

Randomized controlled trial.
Patients with mod-severe UC who were in clinical remission were randomized to MBSR (mindfulness-based stress reduction) or time/attention control.

Primary endpoint: Disease status (absence of flares, time to flare and severity of flares) at year 1.

Results: N=55

- Absence of flares, time to flare and severity of flare over 1 year were similar between groups.
- Post hoc analysis showed that MBSR decreased the % of participants with at least one flare-up among those with top tertile urinary cortisol and baseline perceived stress 30% vs 70%, $p < 0.0001$.
- MBSR prevented a drop in the IBD-QoL during flare $p > 0.01$

Conclusion:

MBSR did not affect the rate or severity of flare-ups in UC patients in remission. However, MBSR might be effective for those with high stress reactivity (high perceived stress and urinary cortisol) during remission. MBSR appears to improve QOL in UC patients by minimizing the negative impact of flare-ups on QOL.

A Randomized Controlled Trial of Mindfulness- Based Stress Reduction to Prevent Flare-Up in Patients with Inactive Ulcerative Colitis

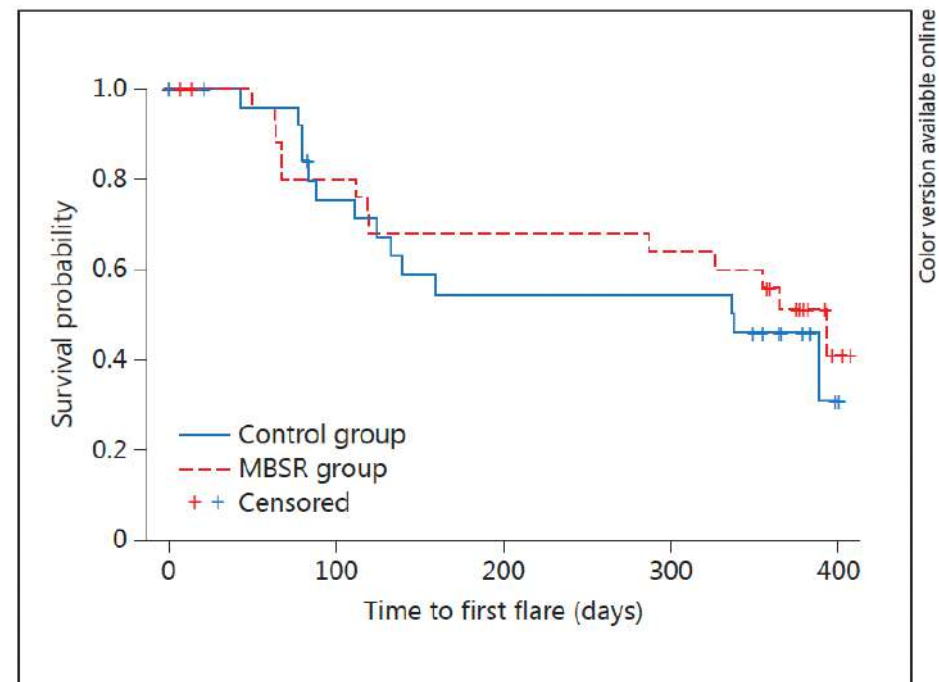


Fig. 2. Kaplan-Meier survival analysis. Comparison of time to flare from baseline to last visit (flare-up). Time to first flare: as measured in number of days from baseline visit to flare-up.

