

## MEDICAL HYPNOSIS – A POORLY UNDERSTOOD THERAPEUTIC MODALITY

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It would be difficult to find a subject, which is more controversial and poorly understood, than hypnosis in the entire medical field. This controversy related to the medical use of hypnosis has had a convoluted rout and history, since the time of Franz Mesmer in 1765, to the time in 1953, when British Medical Association issued a report, which supported its beneficial role in certain conditions/illnesses (1,6,7).

Franz Mesmer, an Austrian Physician and the founder of mesmerism, believed that the human body is immersed in a magnetic fluid, which needs to be manipulated through some means, in order to get rid of the symptoms a person may be suffering from. The presence of a magnetic fluid among the patients, who were treated by Mesmer, was found to be incorrect by a commission of enquiry, established by the ruler of France, the country in which Mesmer had his practice. In response to this finding, Mesmer was forced to leave France, in spite of the fact that, a significant number of his patients had a remarkable recovery from their illnesses, especially psychoneurotic ones. The level of interest of physicians in treatment by hypnosis has been variable over the 19<sup>th</sup> as well as the early part of 20<sup>th</sup> century.

In 1953, medical use of hypnosis received a major boost, when a committee established by the British Medical Association reported that a hypnotic phenomenon does exist,

which sheds a great deal of light on the role played by the unconscious mind on human behaviour. This report stated that hypnotherapy (treatment by hypnosis) could be a method of choice in the treatment of certain psychosomatic and psychoneurotic illnesses. The report also found that hypnosis could sometime play a part in Surgery, Obstetrics and Dentistry as an analgesic and an anaesthetic.

### Definition of Hypnosis

It is a particular state of mind in which the suggestions are not only accepted readily, but are also acted upon, much more powerfully than a waking state. (1,3,6)

It is induced in one person by another, but can also be self- induced.

The main objectives of this brief review of medical hypnosis are to make the readers aware of:

1. What is hypnosis? Its nature and how it works in clinical

practice?

2. What clinical conditions may be managed with hypnosis?

3. Sharing of the author's own experience in the practice of hypnotherapy, over the last 40 years?

In a 'hypnotic state', the conscious mind and its power of criticism are suppressed and suggestions consequently enter the individual's unconscious mind, which does not have the power of criticism and therefore, unable to reject them. (2,3,6,7)

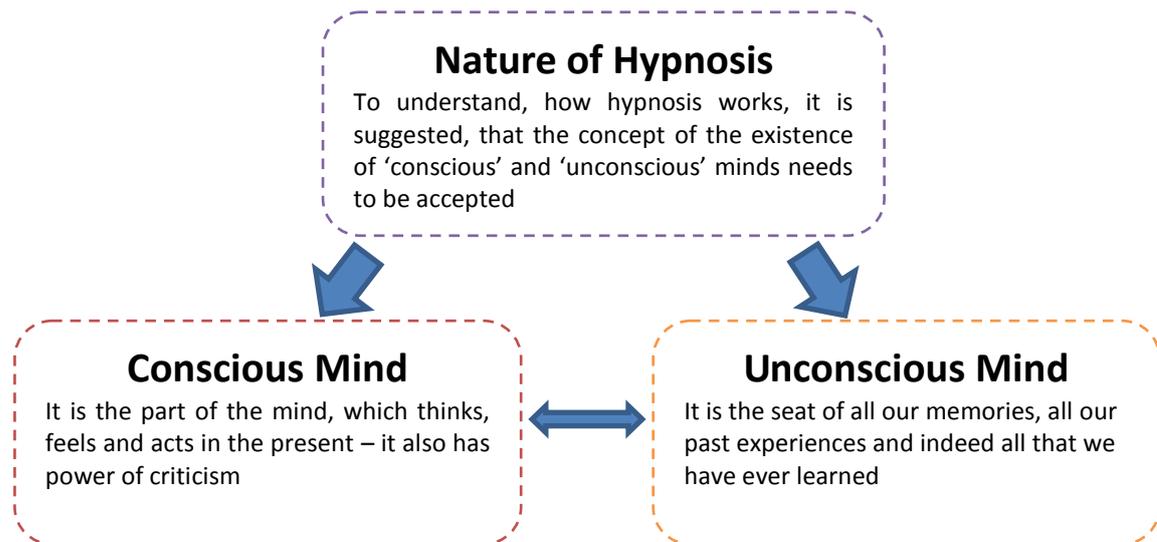
### Susceptibility to Hypnosis

90% of the population can be hypnotized. Light hypnosis can be achieved by 10% patients medium- depth- hypnosis by 70-80 % of patients and deep level of hypnosis by 10-20% of the patients. Children, teenagers, members of armed forces, actors and actresses are usually excellent subjects.

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**Induction of Hypnosis:**

There are many methods of inducing hypnosis in a subject. The following are the steps of a simple hypnosis induction technique, which the author has himself practiced effectively over many years:

- Eye-fixtaion, by the patient on an object of his own choice, with distraction.
- Progressive muscle relaxation from one end of the body to the other end.
- Relaxation through deep breathing exercise
- Deepening of the relaxation trance by visual imaging of a nice scene of patient’s own choice.
- Post-hypnotic suggestions.
  - Ego strengthening
  - Specific suggestions related to the problem concerned
- Autohypnosis / self-hypnosis training.
- Awakening the subject.

Training of patients to practice the hypnotherapy session (self-hypnosis) at home is an essential requirement for this treatment modality. A patient under hypnotic trance may appear asleep or unconscious, but in reality, he is fully aware of his surroundings (it is not a true natural sleep). Under medical hypnosis, patient cannot be made to do anything against his will.

If there is an unexpected emergency situation during the hypnosis session, the patient comes out of the trance and copes

with the emergency, even better than normal. <sup>(6,7)</sup>

**Hypnotic Analgesia:**

Complete analgesia (relief from pain) is achieved in less than 20% of subjects with deep hypnosis. Partial analgesia is achieved through medium depth hypnosis. Negligible analgesia can be achieved through light hypnosis.

Pain threshold can be raised through hypnosis. Distraction theory is applied to achieve hypnotic analgesia

**Therapeutics use of Hypnosis (Medical Hypnosis):**

A wide variety of medical and dental conditions/illnesses respond to hypnotherapy, according to the published literature. The problems/ illnesses quoted below belong to a limited number of conditions/ illnesses, which respond well to hypnotherapy, in the personal experience of the author.

**Medical Hypnosis in Dentistry helps in**

1. Obtaining relaxation – raises patient’s pain threshold.
2. Ensuring co-operation.
3. Reduction of fear and anxiety.
4. Preparation for local and general anesthesia.
5. The production of amnesia in deep trance.
6. The control of fainting.
7. Reduced bleeding.

**Advantages of Medical Hypnosis in Obstetrics:**

1. Increases the patient's ability to relax.
2. There is no depression of the respiratory or circulatory functions.
3. There is some shortening of the first stage of labour.
4. Increases the patient's resistance to obstetric shock and the patient is much less exhausted.
5. Does not interfere with the mechanics of labour.
6. Reduces pain by relieving the 'fear pain tension' syndrome.
7. Acute pain is most likely to be felt as the head crowns, but its intensity may be greatly reduced.
8. It affords better control over the rate of expulsion of the head and shoulders.
9. Episiotomy can be performed quite painlessly.

Most women feel remarkably fit and well after hypnotic delivery.<sup>(4,5,6,7,11)</sup>

8. Locking of jaw, so that it is widely open for the procedure.<sup>(6,7,9)</sup>

**Medical Hypnosis in Incurable and Painful Illness:**

- Hypnosis can reduce:
  - The actual pain itself.
  - The distress that it causes.
- Pain is more easily tolerated.
- It helps the patient to accept his illness through relaxation and reduction of tension.
- It can raise the threshold of pain with reduction in medication.<sup>(6,7,8,9)</sup>

**Medical Hypnosis in Some Other Painful Conditions:**

Irritable bowel syndrome and Nervous dyspepsia, Chronic back pain / Neck pain, Tension - headache and Migraine,

Dysmenorrhoea, Non-specific pain with Somatization.<sup>(6,7,8,9)</sup>

**Medical Hypnosis in other Clinical Conditions:**

1. **Respiratory/ENT**-Asthma, hyperventilation, frequent Sore Throat and Allergy<sup>(5,6)</sup>
2. **Cardio Vascular**-Hypertension and Palpitation<sup>(5,6,7)</sup>
3. **Neurology**-Headache / Migraine, Neuropathic pain<sup>(6,7,9)</sup>
4. **Gastroenterology**-Irritable bowel, Nervous dyspepsia and Constipation<sup>(6,7,8,10)</sup>
5. **Endocrinology**-Obesity<sup>(6,7)</sup>
6. **Psychiatry**-Anxiety, Insomnia, Phobia, Substance abuse & Alcohol<sup>(6,7)</sup>
7. **Miscellaneous**-Academic field, lack of confidence, tics, speech disorder, sports & smoking.<sup>(5,6,7)</sup>
8. **Childhood Behavior Disorders**-Nocturnal enuresis, school phobia and nail biting / thumb sucking.<sup>(6)</sup>
9. **Dermatology**-Eczema, allergic rashes and warts.<sup>(6,7)</sup>

**Conclusion:** Medical Hypnosis is not a miracle-worker, but it can be a valuable non-pharmacological therapeutic modality in the treatment of a variety of conditions/illnesses, in the hands of a caring and competent physician.

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**REFERENCES**

1. Tinterow M M. Foundation of Hypnosis: From Mesmer to Freud. Springfield 111. Charles. C Thomas ;1970
2. Snaith R P. A method of psychotherapy based on relaxation techniques. BJPsych. 1974;124:473-81.
3. Ellenberger H F. The Discovery of the unconscious. New York: Basic Books.1970
4. Stewart H, Fry A. The Scope of hypnosis in general practice. BMJ.1957(1):1325

5. Cracilneck H B, Hall J A. Clinical hypnosis: Principles and Applications. New York: Grune & Stratton ;1975.
6. Hartland J. Medical and Dental Hypnosis and its Clinical Applications, 2nd ed. London: Baillieére Tindall ;1971.
7. Ambrose A, Newbold G. A Handbook of Medical Hypnosis, 4th ed. London: Ballieére Tindall ;1980.
8. Wilson S, Madison T, Roberts L, Greenfield S. Systematic review: the effectiveness of hypnotherapy in the management of irritable bowel syndrome. AP&T 2006 Sept;24 (5): 769-80.
9. Grondahi JR, Rosvold E O. Hypnosis as a treatment of chronic widespread pain in general practice: a randomized controlled pilot trial. BMC Musculoskeletal Disorders .2008 Sep 18; 9: 124
10. Lindfors P, Unge P, Arvidsson P, Nyhlin H. Effects of gut-directed hypnotherapy on IBS in different clinical settings-results from two randomized controlled trial. Am J Gastroenterol.2012 Feb; 107(2): 276-85
11. Madden K, Middleton P, Cyna AM, Mathewson M, Jones L. Hypnosis for pain management during labour and childbirth. Chochrane Database of systematic Reviews 2012, Available on-<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD009356.pub2/abstract> : Accessed on 1.2.2013.