

getting big results from brief consults in primary care

Department of General Practice and Primary
Health Care University of Auckland

bruce arroll

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the human brain is not designed for thinking

Department of General Practice and Primary
Health Care University of Auckland

bruce arroll

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**New Zealand
Aotearoa**

3



**Ko Rangitoto tōku maunga
Rangitoto my mountain**

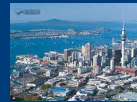
4



Ko Rangitoto tōku maunga

Rangitoto my mountain

5



Ko Waitemata tōku moana

Waitemata my "water"

6



Ko tauwi ahau

People who came later

7



Canada 7 years
Hamilton, Fort St James, Lillooet
Vancouver

8



No Tamaki Makaurau tōku
Kainga

Where I live is Auckland

9



Ko Bruce Arroll ahau

10

You are from there, every one of you

No Reira tena koutou, tena koutou, tena koutou katoa

You are from there greetings to you

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current

- Auckland graduate
- GP in Manurewa
- Prof and HOD Dept of GP U of A
- Research brief assessments
- Rapid interventions
- Grandfather of 5.0

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aim of training

- can do work/love/play
 - behavioral activation
 - exposure therapy (mindful anchor)
- can do choice point
- confidence to do tomorrow

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introduction

- who are you
- one of your values

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assess patient

- PHQ 9/GAD 7
- Kessler
- 0 to 100 emotional qol
- < 50 94% specific
- > 50
- label distress/stuck

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ACT processes

- open (fusion, acceptance)
- aware (present and perspective)
 - symptom shift
- engaged (values and commitment)
- creative hopelessness
- workable

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Case #1: man in 40s

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HBA1 C

- May 2014 146 15.5
- Aug 2015 138
- Dec 2015 131
- July 2016 149
- **ACT consult**
- Sept 2016 128 13.9

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3 quick processes

- five minutes
 - creative hopelessness
 - values
 - committed action
 - 6/10 then 8/10

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the human brain

- if so what is its role?

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safety

- task to keep you alive



- psychoeducation for patients

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Tiger alarm

- turning it down



- psychoeducation for patients

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searching for the delete button

- something negative happens
- a search for the delete button
- there is no delete button
 - the brain has to remember

23

problem solving emotional stuff

- start to ruminate and worry



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problem solving emotional stuff

- 3 am in the morning -awake
- the solution becomes the problem

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problem solving emotional stuff

- PS good for objective problems
- PS not good for subjective issues
- ACT has strategies to hold this subjective stuff lightly

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the mind's skills

- brilliant at avoiding physical pain
- not great at emotional pain
- live with ease – move toward
– if safe

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steve hayes- U nevada at reno
- hold things lightly + breath slowly



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what are the psychol issues?

- 36% mental disorder in 12 month
- Magpie NZMJ 2003;116:u379

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what are the "medical" issues?

- many medical health – control?
 - diabetes
 - hypertension
 - pain
 - fatigue
 - insomnia
 - unexplained symptoms
- invariably psychosocial issues

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what is needed?

- simple
- transdiagnostic
- uniform treatment principles
- evidence based
- apply to broad range of problems
- 15 – 20minutes - then 1-3? follow up
- effective
 - A-Tjak et al Psychother Psychosom 2015;84:30-6.

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this is FACT

- Dr Kirk Strosahl
- Dr Patricia Robinson
- Procure training HIPS
- BA GPs & nurses internal consults
- NZ govt rolling out HIPS

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Kirk Strosahl PhD Yakima



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Patti Robinson US Air Force



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Yakima set up

- 25,000 patients
- 4 psychologists
- "clear" templates
- 20-30 min first consult then XXX
- median = 2
- start treatment at 1st visit

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why FACT

- simple to learn
- 6/3 tools (open, aware, engage)
- effective: mental health
- "physical": diabetes, smoke, pain
- trans-diagnostic "stuck"

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stuck – trans-diagnostic

DSM-IV-defined diagnoses of major depressive disorder, panic disorder, and PTSD

Not seen in the fMRI

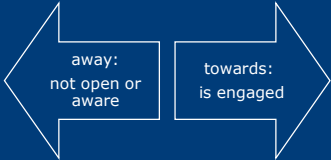
– *Jama* 2018;75(2): 201-9

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The screenshot shows a medical record interface for a patient named "MOUSE, Mr Mickey". The interface includes a navigation bar with tabs like "History", "Appointments", "Immunization", "Contacts", "Patient Transactions", "A/H History Account", "Patient Tools", and "Forms". Below the navigation bar, there is a table with columns: "Date/Time", "Event Code/Text", "Notes", "On Set", "Phor", "Severity", and "Risk". The table contains several entries, including "Adjustment reaction (Z29.89)", "Nervous Smoked tobacco (T321.00)", "Non-injected diabetes mellitus (E2)", "STUCK (I3.80)", "Gout (E24.90)", "Alcohol withdrawal syndrome [F10.23] unspecified", "Test results commented (S122.80)", "Test results declined (S122.80)", "Dilatation medicine (S10.00)", and "Dilatation NOS (R003.11)".

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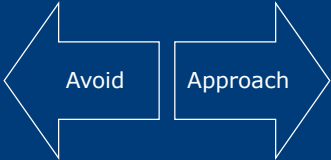
ACT



• **wanting to be symptom free prevents a vital life**

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ACT



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ACT

- accepting what you can't change and committing to what you can
– B Sedley

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ACT- geek version

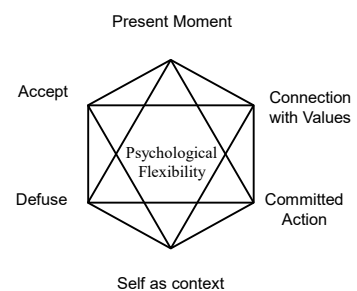
- ACT is an approach to human suffering that is based on the philosophy of functional contextualism and the theory of relational frame theory

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ACT

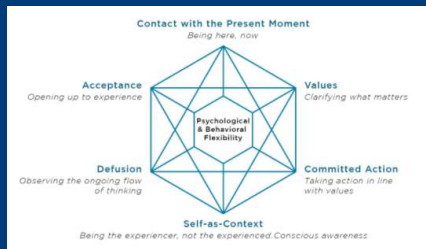
- experience the emotions as if they were sunsets, knowing that they are fleeting not a problem to be solved
- living your values in service of vitality
- ACT can bring compassion to a disorderly world
– Robyn Walser Trauma course

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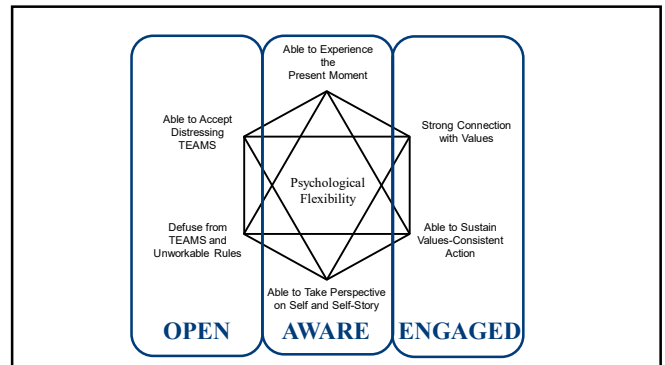
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hexaflex



– Robyn Walser trauma course

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OPEN AWARE ENGAGED

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relational frame theory

- fail exam at 8
- argue with mother at 16
- crash family car at 21
- error at work
- downward spiral

– Steve Hayes

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inflexibility

- running
- hiding
- fighting

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how it works

- “our minds are not built to think”
 - Benjamin Riley Economist p18 22/7/17
- language can amplify normal processes to pathological suffering
- our minds try and problem solve
- “you cannot think the TEAM away”

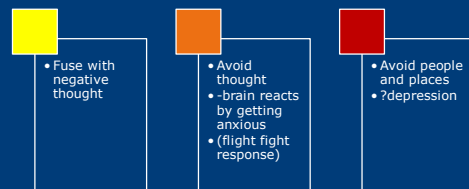
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how it works

- ok for outside but not inside
 - internal emotions
 - internal physical symptoms- patients

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how brain works



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hiding in back of cave



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FACT behavioural health

- mental health care to all
- less rapport building/assume rapport
- fewer time consuming assessments
- limit the problem focus
- not a DSM diagnosis
- practice standards of primary care

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	Fact	ACT
access	all	fewer
consult time	15 to 30 min	50"
visits	1 to 4	12 +
first visit	start therapy	assessment
diagnosis	stuck - TD	Stuck
therapy	1size fits most	customised
warm handoff	yes	No
standards	primary care	psychology
		psychiatry

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strosahl/robinson ideas

- diagnosis is the distraction
- "treatment is the distraction"
- life constriction precedes MH issue
- the solution is the dysfunction

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Case #2:

- diagnosis is the distraction
- the treatment is the distraction

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- woman in her 30s –with diabetes
- anxiety getting worse
- citalopram not working ?
- treatment is the distraction
- phq 12 gad 17
- work/1/1/1/play 8/5/5/8/3

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husband

- not doing things
- patient's need for control
- married to superwoman ???

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next visit

- talked with husband
- went away for weekend
- slept perfectly on saturday night
- "did the citalopram kick in"
- saved marriage 1 visit
- finger test for blood glucose

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HBA1C

- May 2014 40 5.8%
- April 2015 50
- June 2015 49
- Dec 2015 51 6.8%
- **ACT consult**
- Sept 2016 44 6.2%
- June 2017 44

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issues here

- did the citalopram kick in?
- is citalopram working at all
- teenage son on fluoxetine
- anxiety function
 - avoiding issues

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behaviour activation vs drugs

Duration	Behav activation	Drug	Placebo
1 week	29% (> control) ¹	-	21%
	NNT = 3.4		
2 weeks	42% ³	5% -over placebo ² NNT= 20	47% ²
NNT	2.5 ⁴	4 to 16	

2. Panda study 2019 Lancet September 19, 2019 online

3. Masterton C et al Behav Res Ther 2014;60:34-8

4. Ekars et al Plos 2014;9:6:1-11

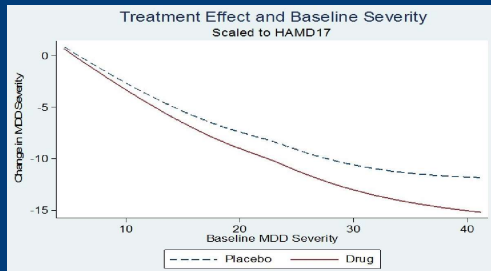
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behaviour activation vs drugs

Duration	Behav activation	Drug	Placebo	NNT
1 week	29% (> control) ¹	-	21%	3.4
2 weeks	42% ³			2.5
Drug 2 wks				20

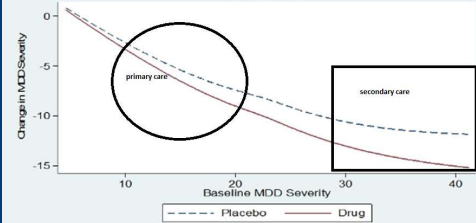
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The truth-FDA dec 2018

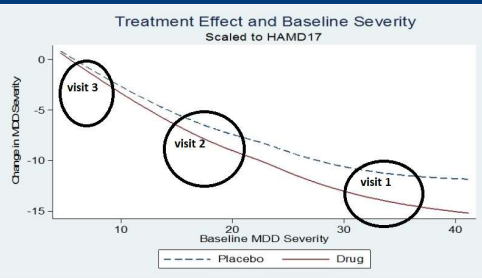


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Treatment Effect and Baseline Severity Scaled to HAMD17

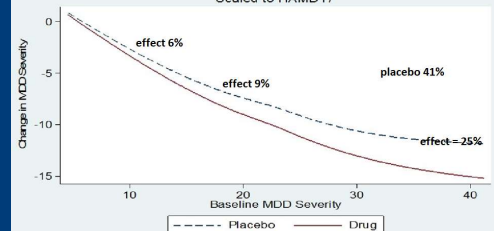


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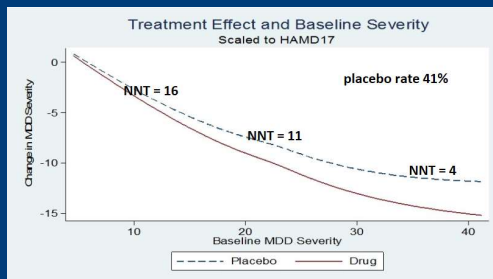


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Treatment Effect and Baseline Severity Scaled to HAMD17



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best treatment MDD

- behavioural activation
- placebo
- CBT
- antidepressants -severe
- nurse phone call
- antidepressants -mod-severe
- antidepressants -mild

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best treatment MDD

- behavioural activation 42%
- placebo 41%
- CBT 28%
- antidepressants 25% - very severe
- nurse phone call 20%
- antidepressants 9% -mod-severe
- antidepressants 6% -mild

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more information- all free

- www.brucearroll.com
- elearning 1.5 hrs goodfellowunit.org
- podcast FACT
- Happiness trap podcast
- mail base email 2 montly

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watch video

7 steps video

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FACT & world peace ???

- Can FACT bring about world peace?



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first visit

- client is a capable person
- my role move toward a fuller life
- guided by your values
- not to be symptom free
- get back in "river of life"

– lowers expectations

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Consult 3 parts

- A: assessment
- B: change relationship to distress
- pivot point
- C: values and actions

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A: FACT assessment

- **focused questions**
 - what avoiding person, place, TEAMS
- **view client thru flexibility lens**
- **creative hopelessness- struggle X**
 - suffering means you care
- **work love play – interventions here**
 - Strosahl 2012

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A:work love play- answer here

- **work 3/10***
- **love friends 8/10**
- **love intimates 1/10**
- **love family 8/10**
- **play 3/10***
- **spiritual AI Anon meetings**

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find pain- 4 ways – dental!!

- **name the pain-e.g. not sad***
- **downward arrow**
- **tears were words what saying**
- **core beliefs sheet**
 - helpless
 - unloveable

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find pain-downward arrow

- **negative thought**
- **why upsetting to me if this were true?**
and what would it mean to me
- **repeat this a number of times until get to pain or core belief**
- **Do exercise on your own –think of something negative and do the downward arrow**

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kelly wilson self-compassion

- this is the compassion stall button test
- imagine you are looking in to the eyes of someone you love with all your heart. Who would that be? What would you say to them, what would you give them and how would you be with them

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kelly wilson self-compassion

- and now the more difficult issue
imagine you are looking in to your eyes
- many patients say they cannot do that
- this is the "stall button test" and occurs about 30% of the time
- if yes, then a different tack to consult

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kelly wilson self-compassion

- what is the emotional tone of the conversation in their minds
- ask if willing to cultivate the voice of self-kindness in their minds
- do they want a sergeant-major or a personal coach advising their minds
- "their inner critical committee member"
- touch own shoulder/heart saying its ok
- "the worst is over"

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kelly wilson self-compassion

- adding meditation to calm SNS
- refer to Kristen Neff website
 - self-assessment and skills to learn
- perfectionist trap and cycle
 - perfectionism "it has to be exactly right" →
 - procrastination "if I cannot get it right then better not at all"
 - anxiety "I should be getting this done, what going to happen if I don't →
 - paralysis "I don't know what to do, I give up" →
 - self-criticism "you're an idiot, toughen up and get on with it"

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mindful anchor- 5 steps

- name the pain
- notice it (it is in the room)
- self-compassion step (show self some kindness or do Kelly Wilson test)
- let it go
- what is possible now? in here & now that was not possible when you started today
- strosahl robinson et al inside this moment

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pain narrative

- pain is guaranteed in life
 - physical
 - emotional
- we need to work with the suffering
- suffering common & suffering ok

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B: change relationship

- pivot needed
- exposure therapy
 - present moment awareness

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present moment awareness

- notice
- name
- soften –some self compassion
- let go
- expand (what is possible)

- Strosahl 2015

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exposure therapy to pain

- too much accelerator and not enough brake



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ACT as exposure therapy

- open aware engaged: are forms of exposure therapy

- Thompson BL et al Using ACT to guide exposure-based interventions for PTSD. *J contemp psychotherapy* 2013;43:3:133-40

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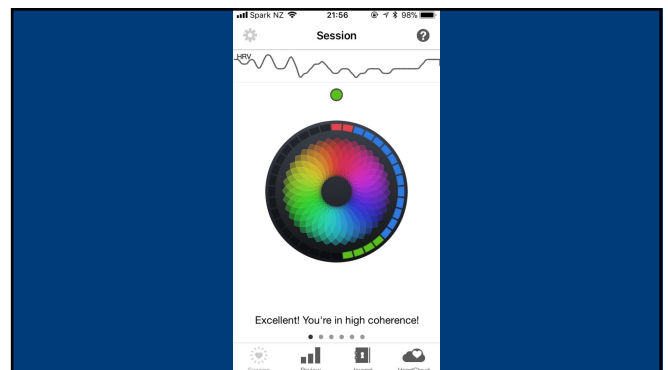
more brake PSNS 3 options

- exercise
- mindfulness/breathing
- curious about your mind

heart rate variability



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heartmath.com

- inner balance sensor \$us 129

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engineering my own life

- thoughts are not facts
- the mind is the great liar
- you mind is saying XX be curious about that
- don't listen your mind- trust your experience
- consider exercise
- when don't want to go – just go-then examine
- keep life expanded

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pivot point

- agree that current life not working
- willing to try something else

– Strosahl et al 2012

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C: values and actions (Strosahl 2012)

- lose contact with values
 - social norm controls behaviour
 - family pressure
 - avoid hurt
 - avoid criticism
- interest in values → uplifting
- “you can live this kind of life if you choose it”

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C: values and actions

- values and new actions
 - link values to actions
 - problem solving ok here
- likelihood of action
 - (readiness ruler 7/10)
- task list (not homework)
- video camera- what see (R Harris)

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task list (handwritten)

- contact susan – movie 8/10
- exercise 30" 3 per week 9/10

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actions

- does it matter what they do-no
- stop the "rule" following
- "cannot sit here and feel better-you need to do things"

99

actions: the river of life



100

actions: expand life



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actions

- Journal;depression.org Kirwan
- see one week later
- ? max 4 visits – median 2

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values

- what's important to in the long run
- a direction not a goal
- focus on living and loosening the attachment to unworkable goals

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take home

- limit problem focus
- work love play
 - all interventions from here
- avoidance is key → exposure??
- find the pain → mindful anchor
- expand life → see one week
 - likelihoods of doing action

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take home

- work love play
- behavioural activation
 - expand life
- exposure therapy
 - open, aware, engaged
 - find the pain→ mindful anchor

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Case 4 51 year old man

- Maori , ex gang, severe head injury
- PHQ 9 15
- QoI 20/100
- sun glasses in waiting room
- BMI 40.8

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medications

- Ibuprofen
- Paracetamol
- Gabapentin 300 mg 3 tds
- Oxynorm 5 mg BD
- Oxycodone 10 mg CR 1 tds
- Laxsol

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medications

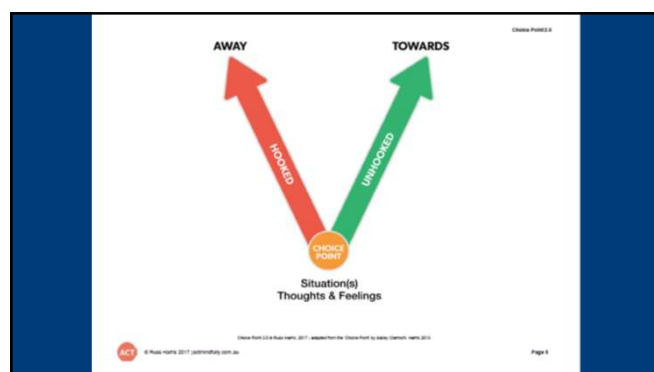
- Cholecalciferol
- Metformin 500 mg 2 tds
- Atorvastatin 40 mg
- Accupril 5 mg BD
- Novomix-insulin
- Seretide & salbutamol (asthma)
- Aspirin 100 mg

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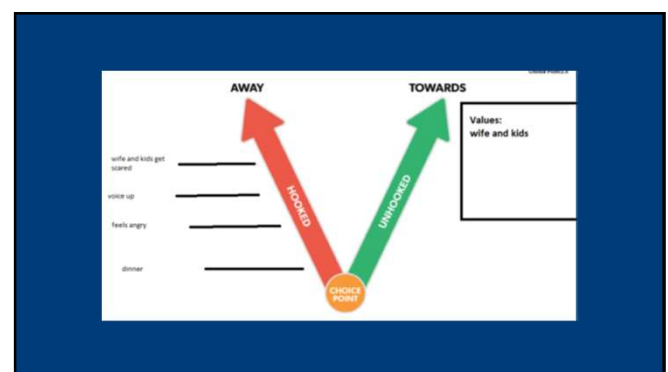
work love play

- violence
- yes I get angry , raise my voice wife
– gets scared
- children misbehaving
- shown choice point

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he gets issue

- changes behavior
- does not want kids to see this
- starts doing work at home
- wife happier
- his quol improves
- HBa1c improves

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Qol 100 is best possible

- 22 april 20/100
- 30 april 51/100
- 14 may 70/100
- 11 June 70/100
- HBA1C 26 feb 98 11.1%
- **ACT consult**
- HBA1c 8 may 87 10.1%

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ABC

- applied behavior analysis
- operant learning (experience)
 - vs RFT (rules learning)
- antecedent
- behaviour
- consequence
- not taught in health care

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behaviour analysis

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behavior (functional) analysis

- behaviour is thoughts, feelings and actions
- choice point is ABC
- antecedent behaviour consequence
- Russ Harris trigger, behaviour, payoff
- describes a 4 step contingency
- see handout

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symptom shift

- “the tiger thing”
- putting the tiger on the horizon
- intervention group 45/100 to 61/100
- control group 47/100 to 52/100

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case #3 forehead message

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diabetes & forehead message

- 60 year old woman with diabetes
- husband texting
- stopped taking medication

120

issues

- relationship
- stopped looking after self
 - “taking the poison hoping he will die”
- stop wanting to be right
- when they go low we go high
- likelihood of action
- function of her anxiety

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marriage the issue

- taking meds 10/10
- spending time with daughter
- go back to gym
- message I am a great partner on her forehead (not criticise husband)

122

HBA1C- message on forehead

- | | | |
|----------------------|-----|-------|
| • May 2015 | 99 | 11.2% |
| • June 2016 | 108 | 12% |
| • ACT consult | | |
| • Aug 2016 | 96 | 10.9% |
| • Nov 2016 | 78 | |
| • June 2017 | 76 | |
| • Nov 2017 | 65 | 8.1% |

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Case 5 39 yr old

- good job, car
- lives with mother
- MA every 2nd weekend
- increasing use of lorazepam to cope
- choice point
- changed behavior with friend

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learn more

- **Goodfellowunit.org**
 - podcast Bruce Arroll
 - elearning FACT Bruce Arroll
 - webinar Kirk Strosahl FACT
 - www.brucearroll.com
 - www.grow.co.nz
 - www.nz-act-training/Elizabeth-maher
 - www.Actwellington.co.nz

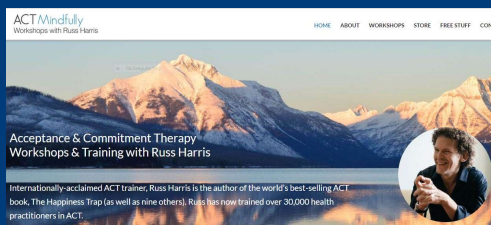
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learn more

- www.actmindfully.com.au/
- www.praxiscet.com
 - **Strosahl/Robinson : Hayes**
 - **Trauma Robyn Walser**
- www.stevenchayes.com
- Mailbase bruce.arroll@auckland.ac.nz

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learn more



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summary of FACT

- avoid psychiatric labels
- aim is to be less stuck not sx free
- stop avoidance
- start doing things - behaviour
 - expand clients world
- mindful anchor for pain-find pain
 - exposure therapy

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aim of training

- can do work/love/play
 - behavioral activation
 - exposure therapy (mindful anchor)
- can do choice point
 - behaviour analysis
- confidence to do tomorrow

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Bruce Arroll

Focused Acceptance & Commitment Therapy in Primary Care & other resources

[FIND RESOURCES](#)

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being right or happy

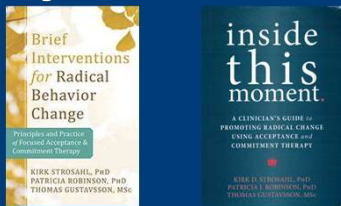


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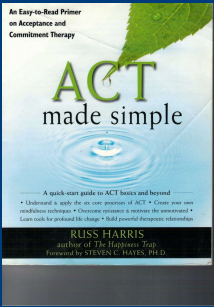


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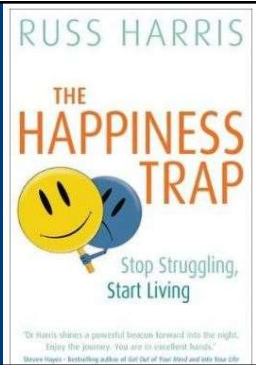
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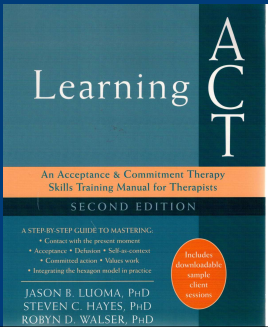
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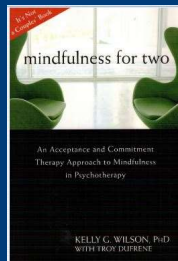
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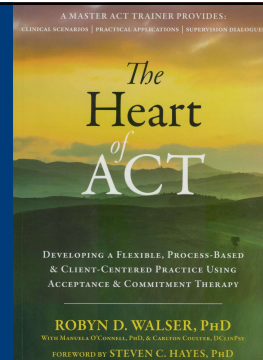
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- BA to do giving a diagnosis of stuck using PHQ 9 of liane
- *audience to do work love play*
- show video of 4 square tool
- show video of first consult
- *audience to do consultation in 2's*
- *audience to do values sheets*

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creative hopelessness

- agenda of emotional control": *In order to have a good life, I need to control how I feel: to get rid of unwanted thoughts & feelings, and replace them with more desirable ones.*
- struggle switch
<https://www.youtube.com/watch?v=rCp1I16GCXI>
- **Video 3 futility video**