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The International Society of Hypnosis

NEWSLETTER

Building Bridges of Understanding
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A LETTER FROM THE PRESIDENT



MARK JENSEN

Looking forward to seeing you at the ISH World Congress in June

My primary message in this letter to all ISH members – and any future ISH members who provide clinical care or conduct research using hypnosis – is this: *Please register for and plan participate in the 2024 ISH World Congress in Kraków, Poland, this coming June.* It promises to be a very special and memorable event, in a very special and memorable city.

Plans for the congress continue, but we already know enough to give us many reasons for participating in the Congress. One is to participate in one or more of several pre-congress workshops. These include workshops on: (1) “Brief Therapy: Key Concepts in the Ericksonian Ap-

proach,” facilitated by Jeffrey Zeig from the USA; (2) medical hypnosis, co-facilitated by Ernil Hanssen and Bernhard Trenkle from Germany; (3) an introduction to hypnosis (“Hypnosis for the curious”), co-facilitated by Jolanta Berezowska, Lucyna Lipman, and Katarzyna Szymańska, from Poland; (4) dental hypnosis, facilitated by Albrecht Schmierer, from Germany; and (5) “Lighting the soul, lightening the body,” facilitated by Cecilia Fabre, from Mexico.

A second reason to participate in the congress is to increase your knowledge and therapeutic skills in the area of hypnosis. The education program is currently being finalized, but will include over 100 lectures and workshops on the clinical applications and scientific understanding of hypnosis, given and facilitated from master clinicians and leading hypnosis researchers from around the world.

A third reason to come to the congress is to have an opportunity to see and spend time in one of the most beautiful cities in the world; a city steeped in history. There will be opportunities for congress participants to participate in one or more of at least three walking tours of different sections of the city, allowing you to see hear about historical landmarks, architectural wonders, and Kraków’s hidden treasures.

A fourth reason is to participate in the gala dinner on the evening of June 13. The venue will be the wonderful Stara Zajezdnia Kraków by DeSilva. Stara Zajezdnia Kraków by DeSilva is a historic building in the centre of Kraków's Kazimierz. The Hall was built in 1913 and once there was a tram



depot. The renovated building is a unique facility. The Hall is an example of a rare wooden skeleton architecture in Kraków with brickwork, commonly called “Prussian Wall”. It gives the interior an unusual character and makes it a place with a soul and original atmosphere.

A fifth reason to register for the congress is the opportunity to schedule a longer tour with your colleagues before or after the congress. You will be able to choose from tours to the monuments of Poland or to different European countries. The before- and after-congress tour program is currently being prepared by Najmeh Kazemi, who has a great deal of experience in organizing successful tour programs for International Hypnosis Conferences.

Finally, and perhaps most importantly, a sixth reason to participate is to have the opportunity to meet with old friends, and make new ones, from the international hypnosis community. Already, over 600 individuals have registered for the conference from 39 countries, which are (so far!) Australia, Austria, Belgium, Brazil, Bulgaria, Canada, China, the Czech Republic, Denmark, Finland, France, Germany, Ghana, Hungary, Iceland, India, the Islamic Republic of Iran, Israel, Italy, Japan, Luxembourg, Mexico, New Zealand, Norway, Oman, Pakistan, Poland, Portugal Romania, the Russian Federation, Slovenia, Spain, Sweden, Switzerland, Türkiye, Ukraine, the United Kingdom, the United States, and Uruguay. In short, the congress will allow each participant to connect with and “build bridges of understanding” with individuals from each continent. Such connections and the resulting cooperation (and perhaps future collaborations) provide hope for us to work together for the good of all humankind.

For many of us in the field, the ISH world congresses have been among the most important events of our careers. There we have established life-long friendships and have been inspired. Our memories of past congresses – and the memories yet to be established for future congresses – have been and will be among our most precious.

I am very much looking forward to seeing you and meeting with you in Kraków in June. To learn more and to register, please go to <https://www.hypnosis2021.com.pl/en>.

Warm regards,
Mark P. Jensen



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EIN BRIEF DES PRÄSIDENTEN

ÜBERSETZT VON SHADY TONN

Ich freue mich darauf, Sie auf dem ISH-Weltkongress im Juni zu sehen

Meine Hauptbotschaft in diesem Brief an alle ISH-Mitglieder - und alle zukünftigen ISH-Mitglieder, die Hypnose in der klinischen Versorgung oder in der Forschung einsetzen - ist diese: Bitte melden Sie sich für den ISH-Weltkongress 2024 in Krakau, Polen, im kommenden Juni an und planen Sie Ihre Teilnahme. Es verspricht eine ganz besondere und denkwürdige Veranstaltung zu werden, in einer ganz besonderen und denkwürdigen Stadt.

Die Planungen für den Kongress laufen noch, aber wir wissen bereits genug, um viele Gründe für eine Teilnahme am Kongress zu haben. Einer davon ist die Teilnahme an einem oder mehreren der zahlreichen Workshops, die vor dem Kongress stattfinden. Dazu gehören Workshops zu folgenden Themen: (1) "Kurztherapie: Key Concepts in the Ericksonian Approach", geleitet von Jeffrey Zeig aus den USA; (2) medizinische Hypnose, geleitet von Ernil Hanssen und Bernhard Trenkle aus Deutschland; (3) eine Einführung in die Hypnose ("Hypnose für Neugierige"), gemeinsam geleitet von Jolanta Berezowska, Lucyna Lipman und Katarzyna Szymańska aus Polen; (4) zahnmedizinische Hypnose, geleitet von Albrecht Schmierer aus Deutschland; und (5) "Die Seele erleuchten, den Körper erhellen", geleitet von Cecilia Fabre aus Mexiko.

Ein zweiter Grund für die Teilnahme am Kongress ist die Erweiterung Ihrer Kenntnisse und therapeutischen Fähigkeiten im Bereich der Hypnose. Das Ausbildungsprogramm wird derzeit fertiggestellt, wird aber über 100 Vorträge und Workshops über die klinischen Anwendungen und das wissenschaftliche Verständnis der Hypnose umfassen, die von Meisterkliniken und leitenden Wissenschaftlern gehalten und geleitet werden.

Ein dritter Grund, am Kongress teilzunehmen, ist die Gelegenheit, eine der schönsten Städte der Welt zu sehen und Zeit in ihr zu verbringen, eine Stadt, die reich an Geschichte ist. Die Kongressteilnehmer haben die Möglichkeit, an einem oder mehreren von mindestens drei Stadtrundgängen teilzunehmen, bei denen sie historische Sehenswürdigkeiten, architektonische Wunder und die verborgenen Schätze Krakaus kennen lernen können.

Ein vierter Grund ist die Teilnahme am Gala-Dinner am Abend des 13. Juni. Veranstaltungsort ist das wunderschöne Stara Zajeźdźnia Kraków by DeSilva. Stara Zajeźdźnia Kraków by DeSilva ist ein historisches Gebäude im Zentrum des Krakauer Stadtteils Kazimierz. Die Halle wurde 1913 erbaut und beherbergte früher ein Straßenbahndepot. Das renovierte Gebäude ist eine einzigartige Einrichtung. Die Halle ist ein Beispiel für die in Krakau seltene Holzskelettbauweise mit Ziegelmauerwerk, das gemeinhin als "preußische Mauer" bezeichnet wird. Sie verleiht dem Innenraum einen ungewöhnlichen Charakter und macht ihn zu einem Ort mit Seele und origineller Atmosphäre.

Ein fünfter Grund, sich für den Kongress anzumelden, ist die Möglichkeit, vor oder nach dem Kongress eine längere Tour mit Ihren Kollegen zu planen. Sie können zwischen Touren zu den Sehenswürdigkeiten Polens oder in verschiedene europäische Länder wählen. Das Programm für die Touren vor und nach dem Kongress wird derzeit von Najmeh Kazemi vorbereitet, die über große Erfahrung in der Organisation erfolgreicher Tourenprogramme für internationale Hypnosekonferenzen verfügt.

Ein sechster und vielleicht wichtigster Grund für die Teilnahme ist schließlich die Möglichkeit, alte Freunde aus der internationalen Hypnose-



gemeinschaft zu treffen und neue zu gewinnen. Bereits jetzt haben sich über 600 Personen aus 39 Ländern für die Konferenz angemeldet, nämlich (bis jetzt!) aus Australien, Belgien, Brasilien, Bulgarien, China, Dänemark, Deutschland, Finnland, Frankreich, Ghana, Island, Indien, der Islamischen Republik Iran, Israel, Italien, Japan, Kanada, Luxemburg, Mexiko, Neuseeland, Norwegen, Oman, Österreich, Pakistan, Polen, Portugal, Rumänien, der Russischen Föderation, Slowenien, Spanien, Schweden, der Schweiz, der Tschechischen Republik, der Türkei, der Ukraine, Ungarn, dem Vereinigten Königreich, den Vereinigten Staaten und Uruguay. Kurz gesagt, der Kongress bietet allen Teilnehmern die Möglichkeit, mit Menschen aus allen Kontinenten in Kontakt zu treten und "Brücken der Verständigung" zu bauen. Solche Verbindungen und die daraus resultierende Zusammenarbeit (und vielleicht auch künftige Kooperationen) geben uns Hoffnung, zum Wohle der gesamten Menschheit zusammenzuarbeiten.

Für viele von uns in diesem Bereich gehören die ISH-Weltkongresse zu den wichtigsten Ereignissen in unserer Laufbahn. Dort haben wir lebenslange Freundschaften geschlossen und sind inspiriert worden. Unsere Erinnerungen an vergangene Kongresse - und die Erinnerungen, die wir für künftige Kongresse noch aufbauen werden - gehören zu den wertvollsten, die wir haben und haben werden.

Ich freue mich sehr darauf, Sie im Juni in Krakau zu sehen und mit Ihnen zusammenzukommen. Um mehr zu erfahren und sich anzumelden, besuchen Sie bitte <https://www.hypnosis2021.com.pl/en>

Herzliche Grüße,
Mark P. Jensen

worldwide professionals about my whoISHwho search

whoISHwho

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North Atlantic Ocean, Csendes-óceán, Déli-óceán, Indiai-óceán

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VISIT: WWW.WHOISHWHO.COM



LA LETTRE DU PRÉSIDENT (FR)

TRADUCTION NICOLE RUYSSCHAERT

Dans l'attente de vous voir au Congrès Mondial de l'ISH en juin.

Mon message principal dans cette lettre à tous les membres de l'ISH - et à tous les futurs membres de l'ISH qui fournissent des soins cliniques ou mènent des recherches en utilisant l'hypnose - est le suivant : S'il vous plaît, inscrivez-vous et prévoyez de participer au Congrès mondial de l'ISH 2024 à Cracovie, en Pologne, en juin prochain. Il promet d'être un événement très spécial et mémorable, dans une ville très spéciale et mémorable.

Les préparatifs du congrès se poursuivent, mais nous en savons déjà assez pour avoir de nombreuses raisons de participer au congrès. L'une d'entre elles est de participer à un ou plusieurs des ateliers pré-congrès. Il s'agit notamment des ateliers suivants (1) "La thérapie brève : Concepts clés de l'approche éricksonienne", animé par Jeffrey Zeig des Etats-Unis ; (2) l'hypnose médicale, co-animé par Ernil Hanssen et Bernhard Trenkle d'Allemagne ; (3) une introduction à l'hypnose médicale, animé par Ernil Hanssen et Bernhard Trenkle d'Allemagne ; (3) une introduction à l'hypnose ("Hypnosis for the curious"), co-animée par Jolanta Berezowska, Lucyna Lipman et Katarzyna Szymańska, de Pologne ; (4) l'hypnose dentaire, animée par Albrecht Schmierer, d'Allemagne ; et (5) "Lighting the soul, lightening the body", animée par Cecilia Fabre, du Mexique.

Une deuxième raison de participer au congrès est d'améliorer vos connaissances et vos compétences thérapeutiques dans le domaine de l'hypnose. Le programme de formation est en cours de finalisation, mais il comprendra plus de 100 conférences et ateliers sur les applications cliniques et la compréhension scientifique de l'hypnose, donnés et animés par des maîtres cliniciens et des chefs de file de l'industrie de l'hypnose.

Une troisième raison de venir au congrès est d'avoir l'occasion de voir et de passer du temps dans l'une des plus belles villes du monde, une ville imprégnée d'histoire. Les participants au congrès auront l'occasion de prendre part à une ou plusieurs des trois visites à pied de différents quartiers de la ville, ce qui leur permettra de découvrir des monuments historiques, des merveilles architecturales et les trésors cachés de Cracovie.

Une quatrième raison est de participer au dîner de gala qui aura lieu le 13 juin au soir. Le lieu du dîner sera le magnifique Stara Zajezdnia Kraków by DeSilva. Stara Zajezdnia Kraków by DeSilva est un bâtiment historique situé dans le centre de Kazimierz à Cracovie. Le hall a été construit en 1913 et abritait autrefois un dépôt de tramways. Le bâtiment rénové est une installation unique. Le hall est un exemple d'architecture à ossature de bois rare à Cracovie, avec une maçonnerie de briques, communément appelée "mur prussien". Il confère à l'intérieur un caractère inhabituel et en fait un lieu à l'âme et à l'atmosphère originales.

Une cinquième raison de s'inscrire au congrès est la possibilité de programmer une visite plus longue avec vos collègues avant ou après le congrès. Vous aurez le choix entre des visites des monuments de Pologne ou de différents pays européens. Le programme des visites avant et après le congrès est actuellement préparé par Najmeh Kazemi, qui a une grande expérience dans l'organisation de programmes de visites réussis pour les conférences internationales sur l'hypnose.

Enfin, et c'est peut-être la raison la plus importante, une sixième raison de participer est d'avoir l'opportunité de rencontrer de vieux amis, et de s'en faire de nouveaux, de la communauté internationale de l'hypnose. Plus de 600 personnes se sont déjà inscrites à la conférence, en provenance de 39 pays, à savoir (pour l'instant !) l'Allemagne, l'Australie, l'Au-



triche, la Belgique, le Brésil, la Bulgarie, le Canada, la Chine, le Danemark, l'Espagne, la Finlande, la France, le Ghana, la Hongrie, l'Islande, l'Inde, la République islamique d'Iran, Israël, l'Italie, le Japon, le Luxembourg, le Mexique, la Norvège, la Nouvelle-Zélande, Oman, le Pakistan, la Pologne, le Portugal, la Roumanie, la Fédération de Russie, la Slovénie, la Suède, la Suisse, la Turquie, l'Ukraine, le Royaume-Uni, les États-Unis et l'Uruguay. En bref, le congrès permettra à chaque participant d'entrer en contact et de "construire des ponts de compréhension" avec des personnes de chaque continent. Ces liens et la coopération qui en résulte (et peut-être les collaborations futures) nous donnent l'espoir de travailler ensemble pour le bien de toute l'humanité.

Pour beaucoup d'entre nous, les congrès mondiaux de l'ISH ont été l'un des événements les plus importants de notre carrière. Nous y avons noué des amitiés durables et avons été inspirés. Nos souvenirs des congrès passés - et ceux qui restent à créer pour les congrès futurs - ont été et seront parmi les plus précieux.

J'ai hâte de vous voir et de vous rencontrer à Cracovie en juin. Pour en savoir plus et vous inscrire, rendez-vous sur <https://www.hypnosis2021.com.pl/en>

Chaleureuses salutations,
Mark P. Jensen

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LETTERA DEL PRESIDENTE (IT)

TRADUZIONE IN ITALIANO DI CONSUELO CASULA

In attesa di vedervi al Congresso Mondiale ISH di giugno

Il mio messaggio principale in questa lettera a tutti i membri dell'ISH - e a tutti i futuri membri dell'ISH che forniscono assistenza clinica o conducono ricerche utilizzando l'ipnosi - è questo: Iscrivetevi e programmate la partecipazione al Congresso Mondiale ISH 2024 che si terrà a Cracovia, in Polonia, il prossimo giugno. Si preannuncia un evento molto speciale e memorabile, in una città molto speciale e memorabile.

I piani per il congresso continuano, ma sappiamo già abbastanza per avere molte ragioni per partecipare al congresso. Uno è quello di partecipare a uno o più dei numerosi workshop pre-congressuali. Questi includono workshop su: (1) "La terapia breve: Concetti chiave nell'approccio Ericksoniano", facilitato da Jeffrey Zeig dagli Stati Uniti; (2) ipnosi medica, co-facilitato da Ernil Hanssen e Bernhard Trenkle dalla Germania; (3) un'introduzione all'ipnosi ("Ipnosi per i curiosi"), co-facilitata da Jolanta Berezowska, Lucyna Lipman e Katarzyna Szymańska, dalla Polonia; (4) ipnosi dentale, facilitata da Albrecht Schmierer, dalla Germania; e (5) "Illuminare l'anima, alleggerire il corpo", facilitata da Cecilia Fabre, dal Messico.

Un secondo motivo per partecipare al congresso è quello di accrescere le proprie conoscenze e competenze terapeutiche nel campo dell'ipnosi. Il programma educativo è attualmente in fase di definizione, ma comprenderà oltre 100 conferenze e workshop sulle applicazioni cliniche e la comprensione scientifica dell'ipnosi, tenuti e facilitati da maestri clinici e leader del settore.

Un terzo motivo per venire al congresso è l'opportunità di vedere e trascorrere del tempo in una delle città più belle del mondo, una città ricca di storia. I partecipanti al congresso avranno l'opportunità di partecipare a uno o più di almeno tre tour a piedi in diverse zone della città, che vi permetteranno di conoscere i punti di riferimento storici, le meraviglie architettoniche e i tesori nascosti di Cracovia.

Un quarto motivo è quello di partecipare alla cena di gala la sera del 13 giugno. La sede sarà il meraviglioso Stara Zajezdnia Kraków di DeSilva. Stara Zajezdnia Kraków by DeSilva è un edificio storico nel centro di Kazimierz a Cracovia. La sala è stata costruita nel 1913 e un tempo ospitava un deposito di tram. L'edificio ristrutturato è una struttura unica nel suo genere. La Hall è un esempio di architettura a scheletro in legno, rara a Cracovia, con muratura in mattoni, comunemente chiamata "muro prussiano". Questo conferisce all'interno un carattere insolito e lo rende un luogo con un'anima e un'atmosfera originale.

Un quinto motivo per iscriversi al congresso è l'opportunità di programmare una visita più lunga con i colleghi prima o dopo il congresso. Potrete scegliere tra visite ai monumenti della Polonia o a diversi Paesi europei. Il programma di tour prima e dopo il congresso è attualmente in fase di preparazione da parte di Najmeh Kazemi, che ha una grande esperienza nell'organizzazione di programmi di tour di successo per i congressi internazionali di ipnosi.

Un quinto motivo per iscriversi al congresso è l'opportunità di programmare un tour più lungo con i colleghi prima o dopo il congresso. Potrete scegliere tra visite ai monumenti della Polonia o a diversi Paesi europei. Il programma di tour prima e dopo il congresso è attualmente in fase di preparazione da parte di Najmeh Kazemi, che ha una grande



esperienza nell'organizzazione di programmi di tour di successo per i congressi internazionali di ipnosi.

Infine, e forse più importante, un sesto motivo per partecipare è quello di avere l'opportunità di incontrare vecchi amici, e di farne di nuovi, della comunità internazionale dell'ipnosi. Oltre 600 persone si sono già iscritte al congresso da 39 Paesi: Australia, Austria, Belgio, Brasile, Bulgaria, Canada, Cina, Repubblica Ceca, Danimarca, Finlandia, Francia, Germania, Ghana, Ungheria, Islanda, India, Repubblica Islamica dell'Iran, Israele, Italia, Giappone, Lussemburgo, Messico, Nuova Zelanda, Norvegia, Oman, Pakistan, Polonia, Portogallo, Romania, Federazione Russa, Slovenia, Spagna, Svezia, Svizzera, Türkiye, Ucraina, Regno Unito, Stati Uniti e Uruguay. In breve, il congresso consentirà a ogni partecipante di entrare in contatto e "costruire ponti di comprensione" con persone provenienti da ogni continente. Questi legami e la conseguente cooperazione (e forse future collaborazioni) ci danno la speranza di lavorare insieme per il bene di tutta l'umanità.

Per molti di noi del settore, i congressi mondiali ISH sono stati tra gli eventi più importanti della nostra carriera. Li abbiamo stretti amicizie che durano da una vita e siamo stati ispirati. I nostri ricordi dei congressi passati - e quelli ancora da stabilire per i congressi futuri - sono stati e saranno tra i più preziosi.

Non vedo l'ora di vedervi e di incontrarvi a Cracovia a giugno. Per saperne di più e per iscriversi, visitate il sito <https://www.hypnosis2021.com.pl/en>

Cordiali saluti,
Mark P. Jensen



CARTA DEL PRESIDENTE (ES)

TRADUCIDO POR TERESA ROBLES

Esperando verle en el Congreso Mundial de la ISH en junio

Mi mensaje principal en esta carta a todos los miembros de la ISH - y a cualquier futuro miembro de la ISH que proporcione atención clínica o realice investigación utilizando la hipnosis - es el siguiente: Por favor, insíbete y planea participar en el Congreso Mundial de la ISH 2024 en Cracovia, Polonia, el próximo mes de junio. Promete ser un evento muy especial y memorable, en una ciudad muy especial y memorable.

Los planes para el congreso continúan, pero ya sabemos lo suficiente como para tener muchas razones para participar en él. Una de ellas es participar en uno o varios de los talleres precongreso. Entre ellos se incluyen talleres sobre: (1) "Terapia Breve: Conceptos clave del enfoque ericksoniano", impartido por Jeffrey Zeig, de EE.UU.; (2) hipnosis médica, cofacilitado por Ernil Hanssen y Bernhard Trenkle, de Alemania; (3) una introducción a la hipnosis ("Hipnosis para curiosos"), impartida por Jolanta Berzowska, Lucyna Lipman y Katarzyna Szymańska, de Polonia; (4) hipnosis dental, impartida por Albrecht Schmierer, de Alemania; y (5) "Encender el alma, iluminar el cuerpo", impartida por Cecilia Fabre, de México.

Una segunda razón para participar en el congreso es aumentar sus conocimientos y habilidades terapéuticas en el área de la hipnosis. El programa educativo se está ultimando en estos momentos, pero incluirá más de 100 conferencias y talleres sobre las aplicaciones clínicas y la comprensión científica de la hipnosis, impartidos y facilitados por maestros clínicos y líderes en el campo de la hipnosis.

Una tercera razón para venir al congreso es tener la oportunidad de ver y pasar tiempo en una de las ciudades más bellas del mundo; una ciudad cargada de historia. Los congresistas tendrán la oportunidad de participar en una o varias de las tres visitas guiadas a pie por distintos barrios de la ciudad, lo que les permitirá conocer los hitos históricos, las maravillas arquitectónicas y los tesoros ocultos de Cracovia.

Una cuarta razón es participar en la cena de gala de la noche del 13 de junio. El lugar de celebración será el maravilloso Stara Zajeźdnia Kraków by DeSilva. Stara Zajeźdnia Kraków by DeSilva es un edificio histórico situado en el centro del barrio Kazimierz de Cracovia. Se construyó en 1913 y en su día fue una cochera de tranvías. El edificio renovado es una instalación única. El Hall es un ejemplo de arquitectura de esqueleto de madera poco común en Cracovia, con mampostería de ladrillo, comúnmente llamada "muro prusiano". Confiere al interior un carácter inusual y lo convierte en un lugar con alma y ambiente original.

Una quinta razón para inscribirse en el congreso es la oportunidad de programar una visita más larga con sus colegas antes o después del congreso. Podrá elegir entre excursiones a los monumentos de Polonia o a distintos países europeos. El programa de excursiones antes y después del congreso está siendo preparado actualmente por Najmeh Kazemi, que tiene una gran experiencia en la organización de programas de excursiones de éxito para Conferencias Internacionales de Hipnosis.

Por último, y quizás la más importante, una sexta razón para participar es tener la oportunidad de encontrarse con viejos amigos, y hacer otros nuevos, de la comunidad internacional de hipnosis. Ya se han inscrito en el congreso más de 600 personas de 39 países, que son (¡hasta ahora!) Alemania, Australia, Austria, Bélgica, Brasil, Bulgaria, Canadá, China, Dinamarca, Eslovenia, España, Estados Unidos, Federación de Rusia, Finlandia,



dia, Francia, Ghana, Hungría, India, Islandia, Irán (República Islámica del), Israel, Italia, Japón, Luxemburgo, México, Noruega, Nueva Zelanda, Omán, Pakistán, Polonia, Portugal, Reino Unido, República Checa, Rumanía, Suecia, Suiza, Turquía, Ucrania y Uruguay. En resumen, el congreso permitirá a todos los participantes conectar y "tender puentes de entendimiento" con personas de cada continente. Estas conexiones y la cooperación resultante (y quizá futuras colaboraciones) nos dan la esperanza de trabajar juntos por el bien de toda la humanidad.

Para muchos de nosotros, los congresos mundiales de la ISH han sido uno de los acontecimientos más importantes de nuestras carreras. En ellos hemos entablado amistades para toda la vida y hemos recibido inspiración. Nuestros recuerdos de los congresos pasados - y los recuerdos que aún quedan por establecer para los congresos futuros - han sido y serán de los más preciados.

Estoy deseando verle y reunirme con usted en Cracovia en junio. Para más información e inscripciones, visite <https://www.hypnosis2021.com.pl/en>

Cordialmente,
Mark P. Jensen



LETTER FROM THE EDITOR

Ten years ago, I started the first newsletter with the following words:

"I have the honor to edit the newsletter beginning with the fall 2014 issue and going forward. I really feel it is a special opportunity to help information flow between our members and the world headquarters, and to provide a forum to get to know each other better. Being an individual member and BoD member of ISH, attending all the ISH Conferences during my "professional adulthood" (except for Singapore, when I gave birth to our third son), knowing many of the distinguished colleagues, and being a friend of many, I really feel a part of ISH, and am happy to do what I can to help work towards its goals and mission."



Katalin Varga is an associate professor at the Eötvös Loránd University (ELTE), the head of the Department of Affective Psychology, the President of Hungarian Association of Hypnosis, and a BoD member of the International Society of Hypnosis. Her research topic was the investigation of the subjective experiences connected to hypnosis and the role of suggestions in critical states. She got her degree of "Doctor of University" (ELTE) in 1991, and her PhD degree in 1997 on comparing the subjective and behavioral effects of hypnosis.

As a member of the "Budapest hypnosis research laboratory" she is investigating hypnosis in an interactional framework, in the multilevel approach she is focusing on the phenomenological data. She is also working in the medical field, using and teaching psychological support based on positive suggestions in various areas of medicine. Co-chair of the 1st international Conference on Hypnosis in Medicine, held in Budapest, 2013.

In the **Main Interview Kris Klajs** takes us through the latest developments from our meeting in Krakow in June. There's still time to register and come to this conference (Mark Jensen lists several reasons in his Letter from the President).

In the column of **Meeting our Mentors Elvira V. Lang** is interviewed by Nicole Ruysschaert. I was particularly fascinated to read about her professional background and career because she has drawn a fascinating picture of how someone can go from "pure somatic medicine" to hypnosis as the essence of her work.

In the column of **Building Bridges of Understanding**, we have a "Short review of hypnosis as an alternative treatment for infertility" by **Borbála Hupuczi**, a student of Eötvös Loránd University. For me, fertility (and reproduction in general) is much closer to intimacy, human interactions, and affectivity, rather than technological achievements. I am therefore particularly pleased that we have been able to read about it here.

The **book review** introduces Jonathan Fast – "Mesmer: the extraordinary adventures of the inventor of hypnosis in 18th century Vienna & Paris," including a romantic & thrilling episode in Bohemia.

Zsuzsanna Besnyó in her **article review** provides "The colorful palette of hypnosis a brief review from the color of words to trick our brain". **Gary Elkins and Vanessa Muñiz** post the usual column of The International Journal of Clinical and Experimental Hypnosis.

I would like to express my sincere appreciation to everyone who contributed to the NL. Especially that everyone works on a voluntary basis.

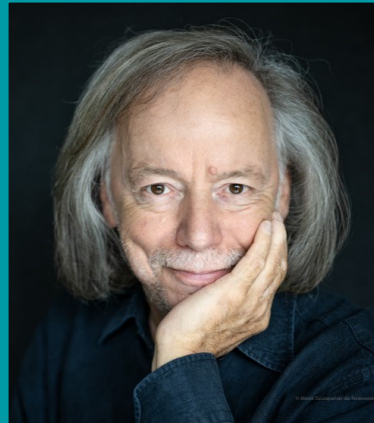
I invite all of you to contact me with your ideas, suggestions for topics, questions, or new columns.

Katalin Varga,
Dipl. Psych. Ph.D.



MAIN INTERVIEW

WITH KRIS KLAJS



Kris Klajs - Dipl. Psych., is the Founder (1993) and Director of The Milton H. Erickson Institute of Poland. President Elect of the International Society of Hypnosis. He is an Approved Supervisor and certified psychotherapist of the Polish Psychiatric Association and an Approved Supervisor and certified psychotherapist of the Polish Psychological Association. Teaching nationally and internationally (Austria, Canada, China, France, Germany, Great

Britain, Iran, Lithuania, Mexico, Nepal, South Africa, Spain, Sweden, USA). Over last 25 years M.H. Erickson Institute of Poland was the sponsor of two European Congresses of Ericksonian Hypnosis and Psychotherapy (2005, 2014) and a number of inland conferences.

How did you first encounter hypnosis – when / where? (perhaps some opinions / movies / shows long before you started in the professional field)

My first encounter with clinical hypnosis was in 1983. It was during a hypnotherapy training sponsored by the Psychiatry department, at the Jagiellonian University in Krakow, Poland.

What was your first impression in contact with therapeutic hypnosis? How did colleagues around you react to that?

At the very first moment - fascination. A few weeks later it completely changed – to boredom. The patient was lying on the couch. The therapist was sitting behind the patient's head, with a set of standardized hypnotic suggestions which seemed to be a very conservative approach. Five years before, after finishing my study, I made a promise to myself – that I will do my best to avoid any boring professional activity. Just the opposite – I wanted to reward myself with curiosity and excitement. As a result, I quit and totally withdrew hypnosis from my professional repertoire. Fortunately, eight years later, I was able to come back to hypnosis. My marriage with hypnosis has brought me great satisfaction.

Can you give a brief overview of your career, and your work and the place hypnosis has in it?

After graduating from university in 1978, I got a job as an academic teacher and clinician at the Psychiatry Department, Medical University in my hometown which constituted the first 15 years of my professional activity. Hypnosis was not my focus then. From 1991 – 1992, I received a scholarship from the Ericksonian Hypnotherapy in Germany. Great experience! In 1993, we opened the M. H. Erickson Institute of Poland (P.I.E.). PIE is one of the few teaching organizations with dual acceptance as a training institute by the Polish Psychiatric Association and the Polish Psychological Association, the two oldest and biggest societies in the field. I have been an active member ever since, practicing and teaching clinical hypnosis. During the end of the nineties, I started to teach Ericksonian hypnotherapy nationally and internationally.



What is your main area of practice with hypnosis?

I am working with different types of patients, mainly diagnosed as personality disorders, depression, or OCD. I like to cooperate with patient's families so I work with families and couples as well.

What is the place, the importance of hypnosis in your work? Anything specific that makes you / your work different from others in the field?

Hypnosis helps my patients and myself to travel in the space of time. I have found time progression hypnotic strategies very useful. Hypnosis helps to evoke and collect individual and systemic resources by patients and families. I like to facilitate that kind of activity.

Who are/were your mentor(s)? people who influence your way of thinking and working?

No way to mention all my great teachers. I got incredible great support and friendship from Jeff Zeig. After many hours studying under Ernest Rossi's encouragement, I still hear his extremely supportive sentence "Kris, you understand nothing". It helps me to stay on track and to trust myself. B.A. Erickson still helps me a lot. From time to time especially when I need to be supported, she speaks to me, "Kris, you know what is the right answer, you are the M.H. Erickson Institute director and this is not a coincidence". My older brother – Bernhard Trenkle, the world master of building bridges of understanding and cooperation between people and cultures, has been a major influence and supporter. I am a very lucky one to meet great masters and to spend plenty of time with them.

What is your favorite professional hypnosis book?

"The February Man" and "The Collected Works of Milton H. Erickson," an ongoing study, and reading "Uncommon Therapy" for joy and inspiration.

What do you personally see as your most important contributions to the field?

I am satisfied with my idea of Futuregram (FG), a hypnosis-based approach-helping patients to travel in time and space with a collection of family resources. It is a clinical example of including time progression trance phenomena into the hypnotherapy process. With a little help of my friends, we built the Ericksonian Institute in Poland and introduced modern hypnotherapy. It is an ongoing growth process. I'm proud and happy to co-organize the Wigry project with Bernhard Trenkle. It is probably the longest ongoing teaching program in hypnosis.

Any recommendations, hints, or advice you would like to give to young(er) colleagues?

I have three: First, you need to practice every day. Nothing is more important than daily practice. Second, be connected with the social services field. Talk with other specialists about your work. Cooperate. Enjoy group supervision and professional meetings. Third, be curious and brave. Ask questions, search, and study. Hypnosis is like an ocean but we know only know about the surface. There are a lot of unanswered questions and even more unasked questions in the field.

Do you see some important contributions of hypnosis in dealing with disasters and trauma affecting larger communities? Offering support / help in areas affected by disasters?

No doubts, hypnotic work is helpful with individual, family and wider social systems work after trauma disasters, especially with posttraumatic growth strategies based on time progression. Our way of understanding or conceptualizing unconscious mind can be helpful to prevent or to mitigate human conflicts, I strongly believe.



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COOPERATION IN HYPNOSIS. CHALLENGES & BENEFITS



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CONGRESS

What is the „story” / interpretation of the slogan: “Cooperation in hypnosis. Challenges and benefits.”

The congress headline is based on professional experiences that show cooperation as an essence of hypnosis. The therapist’s knowledge and hypnotic skills, together with the patient’s motivation can build a highway to mental health. We have decided to expand that idea and invite world-class hypnosis specialists to discuss and express many aspects of that issue as; cooperation between conscious and unconscious mind, different ego states, different generations, between old masters and rising stars in the field, between different medical area specialists, between devoted researchers and practitioners, and most of all between different cultures. I am sure we will enjoy the challenges and benefits of cooperation during this meeting and in the next years we will utilize the long-lasting effects of the Congress.

Who are the keynote speakers?

It is always a challenge for the organization team to decide. The congress



will be attended by several prominent hypnosis specialists. Due to the theme of the congress, which oscillates around collaboration, it is significant for us that the lecturers will include presenters from different countries, cultures, and ages, and people who focus more on practice, as well as those who conduct research. Keynote speakers will include Jeffery Zeig (USA), as well as Xin Fang (China), and Norma Barretta, one of the most experienced masters in the field. Mark Jansen – the president of ISH, Bernhard Trenkle, the past president and incoming president, Kris Klajs. We are not completely done with our list of speakers.

What kind of special programs are planned?

We designed the Congress to make modern hypnosis available for different specialists, regardless of their experience in hypnosis. When you are a medical doctor or a dentist with a big curiosity but limited hypnosis experience, that meeting is perfect for you. You can profit from participating in pre-congress introductory workshops designed especially for you as a medical doctor or a dentist. When you are a psychotherapist with a big curiosity but limited hypnosis experience, that meeting is for you. You can profit from participating in pre-congress introductory workshops designed especially for you. When you are an expert in the field of hypnosis that meeting is for you. You can make a choice and enrich yourself participating in selected activities. When you are a researcher, that meeting is for you. You will join a number of meetings presenting and discussing scientific research. We have a number of presentations focusing on pain management, on systemic and family issues.

How about the social programs and informal meeting options?

On the first day of the congress - 12 June - there will be lectures in the plenary hall. We are keen to meet in one room and see how many hypnosis professionals wanted to come to Krakow. At the moment 700 people from about 40 countries have registered and we are hoping for more. At the end of the day, there will be a welcome cocktail with opportunity for informal discussions. In addition, we are planning a gala dinner for lecturers and participants in Stara Zajezdnia on 13 June. This meeting is an opportunity to spend time in a relaxed atmosphere, to get to know each other, not only during lectures and workshops. Milton Erickson used to say that it is much easier to learn when we are happy, so we invite you to engage in conversation and international exchange.

Why would people come to Krakow? Can you give 3 or 5 good reasons for people to come to Krakow congress?

1. Good, interesting, with a varied program. You can choose from more than 100 thematic workshops, lectures, discussions, and demonstrations and additional pre-conference workshops. A wide range of presentations is available on different topics – pain, anxiety, depression, trauma, addiction, psychosomatics, pain, psycho-oncology, and working with families. Everyone can find what is useful for clinical work.
2. Workshops will be taught by more than 100 lecturers from more than 30 countries: Australia, Austria, Belgium, Brazil, Canada, China, Czech Republic, Denmark, Finland, France, Germany, Hungary, India, Iran, Israel, Italy, Japan, Mexico, New Zealand, Oman, Pakistan, Poland, Russian Federation, Slovenia, Spain, Switzerland, Sweden, Turkey, Ukraine, UK, Italy, USA, Uruguay.
3. Meetings among professionals working similarly. Exchange of experiences, discussions, and professional support between participants.
4. Hypnosis and time for self-development.
5. Beautiful, friendly Krakow. Wawel Castle. Market Square. June. We also offer many excursions - sightseeing tours of Krakow during the congress, as well as pre-and post-congress tours.



INCOMING PRESIDENT: PAST, PRESENT AND FUTURE OF HYPNOSIS.

How can ISH contribute to the spread and acknowledgment of hypnosis in the medical/psychotherapeutic practice?

We should continue building bridges of understanding between cultures and countries. Every culture has its treasures of mental healing recovery processes. They are usually located somewhere between the conscious and unconscious mind. We all can benefit from that wisdom till today we know little about that.

What can we learn from the past of hypnosis?

Modern hypnosis has started from two sources. One was connected with short, effective, medical intervention which included surgical pain control hypnotic interventions before ether application was available in medicine. We can see the continuity of those processes in hypnotic pain management in dentistry, anesthesiology, and many other specializations. On the same path – short, time-limited symptom (for example fear) refusal interventions. That path is very useful in gynecology, oncology, cardiology, and rehabilitation support. The second field was hysteria treatment with hypnosis. In that particular moment, psychotherapy was born. Hypnotherapy has survived the time of analytical mental health hegemony concepts. Thanks to Milton H. Erickson achievements, hypnotherapy exploded again with new energy. Hypnotherapy or hypnosis application in psychotherapy. Those two vital and powerful streams show the power of hypnosis. We should respect and develop both areas as our resources.

During your career what kind of changes have you observed in the application of hypnosis (in general and/or in your own practice)? What do you like or dislike in the field / world of hypnosis?

The areas of short, effective interventions are expanded far wider than on-pain control. On the other hand, Ericksonian hypnotherapy is more and more seen and respected as an independent psychotherapy school. It is a great satisfaction to observe that growth. We will be part of it by listening and joining lectures and workshops during the Congress.

How do you see the future of hypnosis? In the medical field? In the psychotherapeutic field? What is missing?

Hypnosis needs to be more available and popular. The good news is, we can offer a lot to our patients. The bad news is - who knows about that? We need to be more active in promoting modern clinical hypnosis achievements. There is no great international business behind our shoulders, so we need to make it by ourselves.

If you had a dream ... about the future of hypnosis ... what happens in your dream?

In my dream, benefits of hypnosis are more accessible to the patients, and more present in daily medical and psychological services. Hypnotherapy or pain management, fear reduction, and rehabilitation facilitation – to mention only a few areas. Hypnosis is a real low-budget method. The majority of the cost is the education of the specialist. Special equipment is not necessary. No costs of medication. We need to talk about that issue louder.

Do you have a specific 'masterplan' for the future of hypnosis and ISH?

Continuity of Bernhard Trenkle's ideas of inviting and including a variety of different cultures.



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For the City of Krakow
Przemysław Czaja**



Continuity of Mark Jensen's monthly coffee meetings with the president. Following Camillo Loriedo's inspiration, I would like to start annual meetings with constituent societies. The professional power of ISH members looks phenomenal and the task for every president is to find a way to support and utilize it, I think.

What will you promote, and emphasize as president of ISH? What kind of changes would you like to make?

I am rather an evolution, than a revolution person. We need to continue ISH support for research on hypnosis. Discussions about hypnotherapy theory are both promising and necessary.

How can cooperation between East and West, North and South be promoted, improved?

We are waiting for new books about hypnosis in ... (here you can include one from more than 40 countries represented in the Congress). To make the content available, it should be translated to the most common language. In that way, we can build the next bridge of understanding.



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For the City of Krakow - Przemysław Czaja**



MEETING OUR MENTORS

ELVIRA V. LANG

Interview by Nicole Ruysschaert

Each issue will introduce one of our distinguished teachers in this column. We learn a lot from these scholars, read their books, follow their approaches, use their techniques – but perhaps we do not know them well enough.

NICOLE RUYSSCHAERT INTERVIEWS ELVIRA V. LANG

How did you first come in contact with hypnosis – when / where? (perhaps some opinions / movies / shows long before you started in the professional field).

I first encountered a hypnotic/imagery intervention when I was at Stanford and Chief of Interventional Radiology at the VA Hospital, Palo Alto. My patient was a young Vietnam veteran with PTSD. Every two months, he needed a procedure of relatively low intensiveness, changing a tube entering through the skin into the intestinal tract. Yet he was so scared that he needed lots of IV drugs, and because of the medications, he needed a friend to take a day off to drive him to and from the procedure. My patient then required a lengthy recovery time. Then, one day, a quick hypnotic intervention, given by an associate made all the difference—in this and subsequent visits, my patient was less anxious and required fewer and ultimately no medications.



Elvira V. Lang

Can you give a brief overview of your career, and your work and the place hypnosis have in it.

I started my career as an Interventional Radiologist. My experience with the Vietnam Veteran was pivotal. I gradually transitioned from practicing solely medicine to training frontline medical staff in using hypnotic techniques to alleviate patient pain and anxiety. Another pivot point was my experience at Harvard Macy International, where I learned about adult learning theory, crucial to my developing a training program. Harvard Macy was also pivotal in another way: its director, Liz Armstrong, encouraged me to apply to the Harvard Business School's Advanced Management Program, where I developed business insights and skills. In summary, my career evolved from practicing medicine to becoming the CEO of Comfort Talk,[®] a company training frontline medical and dental staff.

I am familiar with Radiology but not Interventional Radiology, what is it?

Radiology is focused on the taking and interpretation of images, while interventional radiology uses imaging technologies to conduct minimally invasive surgery. While minimally invasive, the surgeries I conducted could be life-saving. For example, I worked with an engineer to develop an aortic stent graft and then installed it..

What stimulated you to do research? Which (other) areas of interest do you have?

Prior to my exposure to hypnosis, I already had a predisposition towards research, having conducted several research projects in Interventional Radiology. After my experience with the Vietnam veteran, I wanted to know if hypnosis would work for other patients experiencing a wide assortment of ailments. I also wanted to know how difficult/easy hypnosis would be to implement in a medical setting and whether it could be performed by frontline medical staff. I wanted to know if hypnosis could be taught reliably to individuals who are not mental health care professionals. Initially I



was exclusively focused on medicine, but later wanted to know if hypnosis would also be used in dentistry.

I created a research program with a focus on clinical trials to find out. I am thankful to the Department of Veterans Affairs, the National Institute of Health, the Department of Defense, and others for funding my research. I was fortunate to be able to obtain such funding first through academia and then through the NIH Small Business in Innovation and Research to really test which provider behaviors and language patterns during a hypnotic process produce which outcomes, and from hence, design a teaching program that can be validated based on outcomes, and even trainer-training validation. Further large-scale clinical trials with >125,000 patients made the methods “prime time”.

How did colleagues around you react to you working with hypnosis?

Many people in the procedure/surgical community are very pragmatic. When we see something that works, we are more open to accepting it. Needless to say, I was exposed to quite a bit of ridicule for doing what I do. Nowadays, people may still be skeptical but are rather accepting. In the end, patients also want to have whatever helps them when they are scared.

What is your main area of practice with hypnosis nowadays?

My focus is on training frontline medical and dental staff. Frontline staff are important because they can have a tremendous impact, either positive or negative, on how a patient experiences and tolerates a procedure. Staff using Comfort Talk® techniques can reduce patient pain and anxiety and speed up patient throughput. The patient will require no or less medication. The doctor is satisfied that the encounter went smoothly with fewer complications. The patient goes home with less pain, and the staff goes home more satisfied, with the feeling of actually helping the patient, the reason he or she entered the field in the first place. And the organization benefits; a content staff means fewer resignations.

What is the place, the importance of hypnosis in your work?

Hypnosis is core to what we do.

Anything specific that makes you / your work different from others in the field?

Since Comfort Talk is focused on front-line staff, we primarily use hypnosis "light" rather than a formal elaborate hypnotic induction. Front-line staff only have a few minutes to interact with the patient. We emphasize rapid rapport, avoidance of negative suggestions, slight tweaks in wording, and some simple invitations to imagery. If needed, we use a tested hypnotic script that can be delivered in segments or fully, depending on the patient's needs, usually within 1.5 -5 minutes. The script also helps during training since staff can sometimes retrieve individual sentences. Our research showed that this approach right at the start of the encounter fundamentally changes how pain and anxiety are processed subsequently during the remainder of the intervention.

The reason that it is relatively easier for what we do, than a conventional hypnosis visit in the office, is that patients who are very scared (and mostly that turns out to be some kind of past trauma association in our experience) who come for a medical procedure are already in a state of hypnosis. They are already reliving the event. At the same time, they are very motivated to be helped – otherwise, they wouldn't have come. So all one needs to do is make it better and then allow the patient to leave with a feeling of success of having helped themselves. That is much easier than seeing a patient in the office, where one first has to uncover the trauma and make sure to have a solution before the patient leaves the office again.





Who are / were your mentor(s) – people, who influence your way of thinking and working?

I learned so much from so many wonderful individuals on the way, but for the sake of brevity, let me focus on just one: David Spiegel. He gave me guidance when I was floundering about figuring out how hypnosis could work better or at all, and he encouraged me those times I was ready to give up. His key lesson was “you can only help patients help themselves.” There shouldn’t be a sense of guilt when things don’t work out perfectly, but one shouldn’t take credit either because the patient did the magic.

What is your favorite professional hypnosis book?

There are many great hypnosis books that I consult. Dabney Ewin and Bruce Eimer's "Ideomotor Signals for Rapid Hypnoanalysis: a How-to Manual" made me ask every patient now "what is your problem?" Brian Broom's "Meaning-Full Disease: How Personal Experience and Meanings Cause and Maintain Physical Illness" brought me a new understanding of the symbolism of language, its impact on medicine, and the need for hypnotic language in medicine. I also like the one I wrote with Eleanor Laser, "Patient Sedation without Medication," because I learned so much from Ellie. Ellie's knowledge and use of hypnosis is amazing.

What can we learn from the past of hypnosis?

We always knew that there is a transference between the subject and the hypnotic guide—both go into a trance. This transference has been one on one. Medicine is a team effort. There is an opportunity to use modified hypnotic approaches to help medical/surgical teams improve patient outcomes through reduction of stress in the room. Transference works amongst team members. It only takes one stressed team member to increase the tension in the room. Fortunately, it only takes one team member to use hypnotic language to lower the tension in the room.

During your career what kind of changes have you observed in the application of hypnosis (in general and/or in your own practice)? What do you like or dislike in the field / world of hypnosis?

There has been a seismic shift in recognizing that communication with the patient and within a team affects patient outcomes. It was amazing to hear, last year during the Euroanesthesia Congress in Milan and just this week at the European Burns Association Congress in Nantes, that conventional healthcare professionals are stressing the importance of word choice, e.g., avoiding the word "pain," and other negative suggestions.



The focus is now on more positive associations—things we have preached in hypnosis for decades. We can be proud in the hypnosis community to have brought about these changes but have to make sure to stay on track now that the topic has entered general practice. As a warning, one of our clinical trials published as "When being nice does not suffice" had to be halted because of complications due to the staff in the control group not being trained to be positive in a hypnotic fashion.

We have a tremendous opportunity to bring more positivity to patient interactions. However, to do so, we need to overcome the belief system still remaining that only specialists in mental health are qualified and that frontline staff, even after training, can't ever be qualified. That train has left the station. On the other hand, it remains important to stress that managing psychiatric disease and trauma should be left to the specialists in the field.

As you teach in different countries, do you notice some cultural differences in the field? Different attitudes?

First, let me address a similarity: we make sure everything we teach is transcultural with regards to rapport techniques. As for differences, I find



the word associations around the symbolism of disease intriguing because they may differ with different languages.

In some countries (e.g. Netherlands. Canada) or systems (e.g. Department of Veterans Affairs) where there is a greater wish to gain the maximum of positive patient outcomes within limited financial means, there is greater openness to interventions that work based on data.

Which research do you see as the most important?

Outcomes research: research expanding the body of knowledge on how hypnosis can help patients get through their medical procedures. Clinical research should be well thought out and have a clear, repeatable experimental design. It is also important to have a randomized clinical design and, ideally work in collaboration with others to achieve the patient numbers necessary for outcomes research.

What do you personally see as your most important contributions to the field?

I helped pioneer the use of hypnotic techniques by frontline medical and dental staff, thereby reducing patient pain and anxiety and improving patient throughput.

I am particularly proud of training the Bevolkingsonderzoek in the Netherlands. Bevolkingsonderzoek is their national breast cancer screening service. After conducting an initial pilot in one of their regions, we were invited back to develop trainers for their entire system. Soon, every woman in the Netherlands getting a screening mammogram will benefit with Comfort Talk® trained person.

Which advice can you give to members who are interested in research?

Go for it! And don't give up! We had to overcome a lot of obstacles, but ultimately, we got our research done. An unexpected benefit of my research is that I made the most wonderful friends and acquaintances through it. It takes stamina, but it is definitely worth it.

How can research contribute to the spread and acknowledgment of hypnosis in the medical/psychotherapeutic practice?

Yes, but spread and acknowledgement may not be enough. Even though the hospital and clinical administrative hierarchy says everything is about benefiting the patient, we quickly realized that the hierarchy was looking for a cost-benefit. Therefore, we included cost benefits in our clinical trials.

How do you see the future of hypnosis? In the medical field? In the psychotherapeutic field?

In the medical field, I see the future in terms of greater penetration and better patient, staff, and organizational outcomes. The Bevolkingsonderzoek is a good example of what I mean by penetration, going from a pilot to every woman in the Netherlands being touched by Comfort Talk techniques. Train-the-trainer programs will enable more medical institutions to provide more patients with the benefits of Comfort Talk-like reductions in pain and anxiety during medical procedures. Comfort Talk already has a foothold in dental practices. Greater penetration there is to be expected.

My expertise is around front-line medical /dental staff; I can only share hopes around the future of psychotherapeutic hypnosis. I hope for greater penetration—those in need of psychotherapeutic hypnosis having easier access. Perhaps all can be accomplished with some variation of train-the-trainer or teach-the-teacher approaches; the idea here is a rapid, effective transfer of knowledge based on adult learning principles.

I also hope for new research that will lead to techniques improving outcomes.



What is missing?

I think some hypnosis societies are still behind in believing that only mental healthcare professionals should do hypnosis and even consider it “unethical” to teach staff to use positive suggestions and avoid negative suggestions. Getting patients through medical procedures with less pain and anxiety is a valid and important use of hypnosis.

If you had a dream ... about the future of hypnosis ... what happens in your dream?

My dream is that one day, any patient entering a medical/dental practice who can benefit from procedural hypnosis or a Comfort Talk-type intervention can have it.

Any recommendations, hints, or advice you would like to give to young(er) colleagues?

Don't hesitate! The use of hypnosis isn't a risk to your career anymore. You can thank the older generation for that. Keep learning. Do research, not just in hypnotic techniques, but in adult learning theory, because it is your duty to transfer what you've learned to others. And education is now recognized as a component for academic promotion in medicine.

Do you see some important contributions of hypnosis in dealing with the Covid 19 pandemic/war in Ukraine? Offering support / help in areas affected by disasters?

Let me share a disaster that I personally experienced as a doctor, the Loma Prieta Earthquake in the Bay Area in California. It wiped out half the hospital including the recovery rooms at the Palo Alto VA hospital. Recovery rooms are essential for recovering from anesthesia. For us to continue surgeries and other medical procedures, we had to find a way to proceed with less or no anesthesia. We used hypnosis. Hypnosis can be equally important in other disasters where the availability or use of anesthesia or drugs is limited.

COVID 19, the war in Ukraine, and other disasters are stressful for both patients and medical staffs. I've already gone into great detail how Comfort Talk type techniques can alleviate patient pain and anxiety; now let me focus on the impact disasters can have on medical staff. The stress of COVID on medical staff led to the Great Resignation, where thousands of nurses and other professionals left the profession. How can hypnotic techniques keep a stressed-out staff on the job? If a staff member has just one patient a day for whom he or she has made a real difference and that patient expresses his or her appreciation, then the staff has a strong incentive to come back the next day.

To help patients is the reason most medical personnel enter their profession in the first place. Our training enables staff to help patients and feel more satisfied for doing so. None of the individuals we trained in hospital settings over the last three years resigned from medicine.

Thank you very much for this very inspiring interview! And thank you so much for all the efforts you do for the field of research and practice!

Dr. Nicole Ruyschaert MD Psychiatrist.

On behalf of ISH and our ISH Newsletter committee



BUILDING BRIDGES OF UNDERSTANDING

CLINICAL RELEVANCE OF RESEARCH FINDINGS

In each section of the NL we introduce you to a summary of recent research with short and easy explanations of some research concepts. Scientific reports are more and more complex and complicated; only a small portion of hypnosis experts enjoy them. For the majority of professionals it can even be frightening or boring. The aim of these letters is to bring researchers and clinicians closer together, to highlight the clinical relevance of research findings of hypnosis in a very simple user-friendly way. Clinicians are also encouraged to propose questions to be studied, clinically relevant phenomena to analyze, and hypnotic processes to be understood. Let's build the bridges of understanding together...

Borbála Horuczi is a last year student at Eötvös Loránd University, Budapest, at Clinical and Health psychology MA.

Currently she is writing her thesis of the relationship among suicide, maladaptive schemes and parental style.

Her main direction for the future would be family psychotherapy and sport psychology.



SHORT REVIEW OF HYPNOSIS AS AN ALTERNATIVE TREATMENT FOR INFERTILITY

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The term infertility, which is a disease of the reproductive system, is used when couples try to conceive a baby for over a year without using any protection during intercourse. In the case of a 35 and older women, the period of trying is reduced to 6 months, to receive the infertile diagnosis (Zegers-Hochschild et al., 2009; Casareno, 2016).

A holistic approach to infertility (Katz, 2018) has become widely accepted by doctors and health care practitioners, because the importance of the mind and body connection is recognized and acknowledged (Casareno, 2016). As August (1960) states, infertility stems from functional and/or organic problems, therefore the need to thoroughly examine both of the partners: check the semen of the male, and check the glands of the female, run laboratory tests and interview them. Even after all these procedures, the doctors may not find any biological dysfunction.

In some cases, infertility along with menstrual irregularities or leucorrhoea (vaginal liquid of inflammatory or infectious origin) are only the secondary complaints, because the primary complaints are, for example, frigidity or vaginism. Therefore, after curing the primary symptoms, all the secondary complaints are also healed (Leckie, 1965).



But it is essential to note, according to Leckie (1965), that a significant amount of negative emotional states, like feeling guilt, fear, shame, anxiety or experiencing a traumatic event can modify the functioning of the female reproductive system. If the specialist in charge finds out the underlying psychological mechanisms, the conceiving will be much more likely to be successful, as the case studies will demonstrate later in this paper.

Assisted infertility treatments most commonly consist of in vitro fertilization (IVF) and intrauterine insemination (IUI) (Levitas et al., 2006 & Casareno, 2016). However, these procedures are high-priced, and only 31.5 percent of IVF cycles have a successful outcome, meaning not only the conception itself, but the live birth (Dhillon et al., 2016). In addition to physical discommodities during the infertility treatments, women face a significant amount of stress, anxiety or depression that they have to manage (Levitas et al., 2006).

Therefore, it is quite reasonable, that couples seek out more unconventional medicine, or in other words, complementary and alternative medicine (CAM¹) (Miner et al., 2018). The people who turn to CAM are characterized by having a higher income, unsuccessful conception and a positive predisposition towards CAM according to Smith, Eisenberg, Millstein, Nachtigall, Shindel, Wing and the Infertility Outcomes Program Project Group (2010). The aim of incorporating such CAM treatments is to reduce stress and anxiety level while getting a medical treatment, as well as increase the sense of control and hope. The largest body of research papers focus on Chinese herbal medicine and acupuncture (Dhillon et al., 2016). Apart from Chinese medicine, traditional cultural tools include acupuncture, massage, yoga, reiki, naturopathy and most importantly, clinical hypnosis (Smith et al. & Infertility Outcomes Program Project Group, 2010).

Clinical hypnosis is a therapeutic approach which applies hypnosis to reach a calm and clear state of awareness in order to accomplish the therapeutic goal. Deep relaxation techniques for reducing stress and negative psychological states usually are part of the process. Additionally, body image distortions, sexual abuse and rape can interfere with conception, hence they could be a focus of the therapy. Nevertheless, the clinical hypnosis practitioners' main goal is to directly solve the problem linked to the infertility, not to heal other unrelated personal issues, for example, from her past. Hence with the help of the therapist the patient is able to identify the main obstacle which is keeping her from getting pregnant, and she is able to keep focusing on resolving that obstacle (James, 2009). There are cases indeed, when the male partner has to overcome a psychological issue or trauma, which prevents him from having natural intercourse, either because he has problems with erection or ejaculation (August, 1960), but when infertility occurs in a couple's life, and the male partner is physically healthy, the focus is on the female partner (Casareno, 2016).

According to the holistic approach (Katz, 2008), if the patient has been previously educated about the stress impacts on her body, and her emotional responses, that enhances the positive outcome of the hypnosis sessions later on. The stressful events the couples have to deal with can directly influence their hormonal system, the hypothalamus and the pituitary gland, as well as the females' nerve bundles that link the inner female organs to the brain (Katz, 2008).

Hypnosis as a method incorporates focusing on the psychological difficulties that prevent pregnancy, regulating ovulatory cycles, finding the obstacles of not having successful intercourse with the partner (August, 1960), as well as managing stress and anxiety during an IVF procedure (Levitas et al., 2006 & Dhillon et al., 2016).

¹CAM is recently called as integrative medicine – language editor's note)



Levitas and his colleagues (2006) found (comparing to anaesthesia or emotional support, or neither) that hypnosis during embryo transfer (ET) to the uterus reduces stress (thereby reducing negative effects on the nervous system), which partly diminishes the uterine activity which in turn increases the chance of the successful implantation of the embryo. The therapeutic procedure during ET is made up of three phases: prehypnotic, hypnotic state, posthypnotic. The patients were asked to think of a truly pleasant memory during the prehypnosis. Afterwards, the therapist induced the hypnotic state by applying suggestions, eye fixation and relaxation. When the ET procedure was completed, but before the dehypnotization, the therapist suggested that the patient stay calm and relaxed and be optimistic about the future.

In another example, a woman decided to use hypnosis therapy after an unsuccessful IVF cycle. Her intention was to improve the chances of the implantations. Following four hypnosis treatments which included mostly deep relaxation, the patient became able to cope with the anxiety and stress. The sessions resulted in successful conception (Gallagher & CHt, 2005).

Additionally, Leckie (1965) reported in his case studies, that seven out of eight patients were treated for infertility, which was a primary complaint. His eight cases were an average of 24-years-old, had been trying to have a baby for at least 15 months and achieved pregnancy an average of 5 months after the last session. It is important to mention the therapist paid attention to building up the women's self-confidence and eliminating the feelings of guilt and shame.

To sum up, infertility can be a negative result of multiple physical conditions like STDs, endometriosis, hormonal imbalance, weight, as well as of psychological factors like depression or anxiety, or the result of age (Casareno, 2006).

In conclusion, from the research papers, hypnosis is used in various medical fields, from obstetrics through oncology to pain management. The hypnosis therapists' main goal is to improve or even reach the desired medical outcome, reducing fear and anxiety, and enhancing the sensation of comfort. Hypnosis is a safe, fairly successful and effective, medication free alternative treatment to help women and men to start a family (Gallagher & CHt, 2006).

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BOOK REVIEW

JONATHAN FAST – MESMER: THE EXTRAORDINARY ADVENTURES OF THE INVENTOR OF HYPNOSIS IN 18TH CENTURY VIENNA & PARIS, INCLUDING A ROMANTIC & THRILLING EPISODE IN BOHEMIA

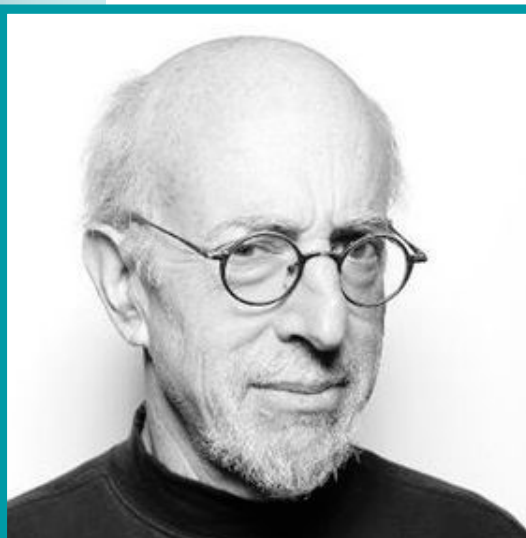
THE STORY

The story is set in the last quarter of the 18th Century. In the colonies, citizens are fighting for freedom from the British. In France, a revolution is brewing. In Vienna, Herr Doktor Franz Anton Mesmer has a discovery he calls Animal Magnetism that he thinks will cure every ache and illness and win him a place in the annals of medicine. When he meets Antoine Dorn, a clever, ambitious, devious 15-year-old stable boy, he recognizes a ready accomplice in his plans to achieve greatness, and hires him as his valet. Together they embark on a series of extraordinary adventures leading them from Vienna to Bohemia, to the highest rungs of Paris society. Animal Magnetism sweeps the continent, but their struggles with their own personal demons remain their greatest challenge.

“Mesmer” is a work of historical fiction. All novels blend fact and fiction, but in the case of the historical novel, the facts are already laid out. The scholars say the protagonist travelled from point A to point B. The novelist thinks, how did she get there? How can I best depict her passage? Can I turn it into a scene, or a sequence of scenes, that will entertain the reader? Make it suspenseful, funny, sad, romantic? If not, can I skip over it without damaging the rest of the story? Or reduce it to a few brief sentences? That said, Mesmer (the novel) recounts the important events of the good doctor’s life, and the reader gets at the very least, a glimpse of the star-studded cast (including Mozart, Ben Franklin, Marie Antoinette) and many less-known but important characters. The book includes a number of reproductions of period etchings, to enhance the feelings of being drawn back into the 18th century.

ABOUT THE AUTHOR

Jonathan Fast's novels have been critically praised by the New York Times Sunday Review, the Los Angeles Times, and Publisher's Weekly. He has been interviewed by Terry Gross on Fresh Air, and People Magazine. His



Jonathan Fast, PhD

work is distinguished by its wit, romance, adventure, and spirituality. His historical novels help us understand the past, the ages of emperors and kings, of pageantry and bloody battles, remarkable leaps of science, and the subjugation of newly discovered worlds.

Fast was born on the upper west side of Manhattan. He attended the High School of Music and Art, and Princeton University. For a decade he wrote novels, and screenplays, and was a contract writer at Disney Feature Animation.

In midlife, he earned a Doctorate in Psychology, and worked for several years as Director of an Adolescent Day Hospital in New Haven, Connecticut. After that he taught at Yeshiva University in New York City. During this period, he contributed to anthologies and academic journals, and wrote two non-fiction books about shame, violence and school shootings. He was a frequent guest on the BBC World Service follow-



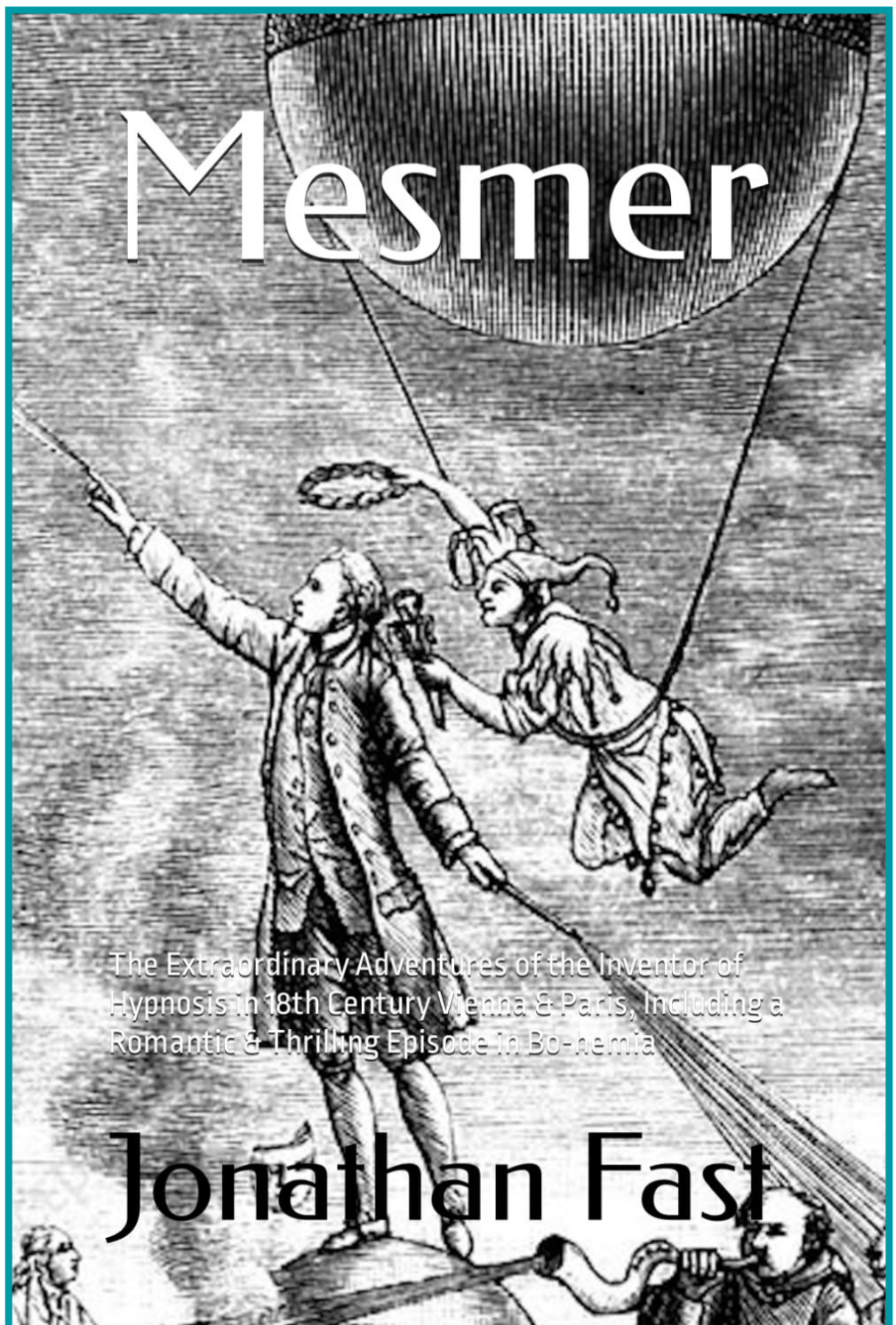
ing these tragic acts of violence, helping listeners understand and grieve for the victims.

WHERE COULD I FIND A COPY OF “MESMER”?

At this time the book is available exclusively from Amazon, in a paperback or digital version. A sample can be found [here](#).

For more about the author, visit MesmerProject.com

A series of DVDs of Dr Fast lecturing over the course of two days, appropriately titled 2-Day Intensive Hypnosis Workshop, is available from PESI. Click [here](#) to purchase





CURRENT ARTICLES

OF MULTIPLE FIELDS OF HYPNOSIS

THE COLORFUL PALETTE OF HYPNOSIS A BRIEF REVIEW FROM THE COLOR OF WORDS TO TRICK OUR BRAIN

A REVIEW BY ZSUZSANNA BESNYŐ

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With this palette of articles, we travel through numerous sectors of hypnosis usage. I chose these articles because of their relevance and actually and I would like to underline and salute the nurturing effect of hypnosis. In this newsletter let me guide you into the neurochemistry, cognitive and immunological side of hypnosis, bodily awareness. These articles represent the importance of hypnotic techniques and the constantly broadening field of opportunities to help people with those techniques. This selection follows the tradition of the International Journal of Clinical and Experimental Hypnosis to examine and introduce new techniques or applications in associated science fields. The perspective of nervous and immune systems' deep, complex, and multifactorial connections also permeate this selection. The methodological article reminds us of the challenge of long term and big sample size hypnotic research and the replication crisis. The possibilities from this type of research could make the basis to treat or manage chronic illnesses like multiple sclerosis more effectively. The main theme in this newsletter - the colorful palette of hypnosis- is infused in this summary at many levels.

1.) ZAHEDI, A., STUERMER, B., HATAMI, J., ROSTAMI, R., SOMMER, W., (2017). ELIMINATING STROOP EFFECTS WITH POST-HYPNOTIC INSTRUCTIONS: BRAIN MECHANISMS INFERRED FROM EEG. *NEUROPSYCHOLOGIA*, 96, 70-77. PMID: 28077327 DOI: 10.1016/J.NEUROPSYCHOLOGIA.2017.01.006

This experiment involved 12 highly hypnotizable persons (Harvard Group Scale of Hypnotic Susceptibility -Shor, R.E., Orne, E.C., 1962.) in the Stroop Test during three conditions: without hypnosis (6-minute eye closed-resting session), hypnosis, and post hypnotic suggestion (hypnosis plus) (hands clapping activation). This was combined with EEG measurement: frontal theta and frontal beta to investigate the executive function. The article examined the shared roots of mental imagery and hypnosis (based on correlation).

The experiment used congruent, incongruent, and neutral types of words in the Stroop Test. According to the experiment the post-hypnotic suggestions (PHS in the following) are the most useful way to reduce reaction time in Stroop Test. The PHS raises both of the frontal EEG channel.

In the PHS condition the suggestion was that the words seem to be from a foreign language and meaningless for the participant.

According to the results PHS successfully evaporated Stroop effect (interference and facilitation too) which is in contrast with the previous research's results (Raz et al., 2005, 2006, 2007 and Lifshitz et al., review in 2013).

The specialty of this research is the 12 Iranian participants who use Arabic language. The broad cultural perspective is one of the biggest strengths of the article.



In the PHS condition with incongruent words the reaction time declined significantly and with the neutral word there was no significant difference. The EEG data also confirmed this result.

In the hypnotic condition there was no significant change in the Stroop Effect.

The EEG channels data also confirmed the control functions presence during the PHS session, the inhibition process was active there too. Also, the ACC (Anterior Cingular Cortex) activation is higher which is the error detection area. These activations were realized in the early post-hypnotic stage, when the word meaning focus declined, and the word naming focus grew. In the later stage this error detection declined, and made the space for the smooth information processing. It's a kind of adaptive "power-saving mode." These findings hopefully inspire future research too.

2.) PALFI, B., MOGA, G., LUSH, P., SCOTT, R. B., & DIENES, Z. (2019). CAN HYPNOTIC SUGGESTIBILITY BE MEASURED ONLINE? *PSYCHOLOGICAL RESEARCH*, 84 (5), 1460–1471. DOI:10.1007/s00426-019-01162-w

In hypnosis research the scientists get into the frontline of many methodological problems. This article helps the researcher to standardize and automatize the research process through exposing the main turning points, and also opportunities to expand the hypnosis experimentation universe with larger, complex, extensive, and diverse samples. Hypnosis is a special face to face, rapport, and human presence-type art and technique. How can we "automatize" and standardize the deepest connection of therapy and research it in the lab? The main point is to examine more large "samples". How can we reach more people effectively? How can we optimally organize group hypnosis sessions and pre-scanning of hypnotizability.

The study used SWASH the Sussex Waterloo Scale of Hypnotizability (SWASH; Lush et al., 2018) to measure hypnotizability with 71 participants, avoiding the triggering items like age regression. The first round was measured offline in a group session and after that in two groups measured online (45) in the lab or offline (26) at home. Between the two sessions, a maximum of 6 months passed.

The composition of the sample needs more diversity. According to a meta-analysis (Montgomery et al., 2000), only one article was found with a broad and diverse sample. The rest of the 27 articles used university students because of sampling convenience.

The on-line screening helped to standardize the induction process, avoid the bias of the presence of the experimenter, and make the whole recruitment process easier and less time-consuming. According to this research the delay between the hypnotizability measurements has to be more than 5 months to avoid boredom and hypnotizability point declination.

In the offline group the researchers registered more depth of hypnosis. The online group generated less commitment and less hypnotizability points.

The authors emphasize that it's important to examine the gender differences in relationship to the online screening, because only 7 men took the part in online sample. The hypnotic research community needs to consider the possibility that gender differences could play an important moderating role in hypnotic suggestibility.

This article, published in 2019, is timely, given the current use of AI and VR technologies. What do online measures of hypnotizability offer for the future of hypnosis research?



3.) ACUNZO, D. J., OAKLEY, D. A., & TERHUNE, D. (2021). THE NEUROCHEMISTRY OF HYPNOTIC SUGGESTION. *AMERICAN JOURNAL OF CLINICAL HYPNOSIS*, 63(4), 355-371. PMID: 33999774 DOI: 10.1080/00029157.2020.1865869

What are the main biochemical elements of the hypnotic suggestion process in the brain? How can we detect them? This article revealed these factors.

The motivational bases of this paper was the urgent scientific need for an integrative approach to the main neurochemical background of suggestion mechanisms. The article has written about the five main chemicals which are hypothesized to be in relation to the hypnotic process: dopamine, glutamate, GABA, oxytocin, serotonin.

Let me provide a summary of the most interesting results of this article in relation to suggestions and hypnosis without any need for completeness.

In the human body dopamine plays a main role between the neurotransmitters, and is also the most researched chemical with regard to hypnosis. As Acunso and colleagues (2021) summarized, dopamine and suggestion have a close relationship. Landry's neuroimaging research emphasized (Landry et al., 2017) the main role of dopamine in the ACC (Anterior Cingular Cortex in the mesocortical dopamine system) activation during hypnosis.

Santarcangelo & Scattina (2019) underlined the role in suggestibility of nitric oxide in increasing dopamine release. Spiegel & King (1992) unfolded the positive correlation between the level of the dopamine's metabolite (homovanillic acid) and suggestibility. This effect needs more exploration and replication in the future to deepen understanding of this process. The interesting result underlined the possibility to change low hypnotizability. Lotan et al. (2015) reported that metylphenidate increased low suggestibility in ADHD patient. Future research on the basis of Lotan's results should focus on the modification of low hypnotizability in neurotypical adults too.

The article gave prominence to the effect of Val¹⁵⁸Met (rs4680) gene to coding for Catechol-O-methyl transferase (COMT) enzyme. COMT breaks down dopamine into its main parts. Raz, Fossella, McGuiness, Zephrani, and Posner (2004), Székely et al. (2010), and Katonai et al. (2017) reported that the subjects who carry val/met variation are the most highly suggestible people in the sample.

Glutamate role is important especially in the relationship of NMDA (N-methyl-D-aspartate) receptors. These receptors take part in the perception aspect of hypnosis. Most of the study's results are from glutamate antagonists (N₂O; ketamine) and MR (magnetic resonance) trials about dissociation state and suggestibility in ACC glutamate relationships. In summary the lower the glutamate level, the more likely participants are to respond to hypnotic suggestions. In contrast according to MR results (DeSouza et al., 2020) the higher glutamate adsorption yields higher suggestibility.

There are a lot of studies about GABA Gamma-amynobutyric acid's role in suggestibility. These results (Eysenck & Rees, 1945 and e.g., Rosebush & Mazurek, 2011) indicated that higher GABA level means higher suggestibility. The fMRI scanning of ACC (DeSouza et al., 2020) also confirmed a moderate positive correlation between GABA level and suggestibility. The GABA agonist research also confirmed this. The anatomic background of these complex mechanisms is not yet clear.

Oxytocin is the main chemical in the primary bond between the participants and the hypnotist, the chemical basis of the rapport and general bonding process. There are different, conflicting, and mixed results about oxytocin and different methods of measurement of the effect (e.g. nasal dosage, saliva sample).



Bryant, Hung, Guastella, and Mitchell (2012) revealed that in cognitive suggestions the oxytocin's effect appeared in the low suggestible male sample and increased the suggestibility. Bryant & Hung, (2013) found higher hypnotic response in high suggestible male participants. Parris, Dienes, Bate, and Gothard (2014) came to a different conclusion. They found decreasing suggestibility.

Liu, Huang, Chen, and Yu (2020) made an experiment with 146 participants about perceptual placebo effect. There was no significant difference in the suggestion plus oxytocin and the suggestion without oxytocin group.

In the Varga and Kekecs (2014) study, before hypnotizability measurement, they took a sample of oxytocin and again, after the session, from both the hypnotist and the subject. This team found no significant correlation with hypnotizability.

Kasos et al. (2018) examined low and high suggestible participants and they detected different results. Low hypnotizability went together with high oxytocin increase (before hypnosis baseline and after hypnosis) and vice versa. In general, there's a caution to take into consideration the sampling method. Saliva sampling has some limitations but is both easy to apply and also more widely accessible. As Horvat-Gordon, Granger, Schwartz, Nelson, & Kivlighan (2005), Javor et al. (2014), and McCullough, Churchland, & Mendez (2013) mentioned there could be a better way for measuring oxytocin level than immune assay method. This article didn't mention the other options, but possibly anticipated the venal blood sampling which is harder to employ because of the need for laboratory infrastructure and staff, and the higher costs.

Bryant et al. (2013) examined the rs53576 and rs2254298 polymorphism of the so-called "*oxytocin receptor gene*" (Bryant et al., 2013, p. 361). The first one correlates with a higher suggestibility and the second one had significant effect on the engagement of the hypnotic situation, induction, and suggestions.

Serotonin-related receptor 5-HT_{2A} has a main role in the hypnotic suggestion process through creating subjective reality, the harmony of inner and external words. According to Naughton et al. (2000) it mediates the inhibitory function of serotonin on the dopamine system. The article summarized the results in psychedelics - the serotonin antagonists - dosage. In general, these materials increase hypnotic suggestibility. For the future research Ancuzo et al. (2023) emphasized that it would be fruitful to examine the variety of serotonin transporter polymorphisms.

4.) KARRASCH, S., MATITS, L., BONGARTZ, W., MAVIOĞLU, R. N., GUMPP, A. M., MACK, M., TUMANI, V., BEHNKE, A., STEINACKER, J. M., & KOLASSA, I. T., (2023). AN EXPLORATORY STUDY OF HYPNOSIS-INDUCED BLOOD COUNT CHANGES IN CHRONICALLY STRESSED INDIVIDUALS. *BIOLOGICAL PSYCHOLOGY*, 178 [HTTPS://DOI.ORG/10.1016/J.BIOPSYCHO.2023.108527](https://doi.org/10.1016/j.biopsycho.2023.108527)

The article examines the relaxation hypnosis effects on chronic stress reaction in 44 mild or highly hypnotizable individuals (measured with Harvard Group Scale), who suffered from chronic stress. Half of them got 20 minutes of hypnotic suggestions, and the control group saw a 20-minute documentary film. The blood samples were examined before and after hypnosis. The erythrocytes number and related parameters, thrombocytes number also significantly declined as a result of the suggestions. The explanation is not clear, but there's a possibility, that these changes are the results of the increase in plasma volume and vasodilation caused by the suggestions. These effects occurred after one hypnosis session. The stress has drastic effects on the blood particles through epinephrine, e.g. increasing the leukocytes number in the peripheral blood flow (Bischoff, 2016 in Karrash Matits, 2023) and in long term decreased leukocytes number. (Al-Hatamleh et al., 2019; Maydych et al., 2017 in Karash, 2023)



Mental stress also rises the number of thrombocytes (Kop, 1999., von Kanel, 2003) and exerts the effect in 10 minutes (Jern, 1989 in Karrash, 2023).

After hypnosis the level of erythrocytes and thrombocytes decreased; plasma volume and a portion of immature thrombocytes increased. The background mechanism is not clear yet, but is possibly related to thrombopoietin according to Saxonhouse & Sola-Visner (2012) and the dominant parasympathetic effect (Bernardi et al., 2017) which caused vasodilation.

This study didn't find any changes in the number of the leukocytes during the 20-minute-long hypnotic session. The explanation could be the duration of the intervention. Bogarts (1993) found decreased leukocyte number after a 30-minute hypnosis session. More research is needed to understand this discrepancy.

5.) Apelian, C., De Vignemont, F., Terhune, D. B. (2023). Comparative effects of hypnotic suggestion and imagery instruction on bodily awareness. *Consciousness and Cognition*, 108 PMID: 36706563 DOI: 10.1016/j.concog.2023.103473

How do we perceive our body? How can we “trick” our brain? Which method is more effective to cause hand lengthening illusion: imagery or hypnosis?

This article combined the perceptual *lengthened finger illusion* task for body image and the *line reaching* task for body schema techniques with hypnosis and imagination. Eighty-two (82) people participated. In the first part of the experiment the French version of SWASH (Sussex-Waterloo Group Scale of Hypnotizability) was used to measure hypnotizability. Imagery capability or competency level wasn't registered. After a one day minimum, came the second part with the baseline finger lengthening task (body image) and the line reaching task (body schema). In this section the hand and the wrist were hidden. After that came the two conditions (imaginary or hypnosis) version of these tasks.

In the hypnotic condition the participants got suggestions about the finger lengthening “*the finger is growing like a branch and extends until it is 10 cm longer*” (Apelian et al., 2023, p. 5) The imagery task was the same sentence with the instruction to imagine.

This study also used Likert scale about imagery (deliberate or spontaneous which is associated with fluency and the origin of imagery according to Apelian et al., 2023) and also response expectancies.

According to the results, the finger elongating effect was significant in both conditions, but in hypnosis the outcome was larger. As explained by Apelian (2023) the two conditions results were strongly correlated because of the similarity in the background process. These effects are not associated with deliberate imagery in both condition but spontaneous imagery and hypnotic suggestibility strengthened it. The response expectancy had an opposite upshot.

In both conditions response expectancy was the same. This is a main point because according to Apelian (2023) it measured before the manipulations and not after that. So, the expectancy points didn't reflect the type of the condition and didn't give an opportunity to the real comparison (before versus after experiment) and didn't tell anything about the dynamic of the expectancy process during the sessions which is important in suggestibility (also miss the chance to observe and detect the interaction and synchrony of the hypnotherapist and the suspect). In addition to using the hypnotizability scale before the two conditions could make a mental connection in the participants between imagination and hypnotizability and make priming effect. There's a possibility that the strong correlation of the results of the two conditions is because of this priming.



Surprisingly, this study showed factors that do not have influence on this process: the type and style of introduction of manipulation for the participants, the presence of an induction phase, and the use of instructions or suggestions. Interestingly the absence of induction has no effect, maybe future research could explain this phenomenon.

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The most recent issue of the IJCEH features five articles reporting on a factor analysis of hypnotizability scores in a clinical population, human's natural capacity to alter our experiences, positive perceptions of hypnosis in healthcare, and its potential benefits for fibromyalgia and improving sleep disturbances in individuals with mild cognitive impairment. This is the first issue of 2024 and we look forward to publishing many more outstanding articles in the new year!

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We are excited to announce that starting January 2025, the *International Journal of Clinical and Experimental Psychology* will be transitioning to online-only publishing. This means that volume 72, Issue 4 will be our last print issue. In our commitment to innovation and accessibility, this transition aims to provide benefits to authors and readers alike by eliminating delays associated with print distribution. This transition will expedite the timeline from submission to publication and will allow us to provide faster access to the latest academic articles published at the IJCEH on a rolling basis, attract more high-quality articles and research, and increase the number of articles available per issue.



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ABSTRACTS FROM THE
 JANUARY 2024 ISSUE – VOLUME 72 (1)

DOES A GENERAL “G FACTOR” BEST ACCOUNT FOR HYPNOTIZABILITY? (EDITORIAL)

Gary Elkins

The lead article in this issue of the IJCEH, entitled, *Confirmatory Factor Analysis of the Elkins Hypnotizability Scale in a Clinical Population* (Zimmerman et al., 2024), reports on a factor analysis of hypnotizability scores in a clinical population of post-menopausal women. The results found evidence for a general hypnotizability latent variable. This finding suggests a general “G factor” may best account for hypnotizability. More research is needed, however, if confirmed in future research would lead to a new understanding of hypnotizability as having a single-factor structure. Somewhat related to this an article by Dell (2024) proposes greater recognition of the natural capacity of humans to intentionally alter their own experiences. A study by Szmaglinska et al. (2024) reports that perceptions of clinical hypnosis are positive among the public and healthcare providers, but more education of healthcare providers about hypnotherapy is needed. This is followed by articles that examine the feasibility and potential benefit of clinical hypnosis in treatment of pain and distress among patients with fibromyalgia syndrome (Ozgunay et al., 2024) and in improving sleep disturbances in individuals with mild cognitive impairment (Elkins et al., 2024).

CONFIRMATORY FACTOR ANALYSIS OF THE ELKINS HYPNOTIZABILITY SCALE IN A CLINICAL POPULATION

Kimberly Zimmerman, Morgan Snyder, and Gary Elkins

The objective of this study was to determine the best-fit factor structure of a standardized hypnotizability measure in a clinical population. The Elkins Hypnotizability Scale (EHS) was administered to 173 post-menopausal women; age from 39 to 75 years, with a mean age of 54.61 years. Confirmatory factor analysis was conducted, and comparative fit index (CFI) and root mean square error of approximation (RMSEA) were used to determine goodness of fit. Results indicated that the single-factor structure modeled with six indicators based on the individual items on the EHS provides the best description of fit. Results of the present study demonstrate that the EHS has a single-factor structure. Further research is required with other populations and measures.

HYPNOSIS INTERVENTION FOR SLEEP DISTURBANCES IN INDIVIDUALS WITH MILD COGNITIVE IMPAIRMENT: A RANDOMIZED PILOT STUDY

Gary Elkins, Victor J. Padilla, Keith Sanford, Jared Benge, Alan Stevens, Michael Scullin, Chris E. Corlett, and Vindhya Ekanayake

Poor sleep quality is highly prevalent among individuals with mild cognitive impairment (MCI). Further, poor sleep quality is associated with reduced quality of life, increased stress response, memory impairments, and progression to dementia among individuals with MCI. Pharmacological treatments for sleep have mixed efficacy and can lead to dependency. Therefore, alternatives to pharmacological treatments for improving sleep among individuals with MCI are needed. The present study reports on the feasibility of a non-pharmacological self-administered hypnosis intervention focused on sleep quality in adults with MCI. It was hypothesized that



the hypnosis intervention program would be feasible and have acceptable levels of adherence to daily hypnosis practice. A two-armed randomized controlled pilot trial was conducted using a sample of 21 adults with MCI. Eligible participants were randomly assigned to listen to either hypnosis audio recordings or sham hypnosis recordings for five weeks. Program feasibility, program adherence, pain intensity, stress, and sleep quality were measured using a daily home practice log, questionnaires, and wrist actigraphy. The results found mid or higher levels of treatment satisfaction, ease of use, and perceived effectiveness at one-week follow-up, with participants in the hypnosis arm reporting greater perceived benefit. Adherence to assigned audio recordings and meetings were likewise within acceptable margins in both groups. No intervention related adverse events were reported in either treatment condition. Significant improvements in sleep quality, sleep duration, and daytime sleepiness were found for the hypnosis intervention. The results of this study can be used to inform future research on the effects of hypnosis on sleep quality in adults with MCI.

REPORTING AND MAPPING RESEARCH EVIDENCE ON PERCEPTIONS OF CLINICAL HYPNOSIS AMONG THE GENERAL POPULATION AND PATIENTS RECEIVING HEALTH CARE INCLUDING CANCER CARE: A SCOPING REVIEW.

Malwina Szmaglinska, Deborah Kirk, and Lesley Andrew

Despite empirical evidence supporting clinical hypnosis for numerous conditions, its utilization in healthcare is limited due to skepticism and misconceptions. This review identifies and maps research on clinical hypnosis perceptions among the general population, healthcare patients, and more specifically patients with cancer. A systematic search was conducted in EBSCOhost, ProQuest, PubMed, and PMC, following JBI PRISMA ScR guidelines, resulting in 18 peer-reviewed, English language articles (2000-2023). Most studies employed quantitative methods, complemented by some qualitative and one mixed-methods approach. The results found attitudes towards hypnotherapy, especially when administered by licensed professionals, are consistently positive; however, its awareness remains low within the healthcare sector, particularly in cancer care. Although hypnotherapy was found as useful, misinformation, lack of understanding, and lack of awareness persist. Few studies address the reasons behind people's opinions or focus on integrating hypnotherapy into healthcare. Research investigating hypnosis attitudes in cancer care is scant, necessitating further exploration.

EFFECT OF HYPNOSIS ON PAIN, ANXIETY, AND QUALITY OF LIFE IN FEMALE PATIENTS WITH FIBROMYALGIA: PROSPECTIVE, RANDOMIZED, CONTROLLED STUDY

Seyda Efsun Ozgunay, Meliha Kasapoglu Aksoy, Kubra Nur Deniz, Sinay Onen, Tugba Onur, Nermin Kilicarslan, Sermin Eminoglu, and Derya Karasu

This prospective, randomized, controlled study aimed to investigate the effects of standardized adjuvant hypnosis on pain, depression, anxiety, aerobic exercise practices, quality of life, and disease impact score in female patients with fibromyalgia syndrome (FMS). This study included 47 female patients with FMS who had been under treatment for at least six months. The hypnosis group (n=24) received a total of three hypnosis sessions and was taught to patients' self-hypnosis. The patients in this group practiced self-hypnosis for six months. During this period, all patients also continued their medical treatment. The Visual Analogue Scale (VAS) was used to determine the intensity of pain. At the end of the six-month follow-up period, it was determined that the patients of FMS with hypnosis therapy had lower pain intensity, FMS symptoms, depression, and anxiety symptoms, and better well-being than those in the control group ($p < 0.05$). Standardized hypnosis is an effective method in reducing pain, depression, and anxiety symptoms and improving quality of life in patients with FMS.



WHAT IS THE SOURCE OF HYPNOTIC RESPONSES?

Paul Dell

The author proposes that hypnosis is a culture-bound concept that has misattributed—to suggestion and hypnosis—the functioning of a natural, freestanding, human ability to alter personal experience. The 18th-century attribution of these phenomena (to the suggestions of a magnetizer) continues today because science and Western culture still do not explicitly acknowledge that humans possess a natural capacity to intentionally alter their own experiences. Like every other human ability (e.g., athletic, artistic, musical, mathematical, etc.), utilization of the natural human ability to intentionally alter one's personal experience does not require suggestion, trance, or hypnotic induction. This ability has been studied for over 200 years under the conceptual aegis of suggestibility and hypnosis. As a consequence, the phenomena of this freestanding ability have been veiled and conflated with hypnosis, suggestion, suggestibility, and hypnotizability. One serious consequence of this conflation is an underdeveloped, nomological network of hypnosis-centric concepts that has impeded the integration of hypnosis with the rest of science.



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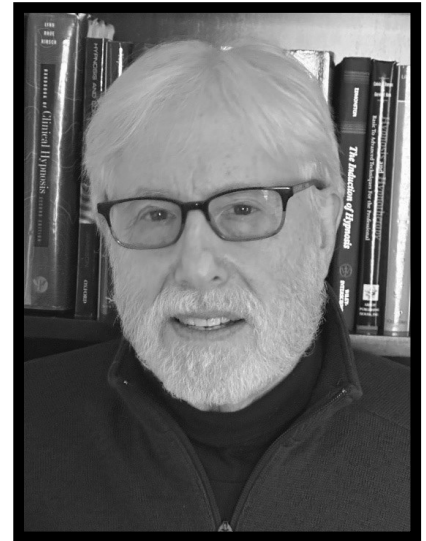


STEVEN JAY LYNN

1946-2024

Steven Jay Lynn died at home on March 29, 2024 at age 78 after a 3-month battle with cancer.

He is predeceased by his parents, Herman and Barbara. He is survived by his beloved wife, Fern Pritikin Lynn, his sister Leslie (Richard) Ehrlich, sister-in-law Phyllis (Larry) Galinkin, cherished daughters, Jessica (Sere Chao) Lynn, stepdaughter Nicole Pritikin, grandsons Julian Lynn Chao, Tyler Thibodeau, and granddaughter Angelaure Pierre. He is also survived by his former wife Jennifer Hudson Lynn. He was the favorite uncle of his nieces and nephews and grandnieces and grandnephews. Steve was a special cousin to Michael Kline and Ilene Berns-Zare and Ed Zare.



Steve was born and raised in Chicago, Illinois in a home characterized by unconditional love, a trait that he continued with his family, extended family, friends, colleagues and students. Generosity was a part of his being. He gave of his time to help anyone who needed him. His life is marked by his insatiable curiosity and love of learning.

Steve was an internationally recognized expert and prolific author in multiple areas of clinical psychology. His work focused on hypnosis, dissociation, fantasy, false memories, sexual trauma and victimization. In recent years, he published extensively on debunking pseudoscience, myths of psychology, critical thinking and evidence-based treatments. Steve was proudest of his introductory textbook, "Psychology: from Inquiry to Understanding," now in its 5th edition.

Steve received his B.A. from the University of Michigan and his Ph.D. in clinical psychology from the Indiana University. Steve began his academic career at Ohio University, rising to the rank of full professor.

In 1996, Steve joined the faculty of Binghamton University where he was promoted to SUNY Distinguished Professor and served as Director of the Doctoral Program in Clinical Psychology and Director of the Psychology Department's Psychological Clinic. He received the SUNY Chancellor's Award for Excellence in Scholarship and Creative Activities.

Steve's lengthy list of awards included a Lifetime Achievement Award from Indiana University, and the best book published on clinical hypnosis. He was ranked 49th on a list of "Top Producers of Scholarly Publications in Clinical Psychology Ph.D. Programs" and was recognized as one of the world's leading experts in the field of hypnosis.

He was proud to have been the founding editor of a major professional journal, *Psychology of Consciousness*.

With his colleagues, in the early 80's Steve conducted the first systematic studies of what was then termed "fantasy-prone personality," comprising people who were highly suggestible and hypnotizable. Steve's work illuminated various concepts related to fantasy-proneness, such as hypnosis, dissociation, trauma, and false memory. His findings led to a new under-



standing of these experiences and to strategies to alleviate suffering among those struggling with disorders such as phobias, dissociation and trauma. He championed a view of hypnotic behavior as amenable to understanding by scientific examination, distinct from older notions of hypnosis as a mysterious trance.

Steve's expertise in forensic psychology led to a steady stream of requests for him to provide expert opinion in multiple criminal cases where hypnosis had been used to enhance or recover a memory. Steve's work revealed that hypnosis increases the inaccuracies of memory and problematically increases one's confidence in their recall. Steve's testimony became foundational for the Supreme Court of Canada's decision to ban all hypnotically elicited testimony, and now most states do not permit the testimony of witnesses who were hypnotized.

In addition to the heights of his scholarship, Steve was a kind, compassionate and generous person who was proud to have mentored scores of doctoral students as well as young professionals in the early stages of their careers. Of more than 400 articles and 20+ books, many were the result of collaborations with students and colleagues world-wide.

Steve had a wonderful sense of humor and reservoir of incredible stories that evoked tears of laughter from friends and family. In addition to his academic pursuits, Steve maintained a private psychotherapy practice. He enjoyed golf, treasured the lifelong bonds of friendship of his men's group, "The Mighty Men," and played harmonica to occasionally startle his students and friends. His love for his family was boundless.

A memorial service will be held at Temple Concord, 9 Riverside Dr, Binghamton, NY on Thursday, April 4, 2024 at 2 p.m.

Donations in memory of Steven Jay Lynn may be made to Memorial Sloan Kettering Cancer Center, PO Box 27106, NY, NY 10087-7106 or to the Binghamton University Foundation, Clinical Science Fund, Account #10367; Donations are accepted online at giving.binghamton.edu



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