

Foundations for Integrating Hypnosis into Your Therapies for Treating Anxiety, Depression, and Pain

with
Michael D. Yapko, Ph.D.
Webinar Section 11 of 12



Michael D. Yapko, Ph.D.
www.yapko.com

Hypnotic Analgesia and Anesthesia

An advanced and specialized application of clinical hypnosis.

Why Focus Research on Hypnotic Pain Control?

Perhaps because:

- 1) Analgesia and anesthesia are most dramatic subjective alterations
- 2) Both are more amenable to objective measurement
- 3) Both have greatest practical use

The myth is that if you can control pain hypnotically, it must not have been “real”

In fact, hypnosis has been used as the sole anesthetic in major surgical procedures

Remember, pain has “signal value” and has to be respected

It also has the potential to be managed skillfully with hypnosis

Michael D. Yapko, Ph.D. www.usapko.com

Assessment

- The American Pain Society stresses that clinicians consider pain as “the fifth vital sign”
- This elevates it to an importance given to the measurements of temperature, pulse, blood pressure, and respirations during patient assessments.

Falk, K.M. Pain Management Presentation for the National Center of Continuing Education 2005

Michael D. Yapko, Ph.D. www.usapko.com

Key Issues in Hypnosis and Pain Management

- Are you adequately prepared to provide treatment? (Legally, ethically, scientifically...)
- Addressing variability in treatment response
- Holding onto a multi-dimensional and not necessarily linear approach
- The role of medication or other physical treatments

Michael D. Yapko, Ph.D. www.yapko.com

Perspectives About Pain

- Pain is a subjective phenomenon and can only be viewed in terms of the person's experience
- Pain is a private, internal experience that cannot be directly observed
- The language that the person uses to describe his or her pain is therefore crucial in striving to understand it

Michael D. Yapko, Ph.D. www.yapko.com

Perception of Pain

Research has shown that people experience more pain when they:

- focus on it
- are told to expect one thing but experience something different
- expect a high level of pain
- are tense and under stress

Michael D. Yapko, Ph.D. www.yapko.com

Hypnosis is used to create an incongruity between physicality and perceptions of physicality

Michael D. Yapko, Ph.D. www.yapko.com

Pain and Perception

Hypnosis alters people's self-reports of pain but not their physiological responses to the pain stimulus.

Put another way, hypnosis impairs the explicit perception of pain while leaving the implicit perception of pain intact.

Kihlstrom, Science, 1987, (pp. 1445-1452)

Michael D. Yapko, Ph.D. www.yapko.com

The Pain Narrative

How people describe their pain not only states its existence and describes its nature, but, through the telling, especially *repetitive* telling, is part of the pain experience itself

Michael D. Yapko, Ph.D. www.yapko.com

Shifting From a Static to a Dynamic View of Symptoms

Problems are not usually static entities (e.g., "my pain"). Rather, they are **dynamic processes**. They generally occur in a sequence which begins with some trigger or initiator and then proceeds linearly, though on multiple inter-related levels, through a series of perceptions, attitudes, emotions, behaviors, etc.

Michael D. Yapko, Ph.D. www.yapko.com

Targets for Behavioral Activation

- Pacing techniques (doing but not overdoing)
- Homework assignments
- Pleasant activity scheduling
- Self-hypnosis, imagery, relaxation, mindfulness
- Sleep enhancement strategies
- Lifestyle changes

Michael D. Yapko, Ph.D. www.yapko.com

Examples of Incongruities in Hypnotic Suggestions for Pain Relief

- Your body can be here but it's not really here
- You can be aware of the sensation of no sensation
- You can notice what it's like to not notice
- The numbness can feel really good
- Notice how much more comfortable it feels to feel just a little discomfort
- You can enjoy the sense of curiosity in not needing to know what happened to those sensations

Michael D. Yapko, Ph.D. www.yapko.com

Phases of Intervention in Pain Management

- Patient selection
- Patient preparation
- Induction and deepening procedures
- Therapeutic suggestions
- Instruction in self-hypnosis
- Post-hypnotic suggestions
- Termination

Michael D. Yapko, Ph.D. www.yapko.com

Areas Of Inquiry Regarding Pain

- Sensory description of the pain
- History of the pain (acute vs. chronic)
- Prior treatments and results
- Impact of the pain (on relationships, self-esteem, leisure, work, and mood)
- Level and style of pre-morbid functioning
- Secondary gains (IF any)

Michael D. Yapko, Ph.D. www.yapko.com

Sensory Descriptions of Pain

Sensory descriptions often suggest
intervention strategies

Thermal sensations (hot, cold)

Kinesthetic sensations (dull, sharp, stabbing)

Temporal sensations (transient, stable)

Visual representations (size, shape,color)

Michael D. Yapko, Ph.D. www.yapko.com

More Areas Of Inquiry

- Specific antecedents to fluctuations in intensity levels
- Expectancy
- Locus of control
- Level of depression (IF any)
- Rating the level of pain
- Rating the level of suffering

Michael D. Taplo, Ph.D. www.uspallp.com

Categories of Pain Narratives

- Pain is never-ending
- Pain is relative
- Pain is explainable
- Pain is torment
- Pain is restrictive
- Pain is changeable

Lewandowski, *Pain Management Nursing*, 2005, 6(2), 58-67
Available online at www.medscape.com/viewarticle/508003, posted 7-14-05

Michael D. Taplo, Ph.D. www.uspallp.com

Guided Imagery to Change the Meaning of Pain

Participants used a guided imagery technique over a consecutive 4-day period compared to a control group. The meaning of pain as never-ending was prominent before randomization to treatment and control groups. It remained a strong theme for participants in the control group but pain as never-ending did not resurface for participants in the treatment group.

Lewandowski, *Pain Management Nursing*, 2005, 6(2), 58-67
Available online at www.medscape.com/viewarticle/508003, posted 7-14-05

The Imagery Used in the Study

“...let your hands come together with palms turned upward as if forming a cup...Put the pain object in your hands...How would you change the shape...the size... Now change the color...and its texture...Give it a different sound...You can throw the pain away...or move it somewhere else...Let yourself become aware... of how pain can be changed...By focusing with intention, the pain changes...”

Exercise: Facilitating Sensory Alteration

- Induction
- Response set: Physical variations (shifts in sensory experience during hypnosis)
- Theme: Sensation is malleable- then offer suggestions for a specific sensory shift
- Check-in with a request for an ideomotor signal
- Check-in with a request for a verbal description
- PHS- reinforce malleability, empowerment
- Closure and disengagement

For Next Time

- Go to Google Scholar and type in the search engine “Hypnosis, pain management” and read at least two articles
- Practice the sensory alteration strategy
- Watch the interview on my website (www.yapko.com) with Dr. Marie-Elisabeth Faymonville
- View *The Case of Vicki*, a moving demonstration session featuring hypnosis for pain relief in a 42-year old woman diagnosed with terminal cancer. Available in entirety online at the *Trancework* Companion website:
<https://routledgetextbooks.com/textbooks/9781138563100/resources.php>
Then choose “A Video Demo” ; You might want to also read the transcript as you watch the session

Michael D. Yapko, Ph.D.
www.yapko.com

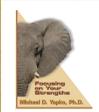
24

Thanks for your kind attention!

Michael D. Yapko, Ph.D.

Website: www.yapko.com

Email: michael@yapko.com



Michael D. Yapko, Ph.D.
www.yapko.com

25
