Introduction to Clinical Hypnosis in Practice:

Jean Rogerson RGN.
Accredited Member of the British Society of Clinical and Academic Hypnosis
Adv Dip Clinical Hypnosis and Stress Management

© Jean Rogerson 2024 BSCAH Midlands Branch
What Is Hypnosis?

• The hypnotic state is a day-dreamy like state of mind induced by the person themselves either on their own (self or auto hypnosis) or guided by a therapist

• Hypnosis is not like being asleep - you can hear surrounding noises but they become unintrusive

• If something untoward occurs however, you would open your eyes and be alert
"Hypnosis is a procedure during which a health professional or researcher suggests that a client, patient, or subject experience changes in sensations, perceptions, thoughts, or behaviour. The hypnotic context is generally established by an induction procedure. Although there are many different hypnotic inductions, most include suggestions for relaxation, calmness, and well-being. Instructions to imagine or think about pleasant experiences are also commonly included in hypnotic inductions". (Irving Kirsh 1994)
• Hypnosis uses guided relaxation, intense concentration, and focused attention to achieve a heightened state of awareness that is sometimes called a **trance**. The person's attention is so focused while in this state that anything going on around the person is temporarily blocked out or ignored. (Griffin & Tyrrell, 2003) (Joe Tyrell 30 Jul 2016)
Stage Hypnotists

• From personal observation, hypnosis is not always received with the positive attention it deserves, Barling & de Lucchi (2004) argue stage shows which make hypnotised individuals perform humiliating behavioural routines for the entertainment of others, tends to reduce publics belief in the value of hypnosis.
“Sharp scratch”

“Bee Sting”

“We’re attacking you from all sides”

“Knife to skin”

“risk of major haemorrhage”

“you’ll need to be brave”

“We’re attacking you from all sides”

“Here’s the sick bowl for when you need it”

“this is the worst bit”

“How much pain are you in?”

“mummy’s never good with anaesthetics”
“Try not to worry”
“As people find themselves focusing as they breath out, they begin to relax without thinking about it”

“This will sting a little”
“This will numb the skin and allow the procedure to be performed more comfortably”

“We will give you medications to stop you vomiting after your surgery”
“We will give you medications to ensure you can eat and drink as soon as you are ready and feel like it”

Cyna AM et al –Communications Skills for the Anaesthetist. Anaesthesia 2009; 64(6):658-665
• Cage

• We are here to look after you so let's help you get comfortable on the couch.

• Your head will rest comfortably in this cradle/nest and remain in just the right position.
• You will feel the couch gently take you into this highly technical diagnostic piece of kit

• All you need to do is take a deep breath in and as you slowly breath out, just let your eyes close and remain comfortably closed during this investigation

• Continue breathing comfortably and calmly

• Knowing that you can press the call button if you need to speak to us

• Most people remain calm and comfortable throughout
• It will sound as though someone is digging the road
• You will hear some music playing and you can just let your mind drift off to a special place where you feel calm and in control
• You will hear the sound of the machine as it does this important work for you
• Taking a nice big breath in and letting it out really slowly
• Continue with this nice slow calming breathing as we continue in a calm comfortable way
Systematic review of Doctor-Patient communication on outcomes. Riedl D. Schussler D. (Jun 2017)


- In the doctor-patient relationship (building), 60% of the studies showed a positive effect on objective health parameters. Information gathering and provision (patient education) were the most investigated domains with unequivocally positive effects.

- Communication (skills) showed improved results and enabled treatment-related emotions and behaviour. Two studies included an economical evaluation with reduced healthcare costs.
Introduction

What is Hypnosis?

What it is not

Functional MRI

Communication

Raising awareness of our modalities

Self Hypnosis and ego strengthening

Questions

© Jean Rogerson 2024 BSCAH Midlands Branch
Practical
Experience

• V were you able to see your kitchen, kettle, mugs?
• A could you hear the sound of the water leaving the tap, the kettle boiling?
• K did you feel the weight of the kettle as it filled with water, or the coldness of the milk container
• O were you able to smell the lemon?
• G did you taste the lemon?
VAKOG Defined

• Visual
• Auditory
• Kinaesthetic
• Olfactory
• Gustatory
Introduction Into practice
Wellbeing

- Physical relaxation
- Ego strengthening
Self Hypnosis

Practical
References


Training

• Open to doctors, dentists, nurses and other registered Health Care Professionals and registrants with Health and Care Professions Council

• Three modules, spread over three/four weekends

• You can either attend the BSCAH course or you can gain a University Validated Advanced Diploma in Clinical Hypnosis and Related Techniques

• Depending on your entry level you will be studying towards gaining a BSc, Post Grad Adv Dip or MSc.

• For more details on either course http://www.bscah.com/about-training