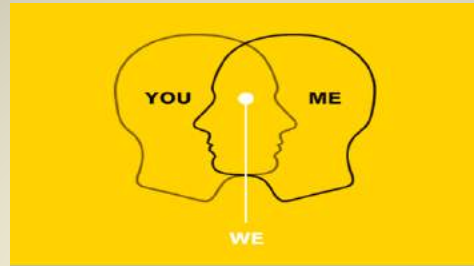
Mindfulness Based Stress Reduction

<http://www.umassmed.edu/cfm/>

- **Focus Mindfulness:** emphasis on internal thought/emotional/sensation
- **Awareness Mindfulness:** Observing your sensory, cognitive and emotional filters
- **Breath**
- **Body Scan**
- **Object Meditation**
- **Compassion Meditation**
- **Walking Meditation**

<https://positivepsychologyprogram.com/mindfulness-based-stress-reduction-mbsr/#jon-kabat-zinn>

Communication



MINDFUL COMMUNICATION

- Listen – look – Feel
- Repeat what you heard
- Check-in – “was I right”

Mindfulness Practice

Social Cognitive and Affective Neuroscience Advance Access published May 9, 2013

doi:10.1093/scan/nst060

SCAN (2013) 1 of 7

Differential pattern of functional brain plasticity after compassion and empathy training

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Although empathy is crucial for successful social interactions, excessive sharing of others' negative emotions may be maladaptive and constitute a source of burnout. To investigate functional neural plasticity underlying the augmentation of empathy and to test the counteracting potential of compassion, one group of participants was first trained in empathic resonance and subsequently in compassion. In response to videos depicting human suffering, empathy training, but not memory training (control group), increased negative affect and brain activations in anterior insula and anterior midcingulate cortex—brain regions previously associated with empathy for pain. In contrast, subsequent compassion training could reverse the increase in negative affect and, in contrast, augment self-reports of positive affect. In addition, compassion training increased activations in a non-overlapping brain network spanning ventral striatum, pregenual anterior cingulate cortex and medial orbitofrontal cortex. We conclude that training compassion may reflect a new coping strategy to overcome empathic distress and strengthen resilience.

Keywords: fMRI; social; emotion; insula; medial orbitofrontal cortex

INTRODUCTION

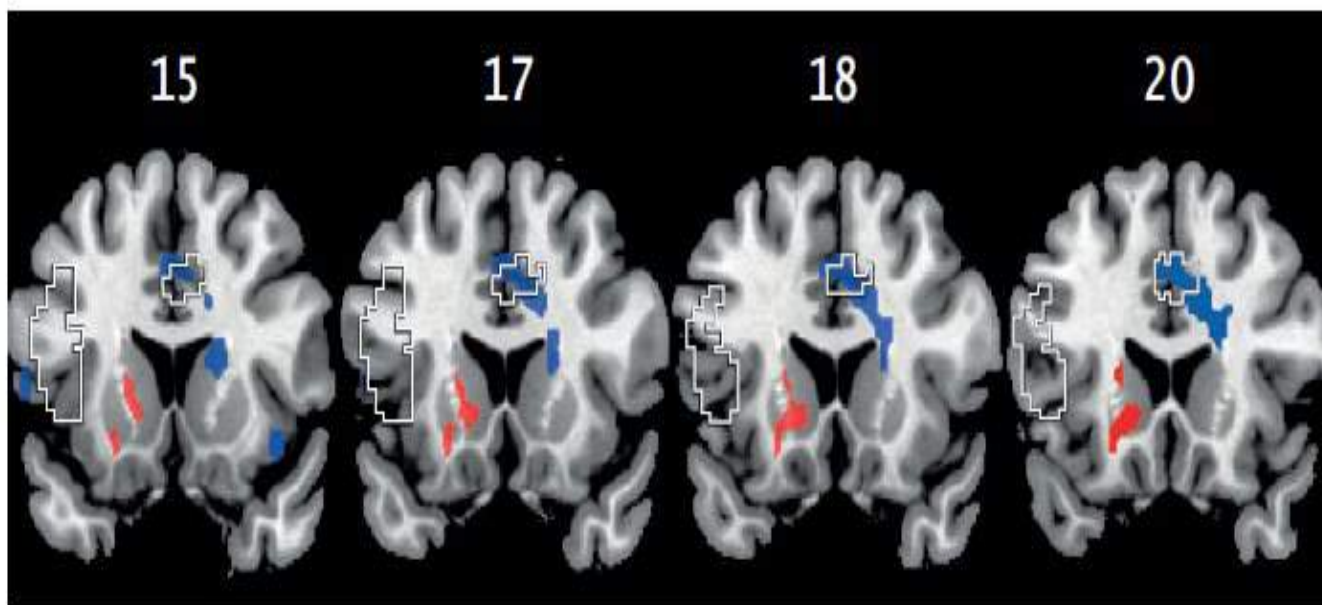
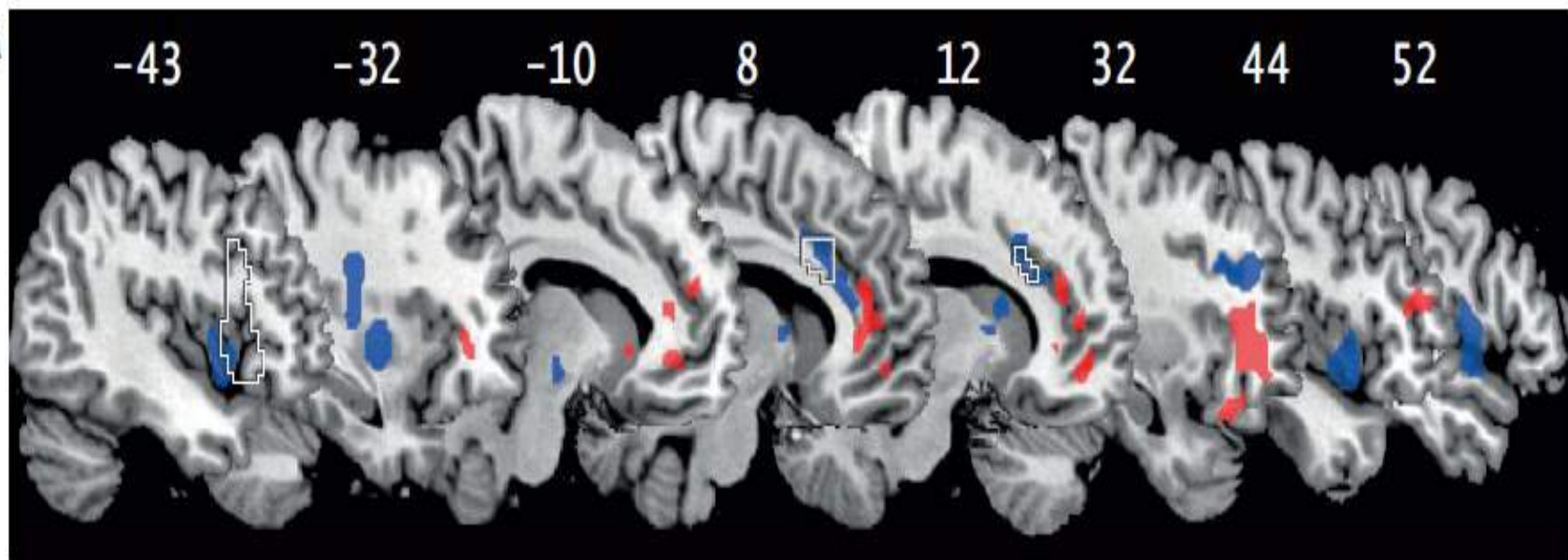
Journal of Social Neuroscience, Volume 1, Number 1, May 2013, pp 1–12

Empathy Vs Compassion

Empathy: feeling the distress or pain that others feel

Compassion: ...”a feeling of concern for the suffering of others that is associated with the motivation to help” (Keltner and Goetz, 2007)

A

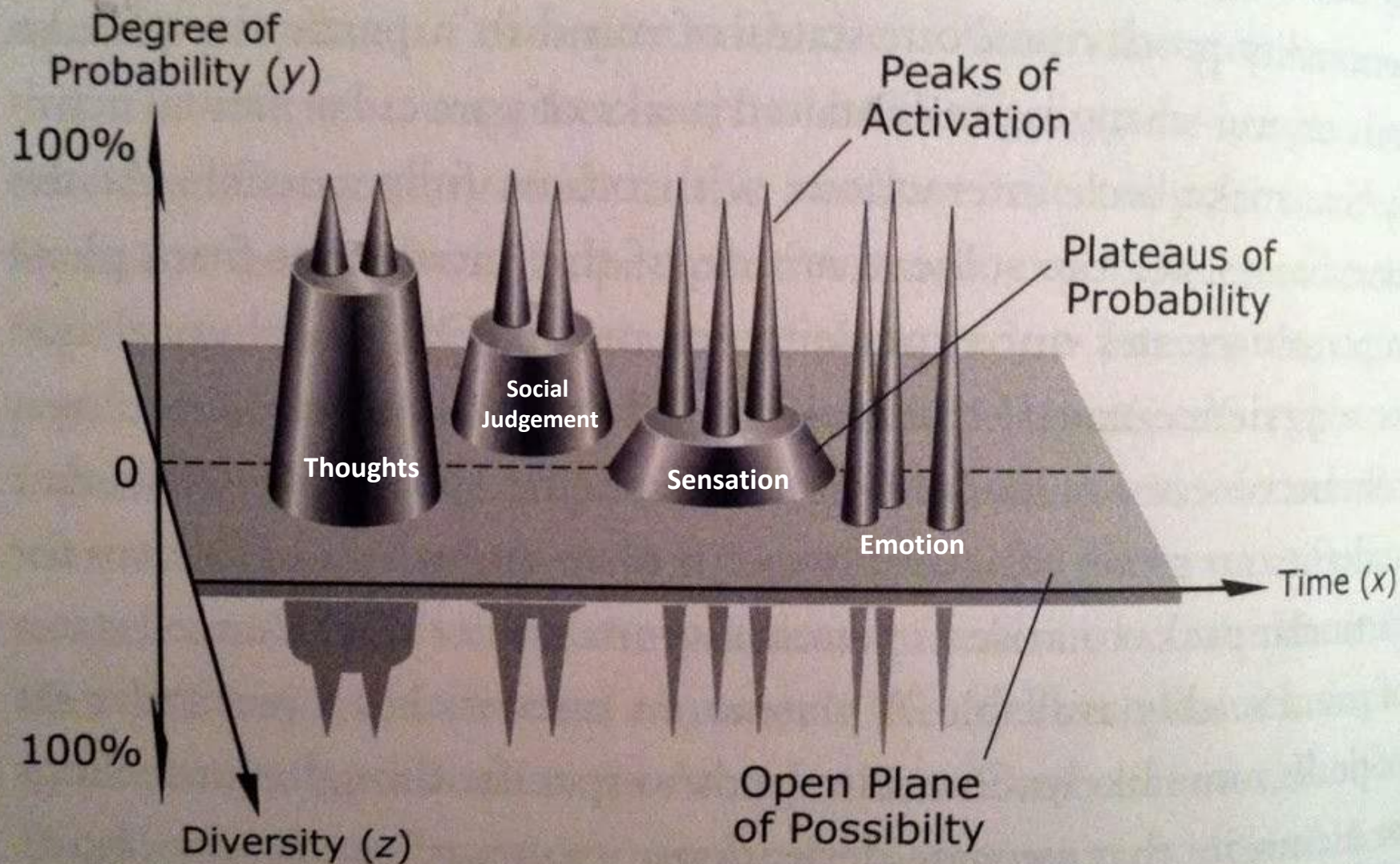


- $\Delta 1$ Emp HE > $\Delta 1$ Mem HE
- $\Delta 2$ Comp HE > $\Delta 2$ Mem HE
- ⊞ Overlaps with empathy meta-analysis





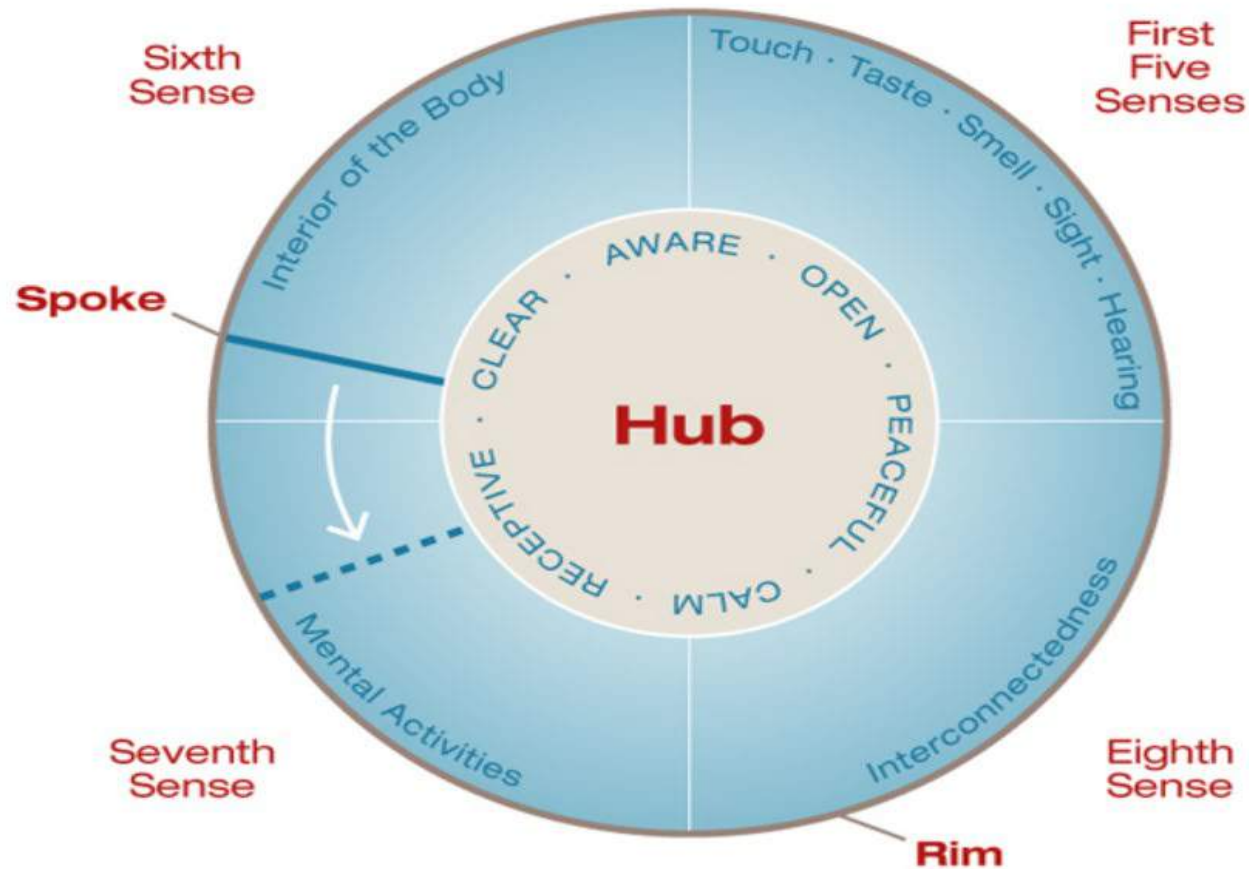
Subjective Experience



Neural Firing



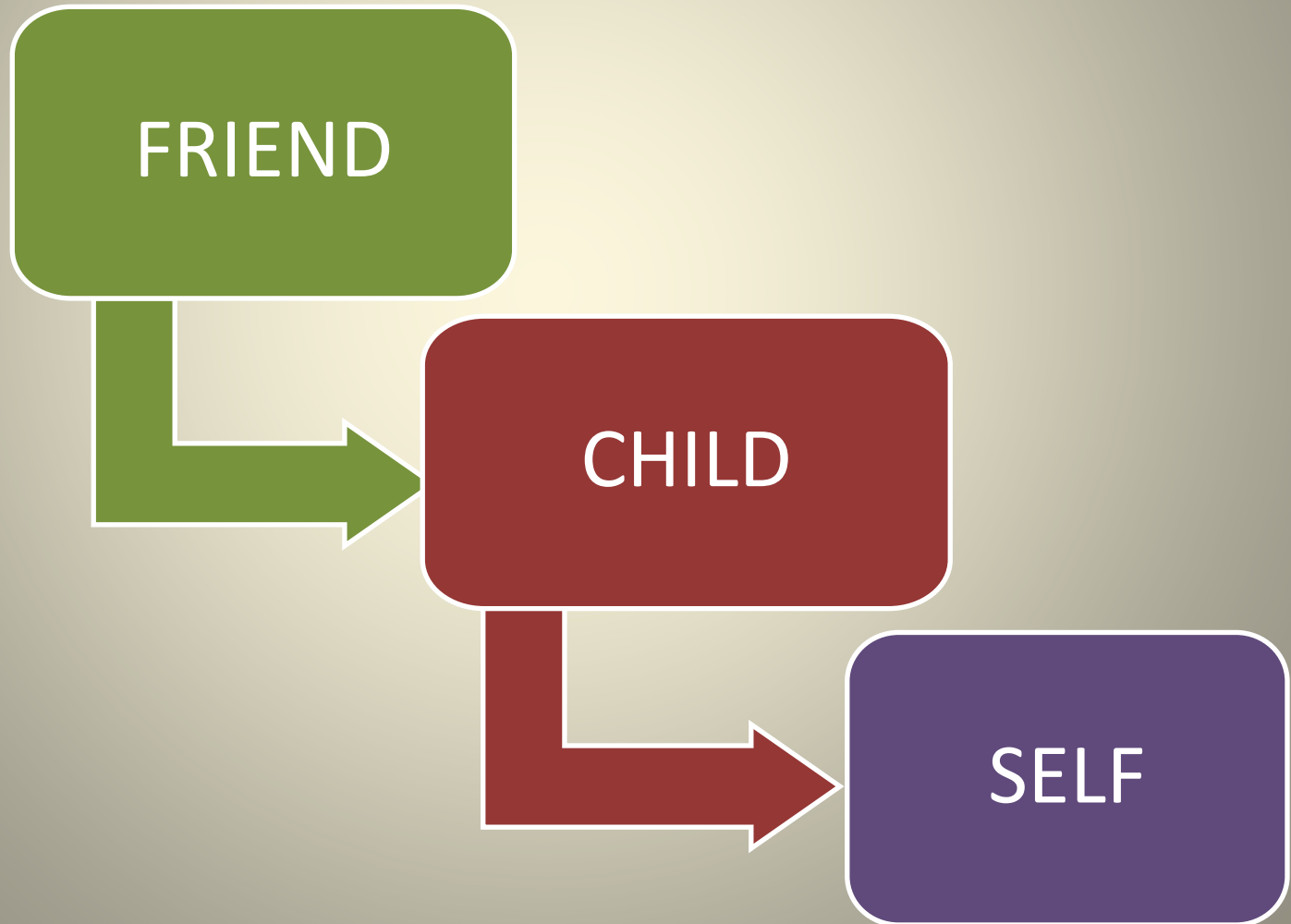
Wheel of Awareness





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— Mother Teresa

COMPASSION



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THANK YOU

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- Chopraananda.com (App for children)
- Calm (App for adults and children)