

The effectiveness of supplementary mindfulness-based cognitive therapy for non-remitted patients with anxiety disorders: final report of a randomized controlled trial

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Background

Anxiety disorders are intractable and long-term diseases. Cognitive behavioral therapy (CBT) and pharmacotherapy are recommended as the first choice treatments for anxiety disorders. However, the opportunity to receive CBT is limited across the world. Further, a large number of patients do not recover or remain symptomatic even after pharmacotherapy which is dominant treatment in daily practice. Therefore, the second-line treatment strategy is important for the non-remitted patients who have failed or have refused with pharmacotherapy.

Objectives

This study aimed to examine the efficacy of mindfulness-based cognitive therapy (MBCT) augmentation to treatment as usual (TAU) in anxiety disorder patients.

Method

Participants aged 20 and 75 years with panic disorder/agoraphobia (PD/AP) and social anxiety disorder (SAD) were randomized (in a 1:1 ratio) to the MBCT group or the wait-list control group. The main outcome was the change in scores of State-Trait Anxiety Inventory (STAI)-state and STAI-trait at eight weeks.

Results

Twenty participants were randomized to the MBCT group and 20 to the control group. One participant dropped in both groups, and no serious adverse events were observed.

Difference in mean change scores in STAI-state (mean between-group difference -10.1, 95%CI -16.9 to -3.2, $p=0.004$) and STAI-trait (mean between-group difference -11.7, 95%CI -17.0 to -6.4, $p<0.001$) between the MBCT group and the control group were significant. As for secondary outcomes, significant difference was observed in the scale for distress, mindfulness and SAD. No significant difference was found in the scale for depression, quality of life and PD/AP.

Discussion

To our knowledge, this is the first RCT study that demonstrated the effectiveness of MBCT as an augmentation treatment for non-remitted patients with anxiety disorders in Japan. We were not able to evaluate the treatment efficacy solely from MBCT because of the lack of active placebo. However, this study implies that the effectiveness of usual clinical usage of MBCT as supplementary treatment from a pragmatic perspective.

Conclusion

Supplementary MBCT is effective for non-remitted patients with anxiety disorders in Japan.

