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HYPNOTIC COMMUNICATION AND THERAPEUTIC APPROACHES

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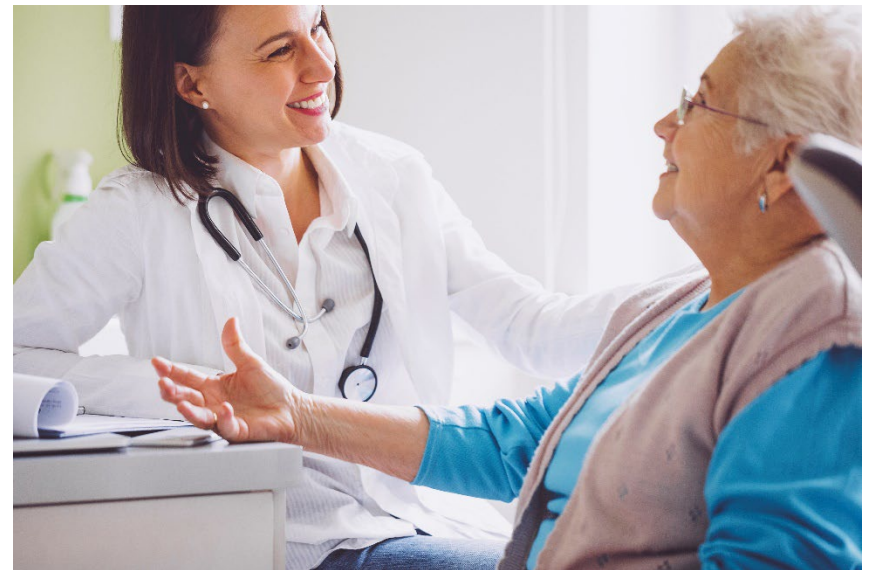
LEARNING OBJECTIVES

- Describe some basics and fundamentals about hypnosis
- Compare and contrast hypnosis with similar techniques used in psychotherapy
- Illustrate elements of Hypnotic communication
- Provide examples of how these may be used to communicate therapeutically

COMMUNICATION IMPACTING PATIENT-CENTERED OUTCOMES

Nonverbal Communication

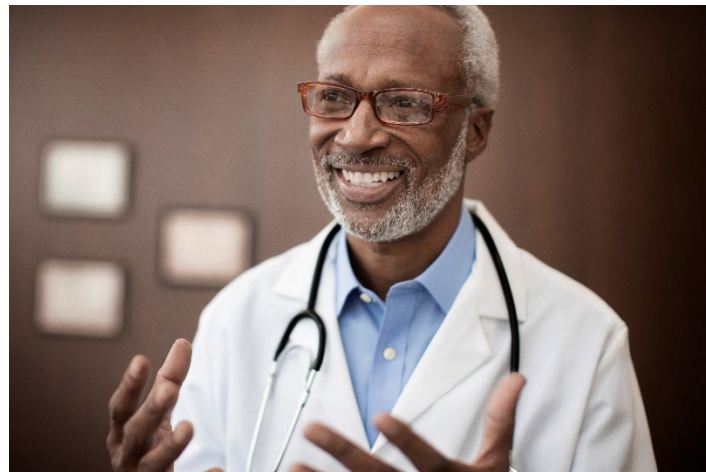
- Comfort touch, active listening, touching, smiling, gaze, eyebrow movement, head nod, handshakes, nurse-aide-initiated communication, emotional support, effective nonverbal communication



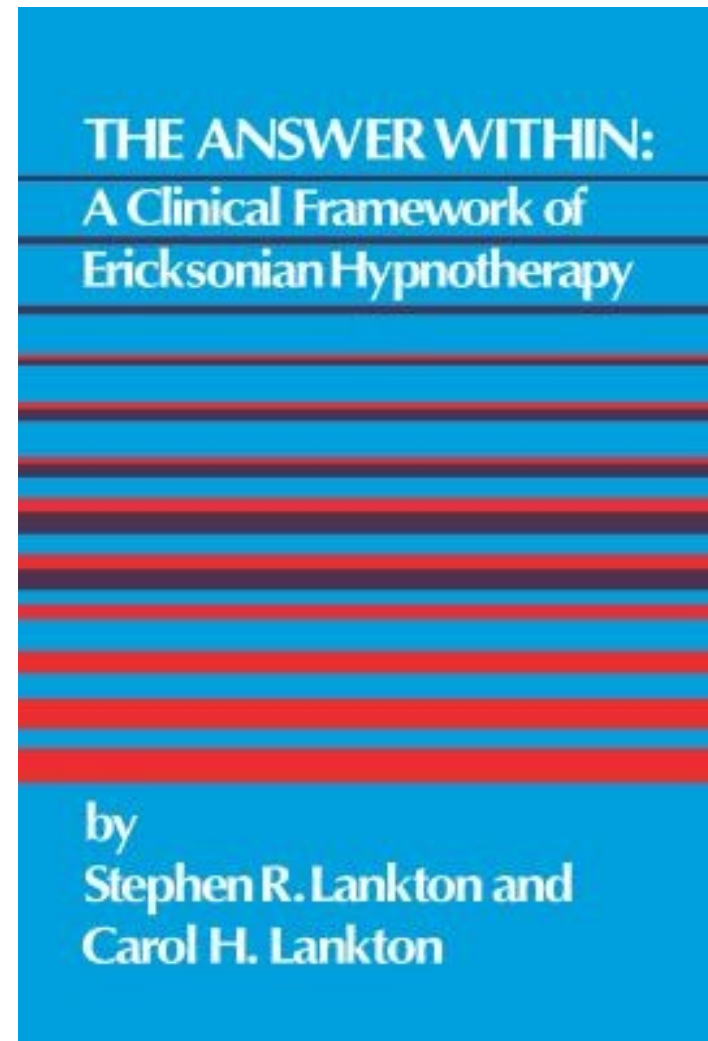
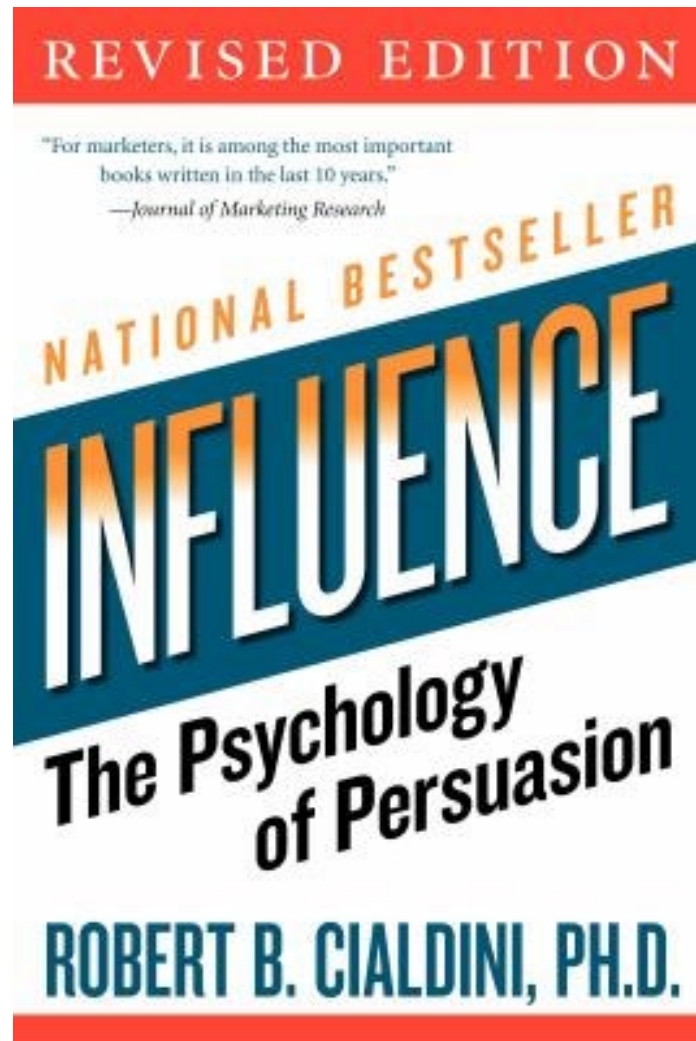
Sharkiya, 2023

COMMUNICATION IMPACTING PATIENT-CENTERED OUTCOMES

- Verbal communication – verbal communication, biomedical and psychosocial information, positive talk, lifestyle discussion, rapport building, mutual respect, equity, conflict resolution



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DR. PAUL WACHTEL ON THERAPEUTIC COMMUNICATION – BUILDING ON THE PATIENT’S STRENGTHS

- You seem to have difficulty talking.
- Sometimes you talk more easily than at other times.

Wachtel, 2011



LET'S DEMYSTIFY HYPNOSIS



WHAT IS HYPNOSIS?

- “Hypnosis is a focused experience of attentional absorption that invites people to respond experientially on multiple levels in order to amplify and utilize their personal resources in a goal directed fashion.” (Yapko, 2019, p. 8).
- “A state of consciousness involving focused attention and reduced peripheral awareness characterized by an enhanced capacity for response to suggestion.” (Elkins, Barabasz, Council, & Spiegel, 2015, p. 382)

TYPES OF HYPNOTIC PHENOMENA

- **Catalepsy** – postures and positions can be sustained for long periods of time, without fatigue; slowed psychomotor activity
- **Time distortion**, or altered sense of time (contraction, expansion)
- **Dissociation** – variously described as conscious and unconscious, separation of thought behavior, and feeling, splitting of hierarchical systems
- **Amnesia** – forgetting, or inability to recall
- **Hypermnnesia** – enhanced ability to recall – details become more vivid
- **Age regression** – re-experiencing memories from an earlier time

Edgette & Edgette, 1995

TYPES OF HYPNOTIC PHENOMENA (CONT)

- **Age progression** – (future orientation) – seeing oneself in the future
- **Negative hallucination** – alters sensory stimuli (experienced through hearing, sight, taste, smell, touch) so these are not experienced
- **Positive hallucination** – produces sensory stimuli that are not present
- **Automatic writing** – similar to dissociation, writing something without conscious awareness of it
- **Posthypnotic suggestion** – executing a suggestion after hypnosis is concluded, based on a cue

Edgette & Edgette, 1995

TYPES OF HYPNOTIC PHENOMENA (CONT)

- **Analgesia** – dulling of awareness of pain
- **Anesthesia** – complete lack of awareness of pain
- **Hypesthesia** – enhanced sensitivity
- **Hypnotic dreaming** – directed, suggested dreaming

Edgette & Edgette, 1995

AGE REGRESSION EXAMPLE

Cara 29
05/25/11

Cara 12
05 we day
Cara b

COMMON MYTHS AND MISCONCEPTIONS

- Concerns about autonomy
- Belief that it will not “work”
- Belief that hypnosis produces a magical cure
- Fear of saying or doing unwanted things
- Memories can be uncovered and are precise recordings of events
- Belief that one cannot be hypnotized/is easily hypnotized
- “The hypnotist has special powers”
- Fear of being unable to emerge from trance



THERAPEUTIC METHODS SIMILAR TO HYPNOSIS

- Progressive muscle relaxation
- Guided imagery
- Mindfulness, mindfulness meditation
- Autogenic training
- Meditation
- Breathing retraining, box breathing, breathwork
- Yoga (e.g., Hatha)

HYPNOTIC STRATEGIES

Hypnotic Technique	Used In or With	Used For
Progressive Muscle Relaxation	BT, CBT	Anxiety, stress, headache
Guided Imagery	CBT, DBT	Anxiety, Depression
Mindfulness, mindfulness meditation	ACT, CBT, EMDR, MBCT, MBSR	Depression, PTSD, stress
Autogenic training	Stand alone	Anxiety, Depression, insomnia, migraine, PTSD, stress
Meditation	Stand alone	Anxiety, stress
Breathing retraining, box breathing, breathwork	CBT, DBT	Anxiety, Depression, Insomnia
Yoga (e.g., Hatha)	ACT, CBT	Anxiety, Depression, cPTSD, Insomnia, PTSD

**ONCE YOU LEARN TO DO HYPNOSIS WELL,
YOU CANNOT UNDO THAT LEARNING**



COMMUNICATION STRATEGIES IN HYPNOSIS



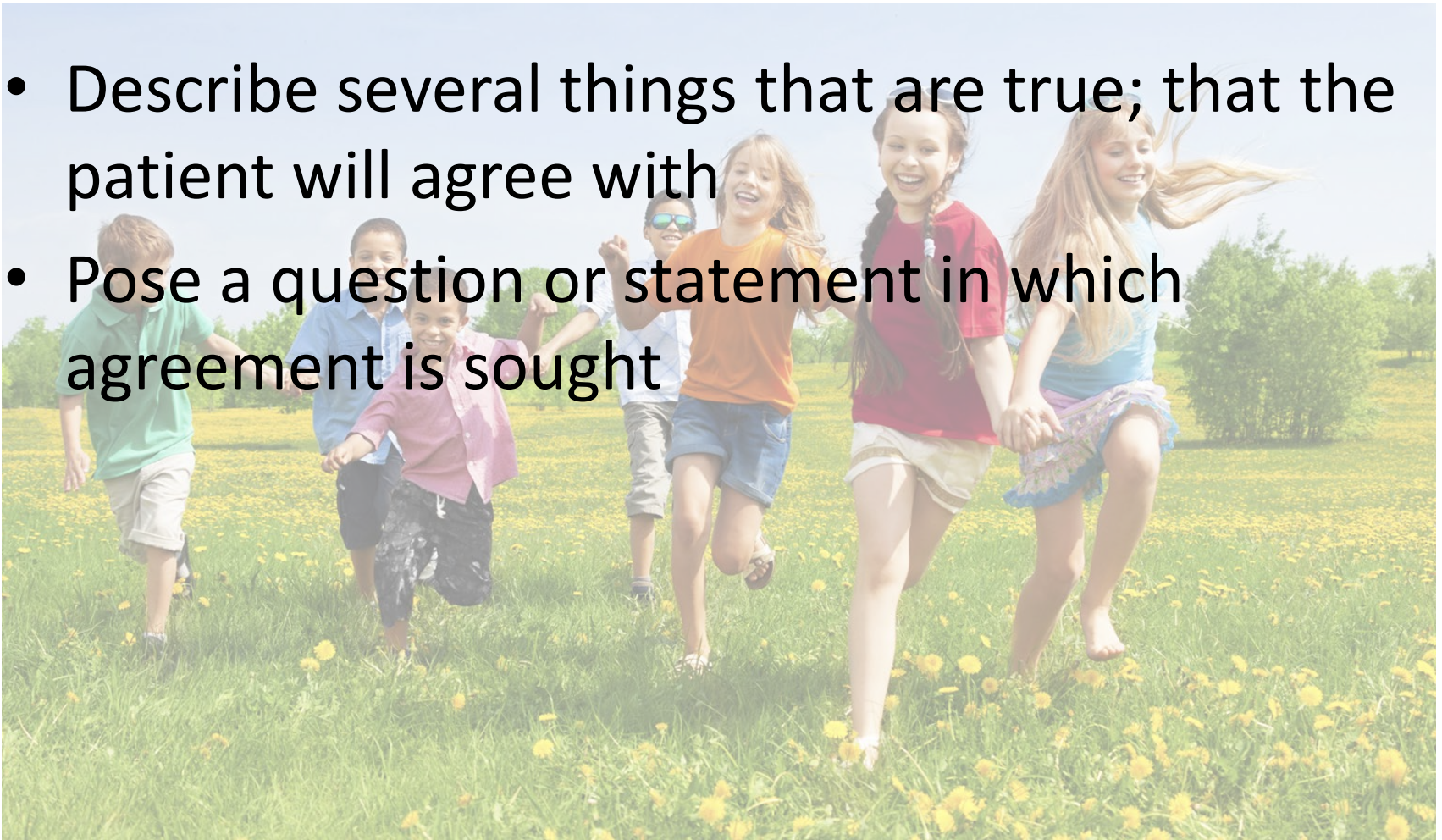
PACING AND LEADING

Pace: match the patient – speed, volume, sense of urgency or not, mirror posture, gestures.

Lead: guide into a new direction

TRUISMS (YES SETS)

- Describe several things that are true; that the patient will agree with
- Pose a question or statement in which agreement is sought



BIND OF COMPARABLE ALTERNATIVES

Offers a choice between two (or more) things that are essentially equivalent



UTILIZATION

The characteristics of the individual and what they bring to the clinical situation have value and can be employed in the clinical interaction.

It shows you are paying attention to the person.



CAREFUL SELECTION OF WORDS

- Avoid words with negative connotations
- Remain aware of the transderivational search



WORD SELECTION – EXAMPLE FROM THE COMFORT TALK® OF ELVIRA LANG, MD

- A. Would you like to try a relaxation exercise?
- B. Would you like me to guide you in a relaxation exercise?
- C. We offer a relaxation exercise that works really well for our patients. Would you like to experience how well it works for you?

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