

Abstract of Study Funded by the Joint Grant Awards Program in 2016

A Brief Intervention for Mindfulness-Based Relapse Prevention in Primary Care: A Feasibility Pilot Study for Patients in Treatment for Opiate Addiction with Buprenorphine. G1602JG

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Background: Opiate addiction is a growing problem nationally and treatment is hampered by high rates of relapse. It is unknown whether a brief intervention model for teaching mindfulness meditation techniques can improve outcomes.

Specific Aims: 1) To establish the **feasibility** of recruiting patients in primary care office-based treatment for opiate addiction to participate in research on a brief mindfulness intervention. 2) To evaluate the effectiveness of the intervention in **motivating patients to practice mindfulness skills** at home. 3) To determine if home practice **reduces risk of relapse**, and **correlates with improvements** in "mindfulness trait," cravings, and affect.

<u>Methods</u>: This will be a **prospective feasibility pilot cohort study**. Patients (goal N=50) will be recruited at the time of induction into our buprenorphine treatment program and complete baseline validated scales of mindfulness trait, craving symptoms, and affect. Baseline demographic and clinical data for each patient will be extracted from the electronic health record (EHR). At an early group therapy visit, all participants will receive the intervention: a brief education on mindfulness meditation including a 5-minute practice session conducted by a family medicine resident or attending. Study participants will receive access to audio files of meditation exercises and a logbook for recording home practice. Patients will be asked to practice at least a 5-minute exercise daily. Follow-up validated scales and data regarding relapse behaviors will be collected at 2, 4 and 6 months follow-up; analysis will include correlation with home mindfulness practice. Post-study focus groups will provide qualitative data for improvement of future research.