

Value of Meditation Against Stress Now Questioned

Despite current
attack many remain
undaunted.

By ERIK ECKHOLM

DOES meditation relax your body any more than ordinary rest? Hundreds of cardiologists and psychotherapists think so. Glad to have a nondrug weapon against anxiety and stress, they added meditation techniques to their clinical repertoires in the 1970's on the basis of scientific studies that described a profoundly restful "hypometabolic state."

Fifteen years of research, however, has left the question of meditation's physiological effects more confused than clarified. And the skeptics now have a champion who says quiet time in an easy chair brings the same benefits.

In an interview, Dr. Benson said that because of this possibility, many past studies had "compared apples with apples." He flatly disagrees with Dr. Holmes's conclusions, arguing that he ignored some controlled studies that do show unique traits of the "relaxation response."

Replies Dr. Holmes: "How can this be a unique state if resting people often slip into it? What are you left with?"

Researchers also note that past experiments may have been confounded by the diversity of meditative states. Over time, some meditators go through stages involving somatic arousal rather than relaxation.

According to Richard Davidson of the State University of New York at Purchase, research over the last decade has revealed variability in states of both relaxation and arousal. He says that "generalized relaxation is a problematic notion," and similarly questions the existence of a homogeneous aroused state such as the

fight-or-flight response. Different stressful reactions such as anger, fear and surprise may trigger somewhat different physiological responses, he argues, and relaxation may involve similar diversity, calling into question the universal nature of the "relaxation response."

Over the last several years many scientists have, in fact, retracted the claims made in the early 1970's of meditation's physiological uniqueness. Deane H. Shapiro Jr., director of the Executive Stress Management Center at the University of California at Irvine and co-editor of a new anthology of meditation research, acknowledged that studies to date show "no physiological differences between meditation and other self-regulation strategies" in use by clinicians, such as progressive muscle relaxation, biofeedback and self-hypnosis, and "often, no differences between meditation and 'just sitting.'"

At the same time Dr. Shapiro, in a written reply to Dr. Holmes's article, questions whether those identified as "resting" in many past studies could have served as proper control groups for comparison. He argues that people resting, especially during an experiment, might often be falling into a meditation-like state.

While researchers have not pinpointed the contribution of meditation, as opposed to placebo effects, to such long-term benefits as reduced anxiety or blood pressure, many are loathe to write it off. They observe that effects over time must be distinguished from the temporary changes occurring during the act of meditation on which Dr. Holmes's critique is focused.

In the right situation, many psychotherapists say, meditation can definitely help patients learn to relax and, unlike other relaxation techniques, can also help them improve their concentration and perceptual sensitivity. But in other cases, such as people suffering from extreme shyness or withdrawal, meditation can worsen their problems.

Just how meditation affects consciousness is another frontier of research, one plagued by even greater experimental difficulties than the research on physiology. Meditators point out that the original purpose of meditation, as honed over thousands of years in various Asian traditions, was not to treat executive anxiety but to help people achieve higher states of consciousness and eventually a state of enlightenment or nirvana.