

---

## THERAPEUTIC HYPNOSIS

---

by

Ian R Owen

A brief description of therapeutic hypnosis and how its schools of thought compare to other psychotherapies.

### Historical Introduction

The therapeutic use of hypnosis has been recorded in the healing practices of many different civilizations over thousands of years. Hypnotic suggestion and induction were present in the earliest rites and rituals of the Hindus, Chinese and Egyptians. Suggestion was used in the sleep temples of Egypt, Greece and Rome (Edmonton 1986). The Bible contains examples of suggestion, induction procedures and faith healing: ' . . . the hand of the Lord is upon thee, and thou shalt be blind, not seeing the sun for a season.'

Suggestion is an inescapable part of human communication, both in the purely logical content of speech and in non-verbal communication. When two or more parties are in proximity (whether we like it or not, and whether we consciously know we are communicating to others around us or not) communication and suggestion takes place.

In therapy or in everyday life, if

we are particularly careful at noticing people around us, we can begin to see evidence of trance states all the time (Hoorwitz 1986). There are many indicators of trance development. These can be categorised as cognitive, emotional, sensory-perceptual, motoric or distortions in a person's sense of time. Spontaneous altered state phenomena are age regression, amnesia, anaesthesia, catalepsy, hallucinations, illusions and time distortion. Other changes which are associated with trance are the relaxation of facial features, retardation of blinking, startle and swallowing reflexes. The pulse and breathing rates slow down. If a person speaks in trance their voice is noticeably different and speech can be minimal in construction or the person can't be bothered to speak at all and may say 'mm' or 'no' in answer to questions. Once we are tuned in to the presence of fixed arm or leg postures, gazing into space, day-dreaming or noticing our fellows' eyes becoming defocussed, losing their normal eyelid blink response, we can see people in trance at bus stops, watching TV or performing everyday chores.

One definition of trance is an

altered state of consciousness; that is, a state of consciousness that is different from the normal waking states. , Our waking states, however, of mind and body are several; not just one constant completely attentive state. Charles Tart (1987) calls 'consensus reality orientation', the dreaming state that many people live in every day of their lives. What Professor Tart is referring to is the possibility that some people are so unaware in their lives it is as though they are hypnotised into noticing only certain things and ignoring others. This lack of awareness in life causes people to act like sleep-walkers or automata. There are many states of being or subpersonalities that a person can have. In some situations a person can be more aware of their true circumstances; in others they can become quite self-absorbed or focussed on to one train of thought.

Self-suggestion, values, beliefs and our imagination are processes that are with us all the time, in every aspect of our lives. Various psychotherapies note that imagination causes neurosis in the first place. So when people take control of their imaginations they use their own powers to create healthy and positive thinking. This is opposed to letting oneself be brainwashed by the stream of capitalist, political and bad news that pours through TV, radio and newspapers every day. In the therapeutic approach of Transactional Analysis for instance, self-defeating prophecies and poor body image are central topics of concern.

Therapeutic hypnosis and the placebo effect are closely linked, but only during the last ten years has work on the relaxation response (Brenson 1975), research into state dependent memory, learning and behaviour (Rossi 1987), and research into brain and body functioning begun to scientifically explain what healers have intuitively known for thousands of years.

Dr. James Esdaile, a surgeon in the East India Company in the 1840's and 1850's used what he called Mesmeric hypnotic analgesia to perform amputations and major abdominal surgery (Elman 1964). This was at a time before the discovery of ether as an anaesthetic when 50% of all patients died subsequent to surgery through loss of blood or shock. Not only did Dr. Esdaile's patients report no pain, but 92% survived their operations. The list below relates to 49 consecutive operations carried out by Esdaile in 1847.

17 took place with the patient like a corpse.

14 with no difference from the appearance of a corpse except slight contractions of brow, fingers or toes.

13 with considerable indications of suffering, but with subsequent denial of it by the patient.

5 failures or partial failures, the patients becoming sentient before the operation was completed.

(Esdaile 1848)

Esdaile's method was to induce trance without explaining to the patient what Mesmerism was or what was intended to be done. He tested for anaesthesia by applying electric shocks, dropping a hot coal on the inside of their legs or, if the patient was a man, powerfully squeezing their testicles. Esdaile used hand passes to induce anaesthesia in induction procedures which could last two hours or more.

A Scot, James Braid (1795 - 1860), made a definition of trance which still holds today:

Let the term hypnotism be restricted to those cases alone in which . . . the subject has no remembrance on awakening of what occurred during his sleep, but of which he shall have the most perfect recollection on passing into a similar stage of hypnotism thereafter. In this mode, hypnotism will comprise those cases only in which what has hitherto been called the double-conscious state occurs. And, finally, as a generic term, comprising the whole of these phenomena which result from the reciprocal actions of mind and matter upon each other, I think no term could be more appropriate than psychophysiology.

Psychophysiology or psychobiology are the modern terms used to describe the latest hi-tech research into the links between emotions and chemical changes in our bodies. Braid wrote his description in 1855. It is unusual that the latest

research into human immune, autonomic and endocrine systems should have finally chosen to view people as integrated mixtures of body and mind.

### **Does hypnosis exist or not?**

The hypnotic state is defined in about twenty ways according to which psychological theories are in fashion. Some psychological researchers, called non-state theorists, say that hypnosis is an experience of the imagination similar to being involved in a book or becoming immersed in a film's story. Of the state theorists, Ernie Rossi has collected a great deal of research material on how state dependent phenomena are present in hypnosis and all aspects of living. The hypnotic phenomena that I have already listed can occur in everyday life. Therefore paradoxically, hypnotic phenomena can happen when no induction procedure has been used. For example, everyone has had their name called and not heard it because they were deep in their own thoughts. When we have cut ourselves, the pain is not noticeable when we turn our attention to something else; the pain returns when we give attention to our wound. One can paradoxically conclude either that hypnosis doesn't exist, or that hypnotic states are present all the time in our lives.

### **The hypnotherapies**

Hypnotherapy is not a single Hypnosis in the UK and internationally is a hotbed of debate, learned argument and discussion of

principles. There are said to be more than sixty schools of hypnotherapy in the UK. Some therapists overtly use hypnosis as a part of their therapy. Some therapists covertly employ hypnotic techniques by saying 'let's do an exercise', or by calling their procedures names which do not include the word hypnosis. Some therapists who are trained in hypnosis disguise their skills to try to avoid the stigma and connotations that the word hypnosis has for many people. So hypnosis becomes visualization, guided affective imagery, autogenic training, meditation or relaxation therapy. Other therapists who have not been trained in hypnosis and who use visualization techniques and so on wonder why these are so powerful and popular with clients.

Several of the hypnotherapy schools disagree with one another on the fundamental principles of therapy. One such disagreement concerns whether therapy must be associated with pain, suffering, abreaction and catharsis. Other therapists and hypnotherapists refuse to accept the proposition that unless a client has been made to suffer catharsis or abreaction, then therapy has not been carried out. Standards of training among the UK hypnotherapy schools vary widely on major issues. Some hypnosis training courses are by correspondence or may involve only 50 hours classroom tuition. Other training courses last three years and include clinical supervision and practical work in hospitals.

It is therefore more correct to talk about the hypnotherapies, rather

than hypnotherapy as a single technique or school of psychotherapy. Accordingly hypnotherapies can be categorised into the three main branches of psychology that exist today, namely: analytical and psychodynamic; behavioural; and the humanistic and existential grouping.

Freud used hypnosis before free association and this was part of his route in founding psychoanalysis. Freud gave up hypnosis because he was not adept at it and this led him to take his distant 'one up' position and request the client to lie on his couch and free associate instead. Hypnosis in the version of hypnoanalysis is used by some analysts and therapists as an adjunct to their therapeutic procedures. Hypnoanalysis can be used for abreaction or for reassociating state-bound symptoms with other adult, well adjusted processes. A great deal of abreaction therapy was used with soldiers and airmen with battle fatigue or shell-shock after both world wars.

Behavioural psychotherapy is also influenced by Joseph Wolpe's experience as a hypnotist in the behavioural procedures of reciprocal inhibition. Wolpe, Paul and Hayle (Wolpe 1986) state that deep muscle relaxation plays an anxiety-inhibiting role diametrically opposing the characteristics of anxiety. This is why relaxation is employed in the behavioural techniques of systematic desensitization and deconditioning.

### **Hypnotherapy and Humanistic-Existential Psychology**

Some people without experience of modern permissive hypnotherapy believe that all hypnotherapy is stage hypnosis. The idea of stage hypnosis is to select the most suggestible volunteers from an audience of hundreds and then ask them to become the centre of attention for the amazement and hilarity of the audience.

The majority of hypnotherapists who have learned Ericksonian and permissive techniques spontaneously respond to their clients in an intimate caring manner. These hypnotherapists know that they are guiding their clients through a process of therapeutic experiencing and awareness in trance. At other times the permissive therapist allows the client to lead them during trance work so that the therapist carefully follow the client in their experience. The majority of hypnotherapists pride themselves on being able to go into a trance before the client and then do therapy with them. In this way the client is given an experience of knowing what it is like to be with someone who demonstrates unconditional positive regard, a high degree of empathy, congruence and who has a calm reassuring manner.

Milton Erickson, who died in 1980, has been acclaimed as being the greatest innovator in permissive indirect hypnosis. Indeed Dr. Erickson may be the greatest figure in hypnosis since Mesmer in the 1780's. A wealth of books and now even a distinct school of psychotherapy has been born. Currently there is a great deal of interest in Ericksonian philosophies

in the USA. An avalanche of books, videos and trainings are available on Dr. Erickson's life and work.

Of the doctors, psychologists and therapists who were trained by Erickson or who trained with him, I believe Ernest Rossi has been the most consistently productive of good material. Rossi is a humanistic psychotherapist and Jungian training analyst, an ex-Freudian analyst, and he is knowledgeable also in transpersonal psychology and Eastern practices. Rossi (1987) states that hypnosis, or therapy in general, is accessing and activating state dependent memory learning and behaviour (SDMLB). This is a phrase coined to describe how what is learned and remembered is dependent on one's psychophysiological state at the time of the experience. Memories acquired during one state are forgotten in intervening states, but are available once more when the initial state is returned to. Since memory, learning and behaviour are dependent upon and limited to the state in which it was acquired, this is called state-bound information. Examples of this are feeling the same at the same time of day, forgetting something while drunk and remembering when sober at a later date and remembering when one has been in a similar emotion, mood or social context many years ago. Hypnosis is activating the client's potentials by tapping into their phenomenology and real-sense memories. As Milton Erickson once wrote:

The induction and maintenance of a trance serve to provide a

special psychological state in which the patient can reassociate and reorganize his inner psychological complexities. Therapy results from an inner synthesis of the patient's behaviour achieved by the patient himself. It is this experience of reassociating and reorganizing his own experiential life that eventuates in a cure, not in the manifestation of responsive behaviour which can, at best, satisfy only the observer. (Erickson 1948)

Hypnosis is creating inner re-synthesis and re-association in the client. Rossi states that hypnosis is responding to the client and evoking and facilitating therapeutic experiences in them.

Apart from Rossi, there is a host of other gifted therapists, writers and teachers in the States who are besotted with Erickson and his work. For whichever therapies you are interested in, the verve and vigour of practitioners such as Haley, Watslawick, Zeig, Lankton, Barber, Gordon, Lustig, O'Hanlon, Calof, Weakland, Fisch and Lehrer have therapeutic insights a-plenty.

Two of the most vociferous students of Erickson are Bandler & Grinder of Neuro-Linguistic Programming fame. Bandler & Grinder produced NLP in the mid 70's and now there are more than 6,000 certified practitioners in the USA. NLP is a single name for a group of hypnotic methods which encompass making associations, thinking of new behaviour and contacting unconscious information process-

ing. NLP is an attitude and a school of thought in itself which lays down rigid processes that the client must follow. It has been criticised as being manipulative. Practitioners would explain that their approach is one which requires the therapist to be very skilful and to apply themselves

fully in helping their clients change. NLP could be described as 'eyes open hypnosis' and now has influenced hypnosis, gestalt, counselling, meditation and humanistic psychology.

Another new approach to hypnotherapy is David Grove's Information-Centred Therapy. This is the ultimate in non-directive therapy where the therapist gently leads the client to explore their non-conscious world through metaphor, imagery and subtle regression techniques. Grove's approach is radically different from anything on the contemporary scene. Grove is still discovering and developing his approach and he visits the UK regularly to give short trainings on the use of hypnotic language, changing memories and healing wounded child-within states of consciousness. His work is based on strategic family therapy, linguistics and philosophy. David Grove's work is based on creating and vivifying dream-like experiences for the client which come directly from the client's descriptions of their symptoms. His workshops are well received in the USA. In three months' lecturing in 1988 he attracted 2,500 therapists to his three day trainings. The publishers Irvington are printing a book on his work. Two other books

which described the basis of his therapy are Johnson & Lakoff (1980) and Johnson (1985).

There are probably more than 1,000 practitioners of hypnotherapy in the UK. Hypnotherapy was also profoundly influenced by the Rogerian impact, by Perls and Maslow. The world of hypnosis is

vibrant and full of therapeutic life. Hypnotherapists are an unusual mixture who chop and change their therapeutic style and trust what is best within themselves. While hypnosis has taken on board all that is most worthwhile from the humanistic movement - the question is - what can the humanistic movement learn from Hypnosis?

---

### References

- Benson H** (1975) *The relative response*. William Morrow, New York.
- Edmonston W E** (1986) *The Induction of Hypnosis*. John Wiley, Chichester
- Elman D** (1964) *Hypnotherapy*. Westwood Publishing, Glendale.
- Erickson M H** (1948/1980) 'Hypnotic Psychotherapy' in E Ross (ed) *The Collected Papers of Milton H Erickson on Hypnosis Vol IV: Innovative Hypnotherapy*. Irvington, New York
- Esdaile J** (1848) *A Record of Cases Treated in the Mesmeric Hospital, from June to December 1847, with reports from official visitors*. W Ridsdale, Calcutta.
- Hoorwitz A N** (1986) *Hypnotic Methods in Non-hypnotic therapies*. Irvington, New York.
- Johnson M** (1986) *The Body in the Mind*. University of Chicago Press,
- Lakoff G & Johnson M** (1980) *Metaphors we Live by*. University of Chicago Press, Chicago.
- Rossi E L** (1987) *The Psychology of Mind-body Healing*. W W Norton, New York.
- Tart CT** (1987) *Waking up*. New Science Library, Boston.
- Wolpe J** (1985) *The Practice of Behaviour Therapy*. Pergamon Press, New York.

---

### Further information

Mr. P Booth, London Society for Ericksonian Psychotherapy and Hypnosis. Mr. J Hogg Association of NLP, 100b Carysfort Road London N16 9AP. Ms. J Evans, Information-Centred Therapy, 12 Sutherland Avenue, London W13 8LE. Ms M Green, Association of Professional Therapists (Independent Hypnotherapy Association) 57 The Spinney, North Cray, Sidcup DA14 5NE.

---