

# Hypnosis a Philosophy of Practice

Dentistry as if you mean it!

# An Outline

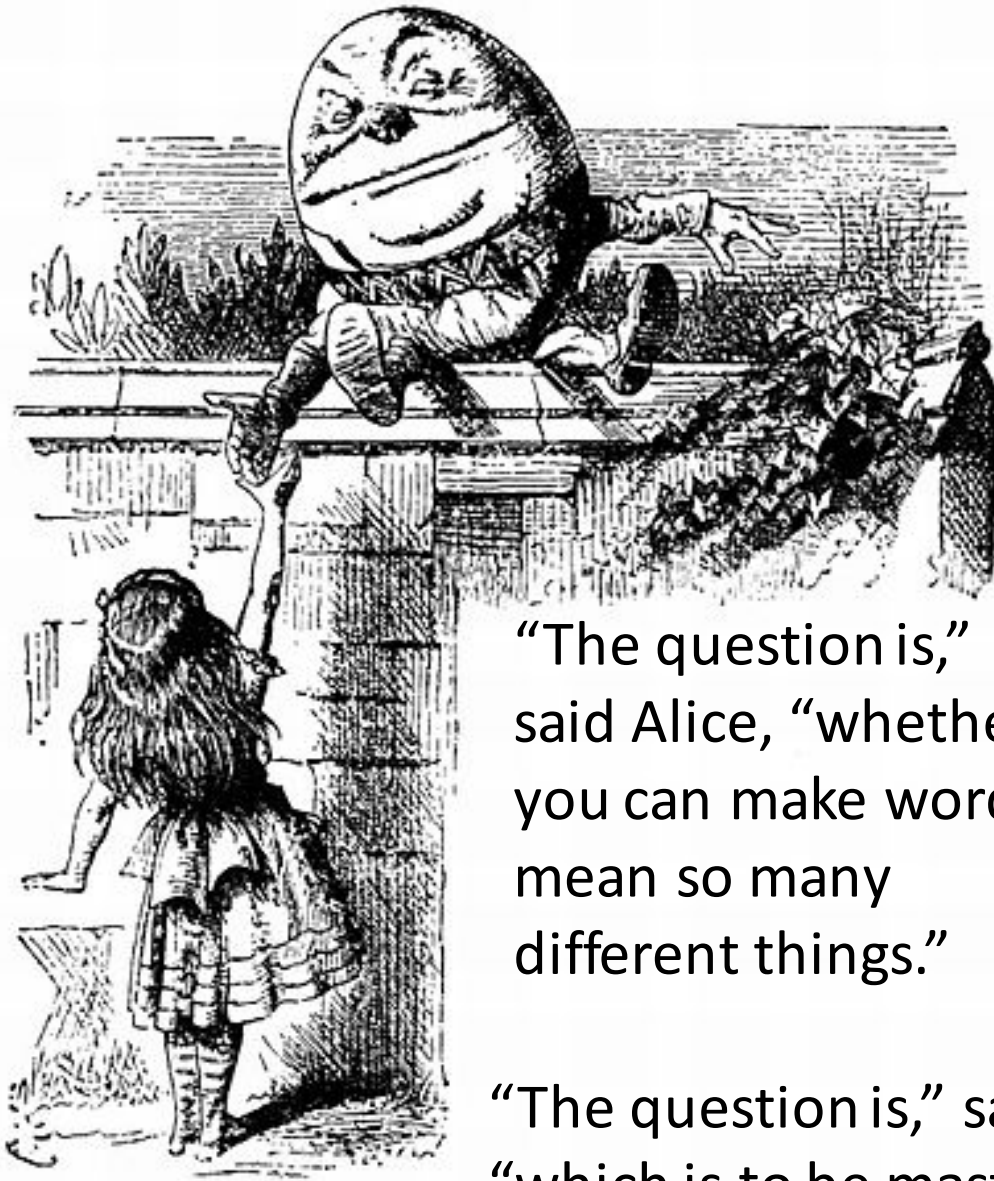
- Introductions.
- Zoom.
- Communication and meaning.
- Reflections on hypnosis as an item of treatment.
- Hypnosis as a philosophy of practice.
  - With our patients.
  - With our staff.
  - With ourselves.
- Audit.
  - Should we.
  - How can we.
- MSc Clinical and Academic Hypnosis.

# A Co-operative Project

- “The field of hypnosis is a collection of techniques in need of a unifying theory”.
  - Hall, J.A. (1989) Hypnosis a Jungian Perspective page 7
- “The field of hypnosis is a collection of techniques **free** of a unifying theory”.



René Magritte 1898 1967



“When I use a word,”  
Humpty Dumpty said in  
rather a scornful tone, “it  
means just what I choose it  
to mean — neither more nor  
less.”

“The question is,”  
said Alice, “whether  
you can make words  
mean so many  
different things.”

“The question is,” said Humpty Dumpty,  
“which is to be master - that’s all.”

A man that looks on glass,  
on it may stay his eye;  
or if he pleaseth, through it pass,  
and then the heaven espy.

George Herbert, 1633

# The role of emotion in patient safety

Are we brave enough to scratch beneath the surface?

- Traditionally, medical care has been viewed as a practice that is based on rational and considered thought .

# The role of emotion in patient safety

Are we brave enough to scratch beneath the surface?

- However healthcare professionals do emotional work; they deal with pain, joy, anxiety, unhappiness, hope, loss and anger on a daily basis.
- And healthcare professionals are also human, and therefore come to that work with their own emotional states and traits that influence their response to these factors and the way they react to situations, patients and colleagues.



# The role of emotion in patient safety

Are we brave enough to scratch beneath the surface?

- As such, emotions play an intrinsic role in clinical judgement, and will do so increasingly as patients (with their own emotions) are asked to be fully involved in their own care, with decisions made in partnership with clinicians.

# The role of emotion in patient safety

Are we brave enough to scratch beneath the surface?

- ‘How providers feel, their emotional or affective state, may exert a significant, unintended influence on their patients, and may compromise safety’
  - Croskerry P, Abbass A, Wu AW. Emotional Influences in patient safety. J Patient Safety 2010; 6: 199–205.

# The role of emotion in patient safety

Are we brave enough to scratch beneath the surface?

- Healthcare professionals work in emotional environments, but the potential impact of emotion on patient safety is not widely acknowledged.
- Emerging 'second victim' literature shows that error has emotional repercussions for healthcare providers.
- Positive and negative feelings may influence clinical decision-making and healthcare professionals' responses to clinical situations – yet little is known about how these may contribute to patient outcomes.
- The tendency to view clinical practice as a purely rational process hinders consideration of the potential impact of emotion on healthcare safety.

# Caution!

## Reductionism ahead

- Hypnosis as a philosophy of practice.
  - With our patients.
  - With our staff.
  - With ourselves.

# The Ship of Theseus



# Suggestion

## Molar Endodontics

- How was it before
  - This may well be painful and you will need to take some analgesics.
  - It will probably hurt for about three days.

# Suggestion

## Molar Endodontics

- How is it now
  - This will be as it needs to be. As the healing occurs these tablets will ease any discomfort.

# Suggestion

## Molar Endodontics

- How could it be better
  - Perhaps a more paternal directive approach (with the right patient) Your tooth is now ready to continue healing and work successfully in your mouth.



# Post Hypnotic Suggestion

## Fitting New Full / Full Dentures

- How was it before

- Now you have got a lot to get used to here.
- Its' a foreign body in your mouth, speech will be difficult, and you will really have to work at eating start of with soft bland diet.
- Don't worry if people stare at you.

# Post Hypnotic Suggestion

## Fitting New Full / Full Dentures

- How is it now

- That really does look very natural, and you are managing your speech with such skill.
- Enjoy progressively learning the skills of eating all those things you have been finding difficult with your old dentures.

# Post Hypnotic Suggestion

## Fitting New Full / Full Dentures

- How could it be better
  - Perhaps after reviews have established mechanical competence, the use of classical inductions and post hypnotic suggestions?
  - But I worry about masking unresolved and unnoticed functional problems.



With our staff.

- To work as a team to make hypnotic interventions effective and congruent.
- It is important that all staff with patient contact - receptionist, nurses, hygienists are all aware of hypnotic principals

# With our Staff

- It is important that all staff with patient contact - receptionist, nurses, hygienists are all aware of hypnotic principals
  - Positive and negative suggestion
  - Communication styles
  - Body language
- An awareness that they are all part of the dance.

# Among School Children –

William Butler Yeats 1927

O chestnut-tree, great-rooted blossomer,

Are you the leaf, the blossom or the bole?

O body swayed to music, O brightening glance,

How can we know the dancer from the dance?

# With Ourselves

- Mindfulness

Moment-by-moment awareness of one's experience without judgement.



# With Ourselves

- Mindfulness – Evidence

- Proven to reduce anxiety, stress and depression.

- David DM, Hayes JA. What are the benefits of mindfulness? A practice review of psychotherapy-related research. *Psychotherapy* 2011; 48: 198–208

- Improves emotional regulation which enhances well-being and makes regular meditators less likely to suffer from psychological distress

- Corcoran KM, Farb N, Anderson A and Segal ZV. Mindfulness and emotion regulation: outcomes and possible mediating mechanisms. In: Kring AM and Sloan DM, (eds). *Emotion Regulation and Psychopathology: A Transdiagnostic Approach to Etiology and Treatment*. New York: Guilford Press, 2010, pp.339–355.

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# With Ourselves

- Mindfulness and Hypnosis
  - Semmens-Wheeler, R., & Dienes, Z. (2012). **The Contrasting Role of Higher Order Awareness in Hypnosis and Meditation.** Journal of Mind-Body Regulation, 2(1), 43-57.
  - “... on average, the more hypnotizable a person, the less self-ratedly mindful they were in everyday life.”

# Mindfulness and Hypnosis

- Hypnosis

- The subject does intend to act, imagine or pretend; but they are not aware of that intention.

- Mindfulness

- The project is self awareness

# Mindfulness and Hypnosis

- Hypnotic response is centrally a (strategic) failure of awareness while meditation, as a practice of mindfulness, is centrally an enhancement of awareness.

# Mindfulness and Hypnosis

- We conclude that it may be hard to be mindless about an intention if one's general tendency is to be mindful. One route to highly hypnotisability may be to avoid chronic mindfulness.

# Mindfulness and Hypnosis

- Is Promoted to
  - Increase immunity
  - Decrease blood pressure
  - Reduce symptoms in those with anxiety and panic disorders
  - Support care of cancer patients.
- Is promoted for treatment of
  - Fibromyalgia
  - Irritable bowel Syndrome
  - Chronic fatigue Syndrome
  - Psoriasis

# Audit

- Why
  - For ourselves to encourage and confirm that we are on the right track.
  - For others to promote hypnosis as a viable clinical tool.
    - The dangers of a liberal and permissive approach to defining and categorising 'hypnosis'
    - Promoting the academic neuroscience of hypnosis undervalues the clinical affect in practice.

**Measure Yourself Concerns and Wellbeing (MYCAW)**

**First form**

Full name.....

Date of birth .....

Date first completed .....

.....

Please write down one or two concerns or problems which you would most like us to help you with.

1.

2.





Please circle a number to show how severe each concern or problem is now:

This should be YOUR opinion, no-one else's!



**Concern or problem 1:**

0 1 2 3 4 5 6

 Not bothering me at all      bothers me greatly 

**Concern or problem 2:**



0 1 2 3 4 5 6

 Not bothering me at all      bothers me greatly 

**Wellbeing:**

How would you rate your general feeling of wellbeing now ? ( How do you feel in yourself?)

0 1 2 3 4 5 6

 As good as it could be      As bad as it could be 

Thank you for completing this form.

## Measure Yourself Concerns and Wellbeing (MYCAW )

### Follow up form (face-to-face version)



Today's date .....

Look at the concerns that you wrote down before.

Please circle a number to show how severe each of those concerns or problems is now:



#### Concern or problem 1:

0 1 2 3 4 5 6

 Not bothering me at all bothers me greatly 

#### Concern or problem 2:



0 1 2 3 4 5 6

 Not bothering me at all bothers me greatly 

#### Wellbeing:

How would you rate your general feeling of wellbeing now? (How do you feel in yourself?)

0 1 2 3 4 5 6

 As good as it could be As bad as it could be 

#### Other things affecting your health

The treatment that you have received here may not be the only thing affecting your concern or problem. If there is anything else which you think is important, such as changes which you have made yourself, or other things happening in your life, please write it here.

#### What has been most important for you?

Reflecting on your time with \_\_\_\_\_, what were the most important aspects for you?  
( write overleaf if you need more space)

Thank you for completing this form.

## Patient-Doctor Depth of Relationship scale

1.1 Did you see your usual or regular doctor today?

- No <sub>0</sub>  
 Yes <sub>1</sub>  
 Not sure <sub>2</sub>

Thinking about the doctor you have just seen, please answer the following questions as honestly as possible by ticking the box that best fits with your opinion.

	Disagree	Neither agree nor disagree	Slightly agree	Mostly agree	Totally agree
2.1 I <b>know</b> this doctor very well	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
<hr/>					
2.2 This doctor knows me <b>as a person</b>	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
<hr/>					
2.3 This doctor really knows <b>how I feel</b> about things	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
<hr/>					
2.4 I know <b>what to expect</b> with this doctor	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
<hr/>					
2.5 This doctor <b>really cares</b> for me	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
<hr/>					
2.6 This doctor <b>takes me seriously</b>	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
<hr/>					
2.7 This doctor <b>accepts me</b> the way I am	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
<hr/>					
2.8 I feel <b>totally relaxed</b> with this doctor	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
<hr/>					



# MSc in Clinical and Academic Hypnosis

- Why

- “The problem under consideration is the observed divergence or the ‘perceived gap’ between clinicians and researchers in the hypnosis field. “

- **Darlene A. Osowiec (2014)**

- Philosophy of Science and the Emerging Paradigm: Implications for Hypnosis,
- American Journal of Clinical Hypnosis, 56:3, 216-233, DOI: [10.1080/00029157.2013.858613](https://doi.org/10.1080/00029157.2013.858613)

# MSc in Clinical and Academic Hypnosis

- This course aims to teach best practice in the application of hypnosis in a clinical and research setting.
- It will also provide training in rigorous experimental and neuroscientific techniques used in the study of hypnosis.
- By bringing together existing and future clinicians and future academic researchers this course aims to bridge a gap between applied and more theoretical applications of hypnosis.

# MSc in Clinical and Academic Hypnosis

- The course is designed for postgraduate health professions and any regulated health professional is welcome and encouraged to apply.
- It will also be ideal for recent graduates of Psychology considering a research career or any psychologists who are chartered members of the divisions of Clinical, Educational, Counselling, Occupational Psychology, or those engaged in research involving altered states of consciousness and hypnosis.

# MSc in Clinical and Academic Hypnosis

- Researchers and clinicians operating from different paradigms.
- On the one hand the empirical academic research approach, relies on a mechanistic model of externally observable, measurable, quantitative data, reducible parts.
- On the other hand, a more holistic model is systems-oriented, qualitative, looks at the whole person, includes subjective experiencing and participatory knowing, is inclusive of and yet beyond strictly biological bases of behaviour.



# MSc in Clinical and Academic Hypnosis

- In the hypnosis field, in dialogue or debate, the mechanistic model still garners dominant paradigm status.

# MSc in Clinical and Academic Hypnosis

- By moving to a “both/and” holistic perspective, the divergence, or extremes of a polarity, will become integrated
- By relinquishing outmoded gender metaphors such as “weak” or “soft” when referring to the clinician because of an approach that does not necessarily produce or adhere to “hard evidence” and “hard data,” or large samples of the population, the power imbalance will be addressed



"A great poet (*clinician*) ... must have the ear of a wild Arab listening in the silent desert, the eye of a North American Indian tracing the footsteps of an enemy upon the leaves that strew the forest, the touch of a blind man feeling the face of a darling child."

Samuel Taylor Coleridge