

TEACHING RESIDENTS COGNITIVE BEHAVIORAL TECHNIQUES:

**BUILDING THE FOUNDATION FOR AN EFFECTIVE FIFTEEN
MINUTE HOUR**

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Focus of Presentation

- **The BATHE Technique and evidence for its effectiveness**
- **What Cognitive Therapy is and how residents can learn to do it**
- **The importance of thinking patterns in determining subsequent behavior and health**
- **Using the Positive BATHE, to enhance health by fostering affirmative thinking**

Mental Health and Primary Care

- **Most mental health services here and elsewhere are provided in primary care--and this will continue**
- **Primary care is the de facto mental health system**
- **At least one third of primary care patients have a psychiatric diagnosis**
- **Three fourths will primarily complain of physical symptoms**
- **Cognitive therapy is an effective modality that can be provided in the framework of a brief office visit**

Therapy in Primary Care

- **Physicians can treat emotional problems without labeling them mental problems**
- **Emotional concerns are addressed normally during medical treatment**
- **Physicians are in a unique position to understand body-mind interactions**
- **Every visit should involve attention to the emotional component**

The BATHE Technique

Background

Affect/Feeling

Trouble

Handling

Empathy

How to B.A.T.H.E. your
patients as you S.O.A.P. them:

Background: What is going on in your life?

Affect: How does that make you feel?

Trouble: What about it troubles you most?

Handling: How are you handling that?

Empathy: That must be very difficult.

The Study

- **Dr. Sandra Leiblum, Eliezer Schnall and psychology interns designed it**
- **IRB Approved**
- **4 doctors, 10 patients with BATHE, 10 patients no BATHE**
- **Research assistant (RA) obtained informed consent in waiting room**
- **RA informed physicians of condition and collected data after the visit**

Leiblum et al. *Fam Med* 2008(6)407-11

The Results

	BATHE	Non- BATHE	Significance
Friendliness/courtesy of your doctor	4.71	4.45	NS
Explanations your doctor provided about any problems/condition you may have	4.47	3.95	0.01
Concern your doctor showed for your questions/worries	4.46	3.95	0.03

1 = Very Poor, 5 = Very Good

The Results

	BATHE	Non- BATHE	Significance
Your doctor's efforts to include you in decisions about your treatment	4.11	3.47	0.05
Information your doctor gave you about medications	4.59	3.92	0.00
Instructions your doctor gave you about follow-up care	4.63	3.94	0.00

1 = Very Poor, 5 = Very Good

The Results

	BATHE	Non- BATHE	Significance
Likelihood of your recommending this doctor to others	4.65	4.20	0.02
Please rate your overall satisfaction with today's visit to your doctor	4.68	3.95	0.00

1 = Very Poor, 5 = Very Good

BATHE Compliance

	BATHE	Non- BATHE	Significance
Did your doctor ask what has been going on in your life, or what may have changed recently?	86.8% (33)	50.0% (20)	0.00
Did your doctor ask how your mood or feelings have been affected by what has been going on in your life lately?	64.9% (24)	20% (8)	0.00
Did your doctor ask what worries or concerns you may have about what has been going on in your life lately?	75.7% (28)	27.5% (11)	0.00

BATHE Compliance

	BATHE	Non- BATHE	Significance
Did your doctor ask how you are handling or coping with what has been going on in your life lately?	75.7% (28)	25.0% (10)	0.00
Was your doctor sympathetic to your needs or concerns?	97.3% (36)	75.0% (30)	0.00

Basics of CBT Therapy

- 1. CBT is based on the cognitive model of emotional response**
- 2. CBT is brief and time-limited (Elements can be included into a 15 minute visit)**
- 3. A therapeutic relationship is required**
- 4. It's a collaborative effort**
- 5. CBT is based on stoic philosophy**

More Basics

- 6. CBT uses the Socratic method**
- 7. CBT is structured and directive**
- 8. CBT is based on an educational model**
- 9. CBT theory and techniques rely on rational thinking**
- 10. Homework is a central feature of CBT.**

Cognitive-Behavioral Therapy (CBT) Demystified

- **We constantly tell ourselves, as well as others, stories**
- **These stories create our reality and affect our experience**

Understanding the Impact of Our Stories, i.e. What we Think

- **The stories reflect our view of who we are**
- **These stories determine what we are capable of doing**

Cognitive Therapy Edits the Story

- **First: The story must be heard**
- **Second: The story must be reflected back with empathy**
- **Third: Limits must be challenged**

Challenging Absolutes

- **Always**
- **Never**
- **Everyone**
- **No-one**

Challenging Imposed Limits

- **Can' t**
- **Must**
- **Should**
- **It' s impossible**

The Amazing Power of the Word “YET”

- YET implies it is possible
- YET implies impending change
- YET empowers people to contemplate changes

Positive Psychology: The Science of Happiness

There is a substantial cognitive component to happiness:

“It is not just who we are that matters,
but how we think about our lives”

MEP Seligman
Handbook of Positive Psychology

Core Foci of Positive Psychology

- **Understand who we are and how we cope with adversity**
- **Study populations to understand what makes some people more resilient than others**
- **Recognize that optimism and other resilient thoughts and behaviors are learned behaviors**
- **Teach resilience and help individuals tap into their already existing core strengths and virtues**
- **Study and promote happiness despite circumstances**

Confirmatory Research

- **Recent studies highlight the striking effects of positive thoughts**
- **They enhance the ability of the immune system to protect the body**
- **They help overcome depression**
- **They promote both physical and mental health**

(Psychological Bull 2005:131(6)925-971)

Positive vs. Negative Thoughts

- **Positive thoughts or attitudes release endorphins and have a tonic effect on organs**
- **Negative thoughts are adverse stimuli that release adrenaline and cause weakness and enervation of specific organs**

The Positive Bathe

- **B: Best** What's the best thing that's happened to you this week? Or since I saw you?
- **A: Affect or Account:** How did that make you feel? Or How to you account for that?
- **T: Thankfulness:** For what are you most grateful?
- **H : Happen:** How can you make things like that happen more frequently?
- **E: Empathy or Empowerment:** That sounds fantastic. I believe that you can do that.

Benefits of Accenting the Positive

- **Studies overwhelmingly connect life satisfaction with increased health and longevity**
- **Physicians' ability to promote positive affect in their patients becomes an important skill**
- **The Positive BATHE can also be used among residents, faculty and staff to overcome negativity related to circumstances that can't be changed**

To Bathe or Positive Bathe That is the Question

- **With a new patient or new complaint use the standard BATHE**
- **When you haven't seen a patient for several months, use the standard BATHE**
- **In follow up visits try using the Positive BATHE**
- **With routine visits for chronic conditions use the Positive BATHE on a regular basis to focus patients on the good things in their lives**

Summary

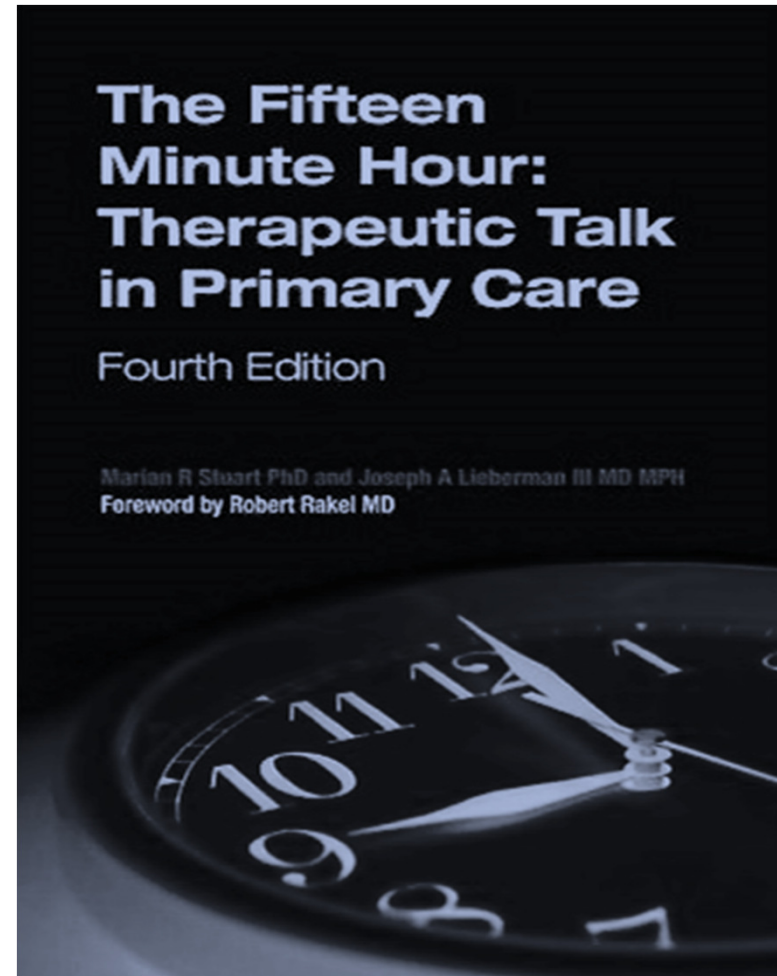
- **The BATHE Technique can be used to efficiently obtain relevant psychosocial data while improving patient satisfaction**
- **Empirical evidence supports the benefit of focusing on the positive aspects of life**
- **The Positive BATHE may enhance patient health by fostering affirmative thinking**

REFERENCES

- Stuart, MR & Lieberman JA III *The Fifteen Minute Hour: Therapeutic Talk in Primary Care*, Radcliffe Publishing LTD, Oxford, UK 2008
- Leiblum SL, Schnall E, Seehuus M, *et al.* To BATHE or not to BATHE: Patient Satisfaction with Visits to their Family Medicine Physician. *Fam Med.* 2008:407-11
- Pressman SD, Cohen S. Does positive affect influence health? *Psych Bull* 2005;**131**(6):925-71

The 2008 Edition of the Text

Described as
Excellent by Doody's



“The art of medicine is to keep the patient amused until nature effects a cure”

Voltaire

THE BEGINNING

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