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MedHyp eZine

Issue 7
July 2006

Dear Phil,

Phew! What a scorcher!

I've always wanted to have that as my own headline - and with the heat we are currently experiencing in England, and especially in our offices in London, I can say it like I mean it.

...and now I need to link 'heat' to 'pain'. Not a difficult link I'm sure you'll agree, but why talk about pain? Because it seems to be what everyone in our interest groups are talking about these days. We have not one but three research articles relating to the investigation of hypnosis and pain, and then of course the wonderful 'HypnoSurgery' programme on TV recently (see the side bar).

Whilst not claiming to be an oracle - I have been predicting this development for a while, as the student doctors that I have the pleasure of teaching always seem to leap at the fascinating world of pain control via suggestion. Long may it continue, and lets hope that the interest continues to spread into other areas too.

Enjoy the weather

The Editor

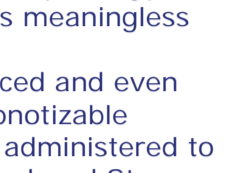
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Cognition

Suggestion overrides the Stroop effect in highly hypnotizable individuals

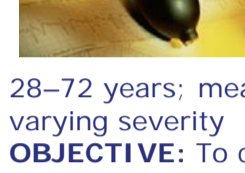
(From the editor: If you would like a quick understanding of the Stroop Effect before reading this article, [click here](#).)



AUTHOR(S): Raz, A., Moreno-Iñiguez, M., Martin, L., Zhu, H.
DATE: June 2006
DESIGN: Experiment
SUBJECTS: 49 right-handed, proficient readers of English (24 female) aged 20–35 years. Participants were recruited from a pool of about 350 volunteers who had been screened for suggestibility in a hypnotic context.
OBJECTIVE: To investigate the effects of suggestion on cognitive performance in highly suggestible individuals. To establish how a post-hypnotic suggestion administered to highly hypnotizable individuals can override a process that has become automatized through practice (i.e. reading).
INTERVENTIONS: Post-hypnotic suggestions without formal hypnosis. Drawing on a large sample of highly hypnotizable participants, the effects of suggestion on Stroop performance both with and without a post-hypnotic suggestion to perceive the input stream as meaningless symbols were examined.
RESULTS: Post-hypnotic suggestion reduced and even removed Stroop interference in highly hypnotizable individuals. It was shown that suggestion administered to highly hypnotizable persons significantly reduced Stroop interference and derailed a seemingly automatic process.
CONCLUSIONS: A suggestion to construe words as meaningless scribbles reduced the Stroop effect in highly hypnotizable individuals. It has been shown that it is possible to "un-ring the bell" and regain control over an automatic process. Such de-automatization may be fundamental for clinical interventions (e.g. cognitive therapy) as well as for furthering the understanding of automatic processes, volitional control, and their impact on consciousness.
SOURCE: Consciousness and Cognition. Article in press.

[Link to abstract \(and full article for subscribers\)](#)

Hypertension



Effects of mental relaxation and slow breathing in essential hypertension

AUTHOR(S): Kaushik, R., Kaushik, R., Mahajan, S., Rajesh, V.
DATE: January 2006
DESIGN: Randomised clinical trial
SUBJECTS: 100 patients (age range 28–72 years; mean age 43) with essential hypertension of varying severity

OBJECTIVE: To compare mental relaxation and slow breathing as adjunctive treatment in patients of essential hypertension by observing their effects on blood pressure and other autonomic parameters like heart rate, respiratory rate, peripheral skin temperature, electromyographic activity of the frontalis muscle and skin conductance.

INTERVENTIONS: **1. Mental relaxation:** Patients were asked to lie down comfortably on the bed and to undergo complete mental relaxation by thinking of some pleasant thought for 10 min. Patients were free to think about a real life event or some imaginary thing which could produce a pleasant effect over the mind. Disclosure of the nature of the thought was not required. The beginning and end of the session depended upon a signal from the therapist.
2. Slow Breathing: Patients were asked to sit comfortably in a chair. On receiving a signal from the investigator, they had to start taking slow and deep breaths, focussing their concentration on their breath, thus feeling the movements of the air through the nostrils during inspiration as well as expiration. The respiratory rate was maintained at 6 breaths/min, both inspiration as well as expiration performed over 5 s each. The exact timing was achieved by mentally counting from 1 to 5 during inspiration and from 6 to 10 during expiration. In addition, the precise timing was also achieved by the patients by seeing the respiratory graph calibrated with specific time intervals on the biofeedback monitor screen.

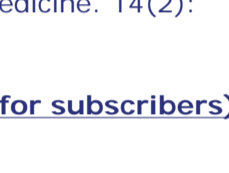
RESULTS: Both mental relaxation and slow breathing resulted in a fall in systolic blood pressure, diastolic blood pressure, heart rate, respiratory rate and electromyographic activity with increase in peripheral skin temperature and skin conductance. Slow breathing caused a significantly higher fall in heart rate, respiratory rate, systolic blood pressure and diastolic blood pressure. Increase in peripheral skin temperature and reduction in electromyographic activity occurred more with mental relaxation. No significant differences were seen between increases in skin conductance observed with both the modalities.

CONCLUSIONS: Even a single session of mental relaxation or slow breathing can result in a temporary fall in blood pressure. Both the modalities increase the parasympathetic tone but have effects of different intensity on different autonomic parameters.
SOURCE: Complementary Therapies in Medicine. 14(2): 120-126

[Link to abstract \(and full text for subscribers\)](#)

Neuroscience

Brain Imaging in Neurosciences - An Interdisciplinary Approach



AUTHOR(S): Halsband, U.
DATE: June 2006
DESIGN: Experiment
SUBJECTS: Seven right-handed volunteers with high-hypnotic susceptibility
OBJECTIVE: This study examined a fundamental question: Is verbal memory processing in hypnosis and in the waking state mediated by a common neural system or by distinct cortical areas?

INTERVENTIONS: Subjects were PET-scanned while encoding/retrieving word associations either in hypnosis or in the waking state. Word-pairs were visually presented and highly imaginable, but not semantically related (e.g. monkey-street). The presentation of pseudo-words served as a reference condition. An emission scan was recorded after each intravenous administration of O-15 water. (Result 1.) In order to further analyze the effect of hypnosis on imagery-mediated learning, sets of high-imagery word-pairs and sets of abstract words were administered. In the first experimental condition word-pair associations were presented visually. (Result 2.)

RESULT - 1: Encoding under hypnosis was associated with more pronounced bilateral activations in the occipital cortex and the prefrontal areas as compared to learning in the waking state. During memory retrieval of word-pairs which had been previously learned under hypnosis, activations were found in the occipital lobe and the cerebellum. Under both experimental conditions precuneus and prefrontal cortex showed a consistent bilateral activation which was most distinct when the learning had taken place under hypnosis.

RESULT - 2: In the second condition it was found that highly hypnotisable persons recalled significantly more high-imagery words under hypnosis as compared to low-hypnotisables both in the visual and auditory modality. Furthermore, high-imagery words were also better recalled by the highly hypnotisable subjects during the non-hypnotic condition. The memory effect was consistently present under both, immediate and delayed recall conditions.

CONCLUSIONS: The findings advance the understanding of the neural representation that underlies hypnosis and the neuropsychological correlates of hypnotic susceptibility.
SOURCE: Journal of Physiology-Paris. 99 (4-6): 470-482

[Currently in press - link to abstract only](#)

Pain I



Focused hypnotic analgesia: Local and remote effects

AUTHOR(S): Sharav, Y., Michael Tal, M.
DATE: June 2006
DESIGN: Experiment
SUBJECTS: 25 (14 males, 11 females) healthy volunteers; 12 high-hypnotizable (HH) and 13 low-hypnotizable (LH).

OBJECTIVE: To establish whether focused hypnotic analgesia is limited to a specific body location or spread all over the body.
INTERVENTIONS: Focused hypnotic analgesia was studied in response to ascending electrical stimuli, when analgesia and stimulation were applied to the same area (local), and when analgesia was applied to one location and stimulation was delivered to a different area (remote). The face or leg served alternately as the local or remote areas.

RESULTS: Hypnotic analgesia in the local site produced a significant pain reduction compared to the remote site in HH subjects but not in LH subjects. As stimuli increased in intensity the reduction in pain as a result of hypnosis was larger both in HH and LH subjects. Nevertheless, significant analgesia occurred in the 3 highest intensities in the local and remote location of HH subjects, but only in 2 highest intensities in the local and 1 in the remote of LH subjects.

CONCLUSIONS: In HH subjects focused hypnotic analgesia is mostly confined to the area aimed at, but some spread of analgesia to remote areas cannot be dismissed all together. Alternatively, this "spread" of analgesia could be due to a placebo effect in the remote area. Focused hypnotic analgesia requires increased attention to the body area aimed at, unlike analgesia achieved by distraction of attention.
SOURCE: Pain. Article in Press.

[Currently in press - link to abstract only](#)

Pain II

Randomized Clinical Trial of Local Anaesthetic versus a Combination of Local Anaesthetic with Self-Hypnosis in the Management of Paediatric Procedure-Related Pain

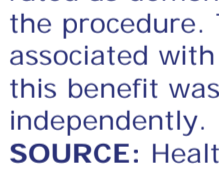


AUTHOR(S): Liossi, C., White, P., Hatlira, P.
DATE: May 2006
DESIGN: Prospective randomised controlled trial
SUBJECTS: 45 paediatric cancer patients (age 6–16 years)
OBJECTIVE: To compare the efficacy of an analgesic cream (eutectic mixture of local anaesthetics, or EMLA) with a combination of EMLA with hypnosis in the relief of lumbar puncture-induced pain and anxiety. To explore whether young patients can be taught and can use hypnosis independently as well as whether the therapeutic benefit depends on hypnotisability.

INTERVENTIONS: Group 1: local anaesthetic plus attention. Group 2: local anaesthetic plus hypnosis; Group 3: local anaesthetic plus attention.
RESULTS: Patients in the local anaesthetic plus hypnosis group reported less anticipatory anxiety and less procedure-related pain and anxiety and that they were rated as demonstrating less behavioural distress during the procedure. The level of hypnotisability was significantly associated with the magnitude of treatment benefit, and this benefit was maintained when patients used hypnosis independently.
SOURCE: Health Psychology. 25 (3): 307-315

[Link to full article \(in PDF format\)](#)

Pain III



Mediation and Moderation of Psychological Pain Treatments: Response Expectancies and Hypnotic Suggestibility

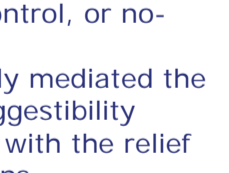
AUTHOR(S): Milling, L., Reardon, J., Carosella, G.
DATE: April 2006
DESIGN: Randomised Controlled Trial
SUBJECTS: 188 participants

OBJECTIVE: The mediator role of response expectancies and the moderator role of hypnotic suggestibility were evaluated in the analogue treatment of pain.
INTERVENTIONS: Distraction, cognitive-behavioural package, hypnotic analgesia suggestion, placebo control, or no-treatment control conditions.
RESULTS: Response expectancies partially mediated the effects of treatment on pain. Hypnotic suggestibility moderated treatment and was associated with the relief produced only by the hypnotic interventions.
CONCLUSIONS: The results suggest that response expectancies are an important mechanism of hypnotic and cognitive-behavioural pain treatments and that hypnotic suggestibility is a trait variable that predicts hypnotic responding across situations, including hypnosis-based pain interventions.
SOURCE: Journal of Consulting and Clinical Psychology/ 74 (2): 253-262

[Link to abstract \(and full text for subscribers\)](#)

Stress and Anxiety

The relaxation response: Reducing stress and improving cognition in healthy aging adults

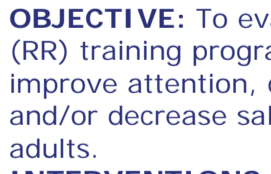


AUTHOR(S): Galvin, J., Benson, H., Deckro, C., Frichione, G., Dusek, J.
DATE: June 2006
DESIGN: Pilot randomised controlled single blinded trial
SUBJECTS: 15 adults with mean age 71.3 years and mean education level 17.9 years.
OBJECTIVE: To evaluate whether a Relaxation Response (RR) training program would decrease anxiety levels, improve attention, declarative memory performance and/or decrease salivary cortisol levels in healthy older adults.

INTERVENTIONS: 5 week program: Group 1- RR training; Group 2- control
RESULTS: Reaction time on a simple attention/psychomotor task was significantly improved with RR training, whereas there was no significant improvement on complex tasks of attention, verbal, or visual declarative memory tests. Self-reported state anxiety levels showed a marginally significant reduction (p<0.066). All subjects' salivary cortisol levels were within low-normal range and did not significantly change. The 5-week intervention in highly educated, mobile, healthy, aging adults significantly improved performance on a simple attention task.
SOURCE: Complementary Therapies in Clinical Practice. Article in press.

[Currently in press - link to abstract \(and full text for subscribers\)](#)

In the news...



This is still a new section, bringing you articles relevant to the eZine, that have been discussed in the media. We will try and stick to those items that show an acceptable degree of credibility and interest-value. (Not "hypnotist made me eat my foot"-type stories)

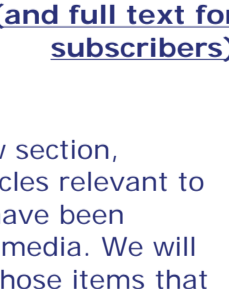
Stress Causes Fertility Problems in Women

["Unlearning Pain": The Brain Processes What It Imagines Rather Than Reality](#)

[Learning to live with the world's creepiest critters](#)

Feedback

Happy with the eZine?
 Not happy with the eZine?
 We always like to hear from you if you have suggestions or contributions. Please send any such comments to the editor at the address below.



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 web: <http://www.thamesmedicallectures.com>

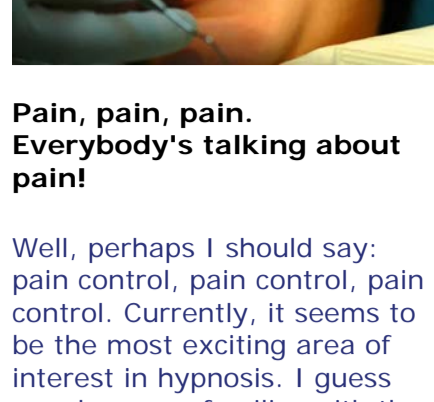
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HypnoSurgery



Pain, pain, pain. Everybody's talking about pain!

Well, perhaps I should say: pain control, pain control, pain control. Currently, it seems to be the most exciting area of interest in hypnosis. I guess people are so familiar with the idea of smoking cessation, weight control or even dealing with their unusual phobias, that they need a new sensational fix.

This is very good news. It means that those aspects of hypnosis and hypnotherapy are now becoming 'accepted'. So, while there will always be some who think it is voodoo, unscientific or sacrilegious, the mainstream now understand that it is of value - not just as a means of entertainment.

One notable result of this is that on Monday, 10th of April this year, the much-vaunted, two-hour long TV special called 'HypnoSurgery' was broadcast on Channel 4's 'More Four'. This included live - I mean it, live surgery. Nothing too unbearable to watch, but of massive interest to anyone in this fascinating business of ours.

More importantly perhaps, it is also hugely valuable to those who don't understand, or even believe that hypnosis works. This is because some people take the position (quite fairly) that they have to see it to believe it. This program allows them to do just that.

Why am I vaunting it even more? Because you can go to the website ([link below](#)) and watch the whole thing on your computer. You need Windows Media Player (which works on Macs as well as PCs) and the instructions are there if you need them.

Entertainment value

To prove that serious subjects can still be entertaining - if you have a few moments - follow the debate ([link also below](#)) that followed the show. 'Malkie' - who may have been a plant - stirs up the hornet's nest by suggesting that the whole hypnotherapy thing is mumbo-jumbo. The debate gets quite interesting and some excellent points are made. (Some not-so-excellent ones too, I might add).

Documentaries such as this help to tip the scales away from the freak shows (I'm talking about stage hypnosis) towards positive representations of the subject - promoting greater acceptability in the community.

Oh, and don't try this at home.

The [HypnoSurgery page at More Four](#) ([more links below](#))

Useful Links...

The [HypnoSurgery debate that followed the show...](#)

The [BHMA](#) [has](#) [having](#) [another](#) [workshop](#) [on](#) [hypnosis...](#)

Need a copy of Ursula James' highly acclaimed "Clinical Hypnosis Textbook" - quicker than Amazon?

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