Session 3 Patient Handout: DBT Mindfulness Skills for MCAS

The big idea for this week

Your body with MCAS produces a lot of real sensations — tingling, flushing, gut gurgling, itching, heart-rate changes, brain fog. These are real. What we *can* change is what happens in the split second after a sensation appears.

Here is the cycle we are working on:

Sensation → "I'm having a flare" → your brain senses danger → fight-or-flight switches on → mast cells release more → more sensations → more danger signal → the cycle builds.

Mindfulness skills target the **arrow between the sensation and the interpretation.** They don't erase the sensation. They add a *pause* — and in that pause, your threat system doesn't fire, so the automatic escalation doesn't happen.

This is not meditation or relaxation. These are six concrete skills — specific actions you can practice, like tools in a toolbox.

The "WHAT" skills — what you do

1. Observe — Just notice what is happening, without doing anything about it. Notice the sensation as raw information *before* your brain adds a story.

- Example: You feel warmth spread across your cheeks. Observe says: *"I notice warmth in my face."* Full stop. Not yet "I'm flushing, what did I eat, should I take something."

2. Describe — Put words to what you observed — only the facts, not judgments or predictions. Naming a sensation in plain language actually calms your threat center and switches on your thinking brain.

- *"I notice tingling in my hands"* = a description (keeps you calmer).
- *"I'm having a reaction"* = an interpretation (raises alarm).
- *"Oh no, here we go, this'll be a bad one"* = catastrophizing (full alarm).
- Same sensation, three very different nervous-system responses. Describe keeps you in the first one.

3. Participate — Throw yourself fully into whatever you're doing right now, instead of standing guard over your body. During the large part of your day when you're not in an acute flare, let yourself be in your life. This is the antidote to constant body-scanning.

The "HOW" skills — how you do it

4. Non-judgmentally — Observe and describe without adding "good," "bad," "terrible," or "unfair." Flushing doesn't feel good — but *"I notice flushing in my face and neck"* keeps it at its real size, while *"this is terrible, why again"* inflates it and adds an alarm signal. If a judgment shows up, just note it — *"I'm having the thought that this is terrible"* — and return to the description.

5. One-mindfully — Do one thing at a time, with full attention. Juggling many things at once (cooking + symptom-checking + worrying about sleep) signals overload to your nervous system. When you cook, cook. When you check your body, check it mindfully. When you talk to someone, talk to them.

6. Effectively — Do what *works*, not what "should" work or what feels fair. Chronic illness isn't fair, and energy spent on "this shouldn't be happening" is energy taken from what actually helps. Ask: *"Given my situation right now, what is the most skillful thing I can do?"*

Quick reference

What you do	How you do it
Observe — notice the raw sensation	Non-judgmentally — no "good/bad/terrible"
Describe — put accurate words to it	One-mindfully — one thing at a time
Participate — engage fully in the moment	Effectively — do what works

Putting it together when a symptom shows up

1. **Pause.**
2. **Observe** the sensation.
3. **Describe** it: *"I notice [what] in [where]."*
4. **Check for a jump:** Did your brain add an interpretation, judgment, or prediction? If so, label it: *"I'm having the thought that..."*
5. **Check your traffic light** (green / yellow / red). If yellow, use your breathing practice — 5 slow breaths.
6. **Ask the Effectively question:** Based on what's *actually* happening right now, what's the most skillful next step?

The 10-minute rule: When a sensation appears, observe and describe for about 10 minutes before deciding anything.

- If it's stable, easing, or gone → no action needed; return to what you were doing (Participate).

- If it's spreading, intensifying, or new symptoms appear (hives, GI distress, throat tightness, big heart-rate jump) → this is real data. Take your rescue medication and follow your MCAS action plan (Effectively).

Important: Mindfulness never replaces emergency care. Signs of anaphylaxis — throat swelling, trouble breathing, faintness/collapse, widespread hives with whole-body symptoms — are **not** a mindfulness moment. Use your epinephrine (EpiPen) and call 911 immediately.

Your practice this week

1. **Paced breathing** — 5 minutes, twice daily (morning and before bed). Continue as before.
2. **Body scan** — 5 minutes once daily (3 minutes is fine). Midday/afternoon is a good time. Move your attention through your body, observe and describe silently, and notice if your brain adds interpretations. Eyes open or closed — your choice. If a full-body scan feels like too much, start with just your hands and feet, and keep your eyes open.
3. **Observe and Describe (applied)** — at least once a day, in real time. When you notice any sensation: pause → observe → describe → check for a judgment/prediction → check your traffic light.
4. **Traffic Light log** — continue 3×/day. Add a note: today, did you *observe* a sensation or *react* to it? What felt different?
5. **Sleep diary** — continue daily.

If the body scan feels anxious: use a guided recording (Insight Timer, Calm, or the free UCLA Mindful app), or scan only your hands and feet, or keep your eyes open on a neutral spot. The goal is never to push through anxiety — it's to find the version your nervous system can tolerate, then expand gently.

Remember

The pause between sensation and reaction *is* the intervention. Every time you observe instead of react, you interrupt the cycle that amplifies your symptoms. You are not ignoring your body — you are listening to it more accurately.

Bring any questions to our next session, where we'll focus on sleep.