

History of Hypnosis

Hypnotic-like states have been noted since the beginning of human kind and still is observed during cultural rites, like dances, chants or music to create a certain magic and mystery. Yet, hypnosis as a science is documented as far back as the eighteenth century and was used as a beneficial tool in resolving pain. Franz Anton Mesmer (1734-1815), an Austrian physician, became famous in Paris using a form of hypnosis also referred to as animal magnetism and mesmerism. He conducted his session by using iron rods and a tub filled with water to treat his patients. During these treatments patients entered into convulsions until exhaustion, and then they were taken to the recovery room for proper rest. Presumably, Johann Josef Gassner (1717-1799), a Swiss priest, challenged Messmer's method by curing his patients through exorcism. Because of conflicting Catholic interests, Pope Pius VI, who ordered him to conduct his treatments with discretion, investigated Gassner. Later, hypnosis spread to the United States, where Phineas Parkhurst Quimby (1802-1866) cured an invalid, who then became famous as Mary Baker Eddy, the founder of Christian Science. In England, John Elliotson, (1791-1868) performed successfully 1834 surgeries while patients were in hypnosis. Also James Esdaille (1808-1859), a Scottish surgeon, reported 345 major surgeries through hypnosis. One of the most famous scientist was Jean-Martin Charcot (1835-1893), of France, who presented his thesis in 1886 before the French Academy of Sciences. At the Nancy school, Auguste Ambrose Liebeault and Hyppolyte Bernheim perceived hypnosis as normal phenomena and documented their works in various languages to also elicit interests. Since Charcot and Bernheim were medical scientists, hypnosis became a valid tool and was considered as a medical therapeutic method. When Sigmund Freud (1856-1939) and his young student, Carl-Gustave Jung, entered the medical arena, the exploration of the power of the mind became a serious study to many professionals (Hilgard & Hilgard, 1994).

Freud, Jung, Milton Erickson, and Carl Rogers documented the revolutionary shift from the early authoritarian techniques to the permissive and naturalistic approaches as well. It was clear to them that the authoritarian approach may induce a hypnoidal state, but it also frightened the patient to the point of total abandonment. When a patient was in a hypnoidal state and responded to suggestions, he/she was able to refer to his/her own inner experiences. The therapist had very little to do with the experience, he simply allowed the patient to enter the altered state of consciousness. The altered behavior derived from the life experience of the patient.

Although, hypnosis does not alter people's behavior, or their life experiences, it helps them to identify their limited behavior. Hypnosis allows the patient to associate with the experience and reorganize his/her thoughts, which eventually evolves into a cure. The cure lies within the inner resources of the patient. The response to hypnosis, behavior and abreaction is simply satisfying to the observer, but can not be confused with the cure to the problem.

In later life, Erickson and Jung changed their approach to more therapeutic suggestions. It assisted the patient to get in touch with his/her feelings, thoughts and behaviors. Free association, active imagination, and utilization approach helped the access of the state-dependent memory and could reframe the problem at hand. Through the permissive approach the patient was allowed to utilize his/her own style and modalities to change his/her behavior. Furthermore, he/she could change his/her behavior within his/her own timeline and realize the change on a more naturalistic way. It is clearly noted that the shift allowed a patient to utilize the essence of his own inner resources, which also accounted for the renaissance of the current therapy.

The next reason Dr. Erickson's findings became intriguing was the results of his studies of the various indirect approaches to induce an altered state. The direct approach was the most used technique, yet not all subjects responded as well. He, therefore, made his mark with his studies called double binding suggestions. He preferred this technique because it did not imply a direct command to the patient. He believed that some patients have difficulties responding to a direct

approach, which rendered them non-hypnotizable. As Erickson's findings indicated, an indirect, flexible method providing suggestions allowed the patient to give up any apprehension and open to choose when to take in the suggestions (Erickson, 1980).

Types of Hypnosis

A) The most important skill one learns is self-hypnosis and its utilization of different relaxation techniques. Inducing an altered state becomes the main focus and must be practiced until one is at ease with the relaxation response and the physiological changes of the own body.

B) Then one learns to differentiate between clinical hypnotherapy and stage hypnotism, which is usually referred to as the "Svengali Effect." As seen in the movies, certain conditions have to be taken in consideration to achieve such results. The misconception most people hold is the question about suggestions of crimes under hypnosis. The fact remains that people who perform for stage hypnotism are extremely susceptible to hypnosis. However, it is a fallacy to believe that these people will execute all commands given to them. The subconscious mind acts upon suggestions only if based on true values. In fact, clinical and scientific data show that subjects do not conduct or commit any crimes against their best interest while in trance.

C) Mantra is a term, which describes the rhythm of suggestions or voicing of suggestions, combined with deep breathing exercises. During the intake, I learned to use a mantra to let body and mind enter a state of hypnosis simultaneously. For example, if one wants to utilize a mantra then one focuses on the breathing technique in particular. As one lets go of all tensions, a suggestion in a clear, rhythmic voice is repeated over and over again. Letting go becomes imprinted in the memory until trance is initiated. This exercise engages the visual; kinesthetic and auditory modality until a complete state of relaxation is achieved.

D) The two types of progressive relaxation are known as active and passive progressive relaxation methods. The active progressive relaxation method operates by tensing the muscles beyond normal level and then releasing the muscles again. Repeating this exercise several times with each muscle allows for proper relaxation. One starts with the arm, hands, legs, feet, back, shoulders, neck, stomach, chest and the face muscles until the entire body is relaxed. During the exercise one imagines as one inhales to release all tensions held in the muscles and lets go of any stress retained mentally, emotionally and physically.

The passive, progressive relaxation method begins with the most relaxed area of the body, creating the same sensation throughout the body. With each breath, one releases muscles tension, lets go and relaxes further. Then, one focuses on spreading all this positive energy from one part of the body to the other parts accomplishing the same feeling throughout (Alaman and Lambrou, 1983). Altered States of Consciousness A trance, mini-trance, or altered state of consciousness is referred to and compared to a state of hypnosis. Anytime any kind of hypnotic relaxation is achieved; the person benefits from the trance or the relaxation. One looks for three responses while in a trance: physical, intellectual, and emotional response. The physical response is a physical change in the perception of senses; the intellectual response allows for all thoughts to pass and replaces them with hums and breathing. The emotional response creates imagery and allows feelings to emerge and pass.