

THE POWER OF SUGGESTION: HYPNOSIS

MINI MED SCHOOL
SHELLEY WIECHMAN, PH.D., ABPP
FEBRUARY 4, 2014

INTRODUCTION

- I. Definition
- II. History
- III. What exactly is hypnosis?
- IV. Theories of how it works
- V. Myths
- VI. Evidence for its efficacy
- VII. Virtual reality induced hypnosis
- VIII. Self Hypnosis/Practice

WHAT IS HYPNOSIS?

Hypnosis can be defined as a procedure in which one person is guided by another person to respond to suggestions for changes in subjective experience, alterations in perception, sensation, emotion, thought or behavior.

Kihlstrom, 1985

INTRODUCTION

- Pain (Hypnotic Analgesia)
- Weight Loss
- Smoking Cessation
- Therapy enhancement
- Itch and other dermatological conditions
- Performance Enhancement

INTRODUCTION

- Hypnotic Analgesia
 - Dental pain
 - Cancer treatment
 - Amputations
 - Spinal cord injury
 - Sickle cell anemia
 - Arthritis
 - Headaches
 - Labor

WHERE DID HYPNOSIS COME FROM?

- Mesmer (Paris, 1700s) – Body tissues held energy that could be directed with magnets to ease symptoms and heal disease.
- Patients would go into convulsions and become “healed.”
- Committee decided that effects were due to the engagements and imagination of his patients.

WHERE DID HYPNOSIS COME FROM?

- Charcot (neurologist in the 1800s) – Used hypnosis to induce and study neurological conditions.
- Freud – Used hypnosis to develop his theory of the unconscious mind. Eventually replaced by dream analysis.
- Hull (1933) – First controlled experiment showed that hypnosis can be used to alter a person's perception of pain.

WHERE DID HYPNOSIS COME FROM?

- Erickson – Published on his creative use of hypnosis and hypnotic language to help patients manage various symptoms and problems.
- Hilgard (1930s) – Groundbreaking experiments on the effects of hypnosis and hypnotic analgesia. Developed theoretical model of hypnosis.

THEORIES OF HYPNOSIS

Dissociation Theories – (Janet, Hilgard) –
During hypnosis, a certain part of consciousness can be split off from one another. You can hear and attend to one thing and completely block out another part of your consciousness. A natural response to focusing one's attention on one thing in particular.

THEORIES OF HYPNOSIS

Sociocognitive Theory – People tend to do what they think is expected of them in social situations. People respond to hypnosis and suggestions because they think that they should and because they want to.

THEORIES OF HYPNOSIS

Neurocognitive – Brain activity in those who respond to hypnosis is different than the brain activity in people who do not respond to hypnosis.

- Prefrontal cortex
- Anterior cingulate cortex
- These are also the areas involved in the processing of pain.
- Hypnosis can be used to teach people to control their overall brain activity.

WHAT IS HYPNOSIS

5 Step Process:

1. Rapport Building
2. Relaxation
3. Induction
4. Suggestions
5. Re-Alerting

RAPPORT BUILDING

- It is important that you engage in hypnosis with someone you trust and who knows something about you. You do not have to have a long relationship established with the person. But trust is key. You might feel vulnerable engaging in hypnosis with someone, just as you would any type of therapy.

RELAXATION

We will be better able to focus our attention if we are relaxed. One of the benefits of hypnosis is relaxation. We also engage more of our senses when we are relaxed.

- Deep breathing
- Muscle relaxation
- Relaxing imagery



“6... 5... and down we go, deeper and deeper. Your body’s getting heavier and heavier, relaxing even more now, with every breath that you take. 4...”

HYPNOTIC INDUCTION

- Involves an invitation to focus awareness and attention on a single experience.
- The clinician's voice
- A spot on the wall or an object
- Counting down (stairs, ski slope, floating down a river with numbers passing by, walking along a path with numbers, etc.)

SUGGESTIONS

- Now the clinician will offer suggestions for your brain to consider responding to.
- Many suggestions in one session
- Will include posthypnotic suggestions, which are suggestions that the benefits experienced will last far beyond the current session and become a part of how your brain works.
- Experience the comfort of hypnosis as you go about your day.

RE-ALERTING

- The clinician will re-orient you, usually by suggesting that you will become more awake and alert with each number counted. If you are doing self-hypnosis, you can give yourself the opportunity to drift off to sleep.

HOW IS HYPNOSIS DIFFERENT?

Hypnosis is meditation with suggestions
Brain wave studies – Hypnosis yields more theta waves, but this depends upon the hypnotic suggestions and the type of meditation.

HYPNOTIZABILITY

Can we all be hypnotized?

- People vary in their response to hypnosis.
- A person's response to hypnosis is called "hypnotizability." This ability falls on a continuum and tends to be stable over time.
- In terms of pain, hypnotizability plays a very small role in the outcome of hypnotic treatment for pain.

HYPNOTIZABILITY

- Stanford Hypnotic Clinical Scale
- Harvard Group Scale of Hypnotic Susceptibility

EVIDENCE

Researchers who study hypnosis have found universal patient satisfaction with hypnosis treatment.

One study (Jensen) asked people to describe the benefits of hypnosis.

Only one participant (3%) reported no benefit.

97% of participants reports at least some benefit from hypnosis.

MYTHS OF HYPNOSIS

Hypnosis is the same as sleep.

WRONG

- You do not lose consciousness during hypnosis like you do when you sleep.
- Brain activity during sleep is **VERY** different than the brain activity during hypnosis. You are much more relaxed during hypnosis than you are when you are sleeping.
- Instead, hypnosis is a state of focused activity.

© Mike Baldwin / Cornered

BALDWIN



“When you awaken you will feel fresh and relaxed – with absolutely no memory of changing my lightbulbs.”

MYTHS OF HYPNOSIS

You will lose all consciousness and have no memory of the experience.

WRONG

- Much like what you experience when you are absorbed in a hobby or other relaxing activity. You will feel very relaxed.
- Some people worry that they did not feel hypnotized during the session. Even if you feel a little more focused and relaxed, it will be a benefit.

MYTHS OF HYPNOSIS

During hypnosis the clinician has control over your mind.

WRONG

- People cannot be forced to do anything under hypnosis that they might not normally do.
- In fact, experienced clinicians will usually word their suggestions in a way that allows you to choose whether or not a suggestion will be helpful and to ignore the rest.

MYTHS OF HYPNOSIS

Only those who are “gullible” can be hypnotized

WRONG

- In fact, it takes a certain amount of concentration to be able to benefit from hypnosis. Those with severe brain injuries or cognitive disorders may not be able to engage in hypnosis. We have not been able to identify a certain personality trait that allows us to predict who will be more hypnotizable.

MYTHS OF HYPNOSIS



MYTHS OF HYPNOSIS

If you do not experience a deep level of focused attention, then the treatment will not be effective.

WRONG

- There is no evidence that attaining a deeper level of hypnosis leads to better outcomes.

MYTHS OF HYPNOSIS

You must remember everything that the clinician has told you in order to benefit.

WRONG

- There should be no effort placed at remembering everything that is said. Your mind will remember what it needs to.

MYTHS OF HYPNOSIS

Stage hypnosis is the same as clinical hypnosis.

WRONG

- The goals are very different: entertainment vs. using your natural abilities to feel better.
- No rapport is built during stage hypnosis.

EVIDENCE

Literature Reviews:

Montgomery, Duhamel, Redd; 2000).

- 18 studies that used hypnosis for pain
 - Hypnosis provided pain relief for 75% of the populations studied.

Patterson & Jensen; 2003).

- 17 randomized controlled trials of hypnosis and found that hypnosis was just as effective as other forms of pain relief and more effective than placebo.

EVIDENCE

Dose

Lasting effects

EVIDENCE

Jensen (NIH) –

- 37 patients with SCI and chronic pain were assigned to either hypnosis or EMG-assisted relaxation.
- 10 sessions of treatment
- Assessed before and after treatment and 3 months follow-up.

EVIDENCE

- Both groups had similar immediate and substantial effect on pain intensity.
- Hypnosis was more effective than biofeedback for daily average pain.
- Hypnosis had a longer effect of decreased pain with the effects lasting 3 months.
- Although treatment outcome was variable, 80% continued to use the skills at 3 months.

EVIDENCE

40 unique types of benefits were described
-- pain related and non-pain related:

- Pain reduction (40%)
- Increased control over pain (40%)
- Relief over having a new tool to handle the pain (30%)

EVIDENCE

Non pain-related benefits:

- Positive mood
- Increased sense of well-being
- Increased energy
- Better sleep
- Increased self-awareness
- Lowered blood pressure
- Decreased frequency of unhelpful thoughts.

EVIDENCE

Negative Effects:

“It did not work (3%)

“It was not as effective as I had hoped”
(3%)

“The effects did not last as long as I had
hoped” (3%)

EVIDENCE

Ideally, hypnosis can be used to enhance the effects of other treatments, such as cognitive behavior therapy.

- 4 sessions of hypnotic analgesia effectively reduced average pain.
- 4 sessions of cognitive therapy may reduce catastrophizing thoughts about pain.
- A combination of hypnosis and cognitive therapy appears to have benefits over and above either of the treatments alone.

SUMMARY

- Hypnotic analgesia is more effective than no treatment and some biomedical treatments (PT, medication).
- Hypnotic analgesia has specific effects over and above expectancy effects (placebo).
- Response to hypnotic treatment is variable.

SUMMARY

- Self-hypnosis is easy to learn
- Side effects are overwhelmingly positive and above and beyond pain reduction.
- It can enhance the efficacy of other therapies (cognitive, CBT)



UW Medicine

VIRTUAL REALITY INDUCED HYPNOSIS

Video clip

SELF HYPNOSIS

- Learn hypnosis with a clinician first then you can be taught self hypnosis. Allows you to re-create the benefits experienced during your session with the clinician.
- **WARNING:** Do not try this while driving or operating heavy machinery.
- Pick a quiet place with few distractions.

PRACTICAL APPLICATIONS

New Year's Resolutions

- What are the barriers?
- What are some of the unhelpful thoughts?
- What are some of your helpful thoughts?
- Write out 4 posthypnotic suggestions
- What is your favorite place to go on a relaxing vacation?

RESOURCES

- Jensen (2011). Hypnosis for Chronic Pain Management. Oxford Press
- Patterson (2010). Clinical Hypnosis for Pain Control. APA Press
- Wiechman & Patterson (2007). Hypnotic Analgesia. Expert Review of Neurotherapeutics.
- American Society of Clinical Hypnosis
<http://www.asch.net/>



“You are having a great time... You are meeting lots of interesting new people... You are glad you came... You are having a great time... You are meeting lots of interesting new people... You are glad you came...”

