Submitter: Abraham Hernández Covarrubias

Number and title: 7106 - Eleven Principles of Successful Therapy by Milton H Erickson

Erickson was known by the efficiency of their treatments and it quickly to treat patients difficult, that was his specialty, and to do it used different technical and strategies with a unique style. However he did not create a systematization of his strategies.

One of the main objectives of this investigation was to know the main contributions of Milton Erickson from the point of view of those who are specialists in his work.

This research is based primarily on an extensive bibliography review both in English as Spanish including texts that are not translated into the Spanish, however to determine his main contributions were asked directly his major students and followers, this was carried out through a questionnaire that was applied directly to the direct disciples of Erickson as well as to directors, co-directors of institutes Erickson and some specialists in the world of hypnosis.

This article shows the main contributions of Erickson to psychotherapy agree with the views, from some of the main supporters, hypnosis specialist and Ericksonian colleagues, around the world, as Ernest Rossi (USA), Michael D. Yapko (USA) , Ronald A. Havens (USA), Teresa Garcia Sanchez (Spain), George Burns (Australia), José Augusto Mendonça (Brazil), João Facchinetti (Brazil), Irvin Cohen (USA), Jeffrey Zeig (USA), Claude Virot (France), Joëlle Mignot (France), Dan Short (USA), Eric Greenleaf (USA), John Lentz (USA), Hillel Zeitlin (USA), Robert Weisz (USA), Rubin Battino (USA), Edgar Etkin (Argentina), Mario Andrés Pacheco (Chile), Thierry Servillat (France), Eneko Sansinenea (Spain), Tamer Dovucu (Turkey), Rob McNeilly (Australia), Bayard V. Galvão (Brazil), Ortwin Meiss (Germany), Burkhard Peter (Germany), Teresa Robles (México), Ricardo Figueroa Quiroga (México), Jaime Montalvo (México), Göran Carlsson (Sweden), Bill O´Hanlon (USA), Roxanna Erickson Klein (USA), Alexander Simpkins (USA), Annellen Simpkins (USA), Michelle Ritterman (USA), Stephen Gilligan (USA), Mark Jensen (USA), Consuelo Casula (Italy), Daniel Araoz (USA), John H. Edgette (USA), Ricardo Feix (Brazil), Carol Sommer (USA), Marlene L. Levy (USA), Norma P. Barretta (USA), Bernhard Trenkle (Germany), Heinrich Breuer (Germany), Luc Isebaert (Belgium), Ben Furman (Finland), Eduardo Reis Penido (Brazil), Sandra Ostropolsky (Argentina) y Joyce Mills (USA),

Camilo Loriedo (Italia). All of them great personalities in the world of Ericksonian hypnosis and psychotherapy, many authors and creators of new approaches.

Submitter: Eva Pollani, MSc

Number and title: 7123 - Introduction in Eye Movement Integration

Eye Movement Integration is a helpful technique for traumatized patients. The easy to learn protocol helps to integrate memories of traumatic events. Combined with Hypnosis and Body Therapy, Eye Movement Integration is a helpful tool to be integrated in psychotherapy

Submitter: Christoph Sollmann

Number and title: 7479 - Trauma Treatment in short term therapy The combination of covert anchoring with bilateral stimulation (BLS) in the treatment of traumatic experiences

In the workshop participants will gain insight by life-demonstration how covert anchoring works and how this hypnotherapeutic method can be combined with bilateral stimulation (BLS) in a single session. Further background information and practical advice will be given to use this approach properly.

The specific steps of this combination of techniques are:

(1) Trance induction

(2) Activation of resources

(3) Resources anchoring

(4) Confrontation in sensu with the traumatic memory contents

(5) Releasing anchors during confrontation

(6) Re-evaluation of the past traumatic situation by input of a new core sentence

(7) Future pacing and post-hypnotic suggestion

The effect of this kind of intervention causes changes in trauma-related body reactions, like fear reactions, physical and emotional effects. The action described can lead to a (quiet) abreaction enabling clients to reassess traumatic events and the kind of experiences unprocessed prior to this type of therapeutic intervention.

Submitter: Silvia Zanotta

Number and title: 7497 - Scham, die versteckte Emotion - von Ohnmacht zu Stärke und Triumph

Scham ist eine überaus schmerzhafte und machtvolle menschliche Emotion. Sie ist bei allen Menschen und Säugetieren vorhanden, über alle Kulturen hinweg, und beeinflusst das Leben entscheidend. Obwohl Scham so zentral ist, ist sie wenig bewusst, wird verborgen oder geheim gehalten. Denn einerseits gibt es nur wenige Forschungen zu Scham, andererseits wird Scham häufig verwechselt mit Angst, Wut oder Ekel, hinter denen sie sich versteckt. Alle Pathologien, die mit Selbstverurteilung oder Selbstabwertung zusammen hängen, haben mit Scham zu tun. Scham ist auch eng verbunden mit Trauma. Deshalb ist es bei der Traumabehandlung essentiell, die Scham als solche zu erkennen, sie zu beachten, zu entwirren, zu lösen. Dabei muss der Therapeut berücksichtigen, wie verwundbar Menschen mit Scham sind, wie leicht sie (wieder) beschämt werden und wie vorsichtig dieses Thema in der Therapie angegangen werden muss. Tiefe Scham ist gleichbedeutend mit Kollaps und komplettem Energieverlust, begleitet von Gefühlen der Hilf- und Hoffnungslosigkeit.

Neben der Beschäftigung mit Scham aus verschiedenen Perspektiven wird Silvia Zanotta in diesem praxisnahen Workshop anhand von Fallbeispielen und Demos zeigen, wie Klienten unter Einbezug des Körpers von der Ohnmacht und Immobilität der Scham sukzessive in eine Alpha-Physiognomie der gesunden Selbstbehauptung gebracht werden können, hin zu Würde, Freude, Triumph. Dabei verbindet sie Ego-State-Therapie mit somatischen Zugängen.

Submitter: Marianne Martin

Number and title: 7499 - Weight Control by the Aid of Hypnosis

You could start immediately after the workshop to transfer the training input into your working with clients – as the workshop is composed a bit like a cooking recipe: an insight is offered into a proven concept about weight control with 4-6 sessions. Beginning from the first and going on to the last session you will get the necessary information by treatments' reports, demonstrations, and group trances. Your own exercising in the workshop will complete the training so that you could get a glance of the concept's benefits.

The concept's quintessence: 3 steps in trance including the resource from the future: imagine the goal already reached in the future / merge with this goal / look back from this future (and feeling) to the present what had helped to reach the goal. Additional helpful tools will be presented: self-hypnosis including efficient slogans, utilization of animal behaviour, metaphors. Of course, we will also speak about indications (habit control) and contra-indications (e.g. eating disorder like bulimia) to work with this concept.

Please note that a basic knowledge about hypnosis will be required.

Preferred presentation language: German

Submitter: Marianne Martin

Number and title: 7500 - Searching our Sisters: Women in the History of Hypnosis ?

The summary of this paper: Also our hypnotic ancestors were male and female. The reported history of hypnosis tells us very interesting things. It is also interesting that most of the publications offer the names and the working of famous men – therefore, the question is: Where are the women? Those women actively using trance, suggestions, and mesmerizing? (Not the women serving as skilled subjects or patients.) Henriette Walter and I decided to try a first beginning to find our hypnotising sisters.

As we learnt by the reports about hypnotising men our searching included the areas of myth, superstition, religion, preparing for fighting. This paper will offer our findings following three parts: antiquity, the middle ages, and modern times – of course with some overlapping. I will try to lead your attention from goddesses and priestesses to female druids and wise women, from mystic visionaries to so-called witches, and to female magnetists! The first one we could discover lived in Switzerland: Madame de Tschiffeli, born 1720 in the canton Bern. Both working hard and being lucky enough we were happy to read about the existence of other sisters. The findings' report will end with a female show hypnotist also teaching self-hypnosis. The end of the paper should not mean the end of searching our sisters. Hoping our first beginning has been starting a process leading to a more realistic view of the history of hypnosis - and may many colleagues will be encouraged to start searching the sisters in the past still waiting to be found.

Preferred presentation language: English

Submitter: Stefan Steinert

Number and title: 7514 - Tiefentrance und Reframing mit somatischen Markern der Traditionellen Chinesischen Medizin

Tiefentrance und Reframing

mit somatischen Markern der Traditionellen Chinesischen Medizin

In der hypnotherapeutischen Arbeit können somatische Marker, d.h. körperliche und emotionale Zeichen, Verhaltens- und Reaktionsmuster als Zugang zum unbewussten Nervensystem genutzt werden. Sie geben in der Traditionellen Chinesischen Medizin Hinweise, wie die verschiedenen Bereiche des Unbewussten, die vegetativen Systeme funktionieren, die wie Egostates unser Erleben färben, unsere Glaubenssätze prägen und unsere Reaktionsweisen beeinflussen.

Sie zu erkennen und dem Klienten verständlich zu machen gelingt besonders leicht mit Trancebildern, die sich aus den mit Archetypen verwandten Metaphern dieser alten Heiltradition ableiten lassen.

Im Workshop wird anhand der 5 Elemente der TCM eine selbsterklärende Struktur von fünf Hautgruppen des vegetativen Systems vorgestellt, die nach dieser Arbeitshypothese verschiedene Steuerungsfunktionen haben. Daraus lassen sich spezielle Tranceinduktionen ableiten, in denen die Klienten ihre jeweiligen Problemmuster leichter erkennen und Lösungsansätze gezielt angehen können. In praktischen Übungen und an Fallbeispielen wird gezeigt, wie mit dieser Struktur konkret gearbeitet werden kann.

Der Workshop bietet Psychotherapeuten, Ärzten und Psychologen einen Einblick, wie mit ausgewählten Trancebildern, vor allem bei medizinisch nicht erklärbaren Symptomen, hypnotherapeutisch gearbeitet werden kann, ohne dass besondere Kenntnisse von Anatomie oder Chinesischer Medizin notwendig sind. Die vorgestellte Methode (Trance-Modell der TCM) erklärt sich aufgrund der archaischen Grundlagen und ihrer inneren Logik weitgehend von selbst und ist nicht an ein bestimmtes Therapieverfahren gebunden.

Didaktische Mittel: Flipchart .

Eine warmer, ruhiger Raum, der sich auch zur Durchführung einiger Trancen eignet, wäre von Vorteil.

Buchempfehlung: „So kommt der Hamster aus dem Rad, Stressbewältigung mit den Fünf Elementen der Traditionellen Chinesischen Medizin “, Patmosverlag, 2017, Autor: Stefan Steinert

Submitter: Nicole Ferrera

Number and title: 7522 - Hypnosis as an alternative to pharmacologic sedation in claustrophobic patients undergoing magnetic resonance

PURPOSE

Claustrophobia is a condition that prevents certain patients from completing magnetic resonance (MR) without sedation. The aim of our study is to assess the feasibility of medical hypnosis in helping claustrophobic patients to complete MR without compromising image quality.

METHODS AND MATERIALS

The ethical committee approved our retrospective study. From December 2015 to February 2019 we included 40 patients who underwent MR with medical hypnosis. Every patient had previously interrupted a MR exam due to claustrophobia. As a control group, we included 40 consecutive patients that underwent MR with sedation. Two experience radiologists assessed randomly, independently and blinded, the quality of the images of the two groups using a symmetrical Likert scale (0= non diagnostic images; 1=bad image quality; 2 = fair image quality; 3= good image quality; 4=very good image quality). Descriptive statistics was performed. We also compared additional direct costs from the health care system point of view, according to outpatient insurance reimbursement in Switzerland. Furthermore, we measured time needed for each MR exam of both groups.

RESULTS

The majority of the MR exam of both groups showed good or very good image quality (64/80 = 80% and 61/80 = 76.25% for reader 1 and reader 2, respectively). No statistically significant difference was found in image quality between the two groups. In comparison to a standard MR, medical hypnosis had additional costs of approximately 120-200 USD as opposed to approximately 370-410 USD with pharmacologic sedation. Moreover, the mean MR exam time was 44 min 30 sec. (range 14 min. 30 sec to 118 min.) and 54 min (range 16 min. to 133 min 30 sec.) for patients and for control group, respectively.

CONCLUSIONS

Medical hypnosis is a valid alternative to pharmacologic sedation in patients unable to undergo MR due to claustrophobia, allowing achieving good quality images, with less additional costs and without affecting workflow.

Submitter: Anke Precht

Number and title: 7527 - Selfhypnosis for peek-performance in sports and life

Peek-performances in sports and life require perfect concentration, stress regulation, focus and mastering states of consciousness. In challenging situations or life context, someones mental condition is usually the deciding factor about success oder failure.

In this workshop, we we'll pay attention to some of the most effective techniques based on typical hypnotic phenomena that can be used for frequent challenges in sports (practise and competition) and other challenging situations such as arts, writing, stage performance and leadership.

We'll overview and pratise effective techniques for goal-setting and see how to strenghen discipline, regeneration, control of nervousness and others.

We'll proceed by practical teaching, training and live demonstration. The workshop is open for all practitioners with first oder deeper experiences in hypnosis and selfhypnosis and interested in peek-performance with or withour experience in this special domain.

Keywords : peek-performance, sports, excellence, hypnosis

Submitter: Patrick Wirz

Number and title: 7540 - Applied clinical hypnosis in sex therapy. A hypno-systemical assessment.

Applied clinical hypnosis in sex therapy. A hypno-systemical assessment.

Theoretical background: During sexual consultations, some of the most frequent complaints are about a lack of sexual passion and the absence of physical arousal. Instinctive physical, sexual reactions are essentially triggered by intensive eroticised thoughts, ideas and feelings. In a stable relationship, the erotic may be overshadowed by a one-dimensional, lack-lustre routine. The couple is no longer mentally stimulated. This lack of eroticism leads to a fear of sexual encounters. It is a vicious circle of the fear of sexual situations on the one hand, and a lack of eroticism on the other. It is this melting pot, which prevents sexual reactions. The transformation of the organism, leading to sexual arousal and orgasm, occurs when there is a change in consciousness as a result of an "erotic trance" (Wirz 2009). From one perspective, the practice of trance in sex therapy facilitates a concrete, sensual experience of sexual limitations. From the other perspective, it enables the development and experience of new and appropriate solutions throughout the ageing process. A systemic study of day-to day relationships and sexual relationships enables a couple to better understand their sex life.

Order and content of the workshop: Presentation of the concepts of hypno-systemical sex therapy and "erotic trance". Research techniques, showing samples of the relevant problems of, and solutions to sexual dysfunctions. The practice of trance to optimise the management of lust and fear. How to eroticise stable relationships.

Language of the workshop: German

Didactic materials: Presentations, discussions, personal experience in group trance situations, and demonstrations.

Literature:

Araoz D (1991) Sexual Joy through self hypnosis, Glendale, Westwood.

Araoz D (1998) The new hypnosis in sex therapy. New York, Jason Aranson;

Wirz P (2010) Die Erzeugung erotischer Trance. Psychoscope 11/2010;

Wirz P (2009) Sexuelle Störungen. In: Revenstorf D, Peter B. Hypnose in der Psychotherapie, Psychosomatik und Medizin. Heidelberg, Springer;

Wirz P (2001) Hypno-Sexualtherapie. M.E.G. a. Phon. Nr. 34: 24-28.

Submitter: Corinne Paillette

Number and title: 7549 - Technique des mains de Rossi : un exemple

Je vous propose un atelier pratique au sujet d'une manière de pratiquer la technique des mains de Rossi où après une partie théorique sur le principe , les indications et la façon de procéder , je vous montrerai une vidéo à titre d'exemple , puis vous pourrez expérimenter chacun cette technique en vous mettant par deux .

Submitter: Shaul Navon

Number and title: 7553 - How to deal with patient's stuck and resistant situations in hypnotherapy.

How to deal with patient's stuck and resistant situations in hypnotherapy.

Shaul Navon, Ph.D

Hypnotherapy and Psychotherapy Clinic, Tel Aviv, Israel

The workshop provides clinical conceptualizations of six dual-track interventions for dealing with stuck and resistant situations in hypnotherapy. Dual-track interventions are based on the assumption that patients habitually regard their problems as one-dimensional and thus, tend to become rigid in their attitudes toward these problems. Dual-track interventions constitute hypnotherapeutic processes for transforming patients' negative and rigid perceptions of their problems into

more positive and functional mental states that provide a dual-imensional view, thereby offering patients more options and freeing them to contend with their problems more effectively. We introduce a novel hypnotherapeutic tool from the Illness/Nonillness Model (Navon 2014). This tool, known as the differentiation tool, can transform negative perceptions of psychological and emotional conditions to positive and hopeful perceptions.

Submitter: Eva-Maria Albermann

Number and title: 7561 - Die Chance der Trance, Bauchhypnose

Die Chance der Trance - Bauchhypnose

Bauchschmerzen, Blähbauch, Durchfall, Völlegefühl, all diese Symptome eines Reizdarmsyndroms vermindern die Lebensqualität der davon Betroffenen beträchtlich.

Oft fühlen sich die Patienten dem völlig ausgeliefert. Umso wichtiger ist es, Ihnen mithilfe der medizinischen Hypnose und Selbsthypnose ein Mittel an die Hand zu geben, mit dem sie sich selbstkontrolliert entspannen können und sich auf den Weg zur Gesundung und Wohlbefinden aufmachen können.

Im Workshop werden sowohl Hintergrundwissen zur Symptomentstehung und -behebung, die Darm-Hirnachse als auch schwerpunktmässig verschiedene Bauchtrancen angeboten.

Dazu passt ein Gedicht von Virginia Satir:

Ich muss daran denken:

Ich bin ich,

und auf der ganzen Welt

gibt es niemanden wie mich.

Ich gebe mir die Erlaubnis,

mich auf liebevolle Weise zu entdecken

und Gebrauch von meinen Möglichkeiten und Fähigkeiten zu machen.

Ich schaue mich an

und sehe ein wundervolles Instrument,

das dies vermag.

Ich liebe mich,

ich achte mich,

ich schätze mich.

Submitter: Bogdan Pavlovici

Number and title: 7565 - l'hypnose thérapeutique transgénérationnelle

Je vais présenter sous la forme d'un sketch théâtral une vignette clinique de ma pratique quotidienne de pédopsychiatre spécialisé en hypnose, thérapies brèves et approche systémique familiale et institutionnelle, afin de rendre compte de comment l'utilisation de l'hypnose peut nous permettre d'élucider une problématique transgénérationnelle et de travailler dessus.

J'ai choisi la forme théâtrale afin de rendre la présentation plus vivante.

Il s'agit d'un garçonnet de 6 ans qui vient accompagné par ses parents pour ce que l'on appelle aujourd'hui « savamment » des « troubles externalisés ». L'utilisation d'une technique très particulière inventée par Eric Bardot, le concepteur de l'approche HTSMA (Hypnose et Thérapies Stratégiques par les mouvements alternatifs) permettra de voir comment, peu à peu, on arrivera à la découverte d'une problématique transgénérationnelle à effet délétère sur les relations intra-familiales du présent. Cette découverte aboutira ensuite spontanément à une résolution de la problématique transgénérationnelle, dans les semaines qui vont suivre cette seule séance.

Submitter: Jan Rienhoff

Number and title: 7576 - Behavioural management and hypnosis during midazolam sedation in children's dental treatment

AIM This prospective study searched for behavioural management techniques capable of keeping the dose of midazolam during sedation in paediatric dentistry low, outcome variable being treatment success.

METHODS Some 311 children (mean age 5.72 years, SD=2.1) were selected. They presented as patients in a large secondary dental care clinic in Hannover.

All children had at least one cavity. Siblings and children not performing regular education were excluded. After consent of the parents, the sedation treatments (0.4 mg/kg) were taped on video. Techniques of behavioural management and hypnosis were analysed and assessed, as was treatment success.

RESULTS In 79.7%, the scheduled treatment was completed, while in 12.7%, more teeth than expected could be treated. Only 4.7% of the treatments had to be shortened and 3% of patients could not be treated resulting in an overall success rate of 97%. The high success rate with low midazolam dose could be reached due to techniques of behavioural management, especially continuous bodily contact and tell-show-do, but also some verbal techniques.

CONCLUSIONS Behavioural management is a helpful means of increasing treatment success in paediatric dentistry, in some cases apparently more effective than medical support.

Submitter: Burkhard Peter

Number and title: 7577 - The homo hypnotisus is a woman: Personality styles of people interested in hypnosis

It can be assumed that only those individuals who are interested in hypnosis will volunteer for hypnosis experiments and/or will practice hypnosis. Do these hypnosis-prone individuals differ from hypno-neutral, non-hypnosis-prone individuals? If so, could one then speak of a personality type, the homo hypnoticus? Since 2010, our research group has been using the Personality Styles and Disorders Inventory (PSDI) to examine different samples from two pools, which essentially differed in whether there was an indication of hypnosis (HYP) during acquisition or performance or not (NON-HYP). All NON-HYP individuals, including STEM students, had similar values in the personality styles of intuitive-schizotypal (ST), optimistic-rhapsodic (RH), and charming-histrionic (HI). We focused our final exploration of relatively homogeneous samples of psychosocial occupational fields on these three personality styles by comparing 3 NON-HYP samples (N=1426) with 4 HYP samples (N=1048). Because each sample was made up of nearly ¾ female participants, we calculated two contrast analyses for each one; one for the contextual effect of HYP vs. NON-HYP and one for the gender effect female vs. male. The results are provided and links to the history of hypnosis as well as to schizotypal research are being discussed, especially with regard to the acceptance of hypnosis and hypnotherapy in human sciences.

Submitter: Claude Béguelin

Number and title: 7578 - La constellation hypnotique : le rôle de l'affectivité et des émotions

Dans nos précédents articles (La constellation hypnotique 2001 ; Hypnose et intersubjectivité 2012) nous avons présenté l'hypnose ni comme état ni comme jeu de rôle, mais comme variante de l'intersubjectivité. Nous inspirant des travaux du prof. Daniel N. Stern, nous avions montré les parallèles entre la construction intersubjective du soi chez le bébé et l'intersubjectivité dans la relation hypnotique au travers de ce que Stern appelle les « schéma-d'être-avec ».

Cette conférence a pour but d'approfondir la réflexion sur les effets de l'affectivité dans la relation hypnotique. Les notions d'affect, d'émotion, de sentiment, d'humeur de passion restent souvent floues et divergent d'un auteur à l'autre. Après une définition phénoménologique de l'affectivité et de ses différentes composantes selon Thomas Fuchs (sentiments existentiels, atmosphère, humeur, émotion et interaffectivité), nous tenterons de comprendre les spécificités de cette interaffectivité dans la relation hypnotique. Trop souvent on tente de comprendre l'hypnose au travers de ces aspects cognitifs (la suggestion, les pensées inconscientes), laissant de côté ces qualités affectives qui remplissent notre espace à tout moment.

Submitter: Martin Schmid

Number and title: 7582 - Ein Symptom konkretisieren. In Hypnose mit einem Symptom direkt kommunizieren.

Patienten kommen zu uns mit Symptomen und vielen, oft wenig hilfreichen konzeptuellen Erklärungen. Manche Leidensgeschichte ist lang und von verschiedensten, oft frustranen Therapieversuchen begleitet. Hier tut es einfach mal gut den ganzen Ballast der Pathogenese, der Differentialdiagnosen und gutgemeinten Erklärungen beiseite zu lassen und direkt mit dem Symptom zu kommunizieren. Dies funktioniert deshalb so gut, weil unser Körper eine „Hotline" zum bildhaft-emotional-unbewussten Denken hat. Hypnose ist der Königsweg zum Unbewussten und ihr Verständnis hilft uns diesen anderen Weg zu gehen. In Trance (und auch ohne Trance) kann ein Symptom eine konkrete Farbe, Form oder Gestalt annehmen. Damit ist der Ansatzpunkt geschaffen um es zu verändern...

In diesem Workshop lernen sie eine einfache Methode kennen, wie sie gemeinsam mit dem Patienten körperliche und auch seelische Beschwerden in konkrete, erfahrbare „gefühlte Bilder" umwandeln. Indem der Patient mit seinem Körpergefühl/Symptom in Kontakt bleibt, wird eine Kommunikation ermöglicht. Ein Veränderungsprozess kann mit Hilfe von neuen, aus der Erlebniswelt des Patienten stammenden, hilfreichen Lösungs-Bildern in Gang gesetzt werden... Die Bereitschaft der Patienten mitzumachen ist hoch, da wir uns ja wirklich um das Problem kümmern.

Der Workshop eignet sich für Grundversorger und Somatiker, die einen neuen Zugang zum Symptom suchen. Da sich auch psychische Probleme gut konkretisieren lassen, indem wir die zugehörige Körperempfindung hervorrufen und konkretisieren, eignet sich der Workshop auch für psychotherapeutisch Tätige. Voraussetzung für die Teilnahme sind Grundkenntnisse in Hypnose.

Submitter: Bruno Dubos

Number and title: 7588 - Hypnose, âges clandestins et poupées russes. Un réservoir de ressource pour les patients et les thérapeutes

Les âges clandestins peuvent être définis comme des états sensoriels, et émotionnels différents de l'âge de notre état civil. Ils sont ainsi des « chaînes d'expériences » associants des sensations, des émotions et des représentations psychiques. Ils installent ainsi, des apprentissages, au cours des différents cycles de la vie et des expériences sensorielles, émotionnelles et relationnelles que nous vivons. Nous les mobilisons souvent de façon spontanée et fluide, lorsque nos sensations et le contexte s'y prête.

Ces âges, pas toujours si clandestins que cela, sont autant de ressources, mobilisables à l'infini. Ils sont, de fait, un potentiel de savoir faire et de savoir être, au monde qui nous entoure. ils infiltrent de fait l'ensemble des thérapies.Les contextes pathologiques peuvent mettre en mouvement des âges clandestins rigides et non adaptés aux enjeux auxquels sont confrontés les patients....

les implications stratégiques sont nombreuses. L'hypnose, par la mobilisation sensorielle, permet aux patients de contacter des « chaînes d'expériences » propres à ces âges clandestins ressources: Ils ont leurs propres sensations, émotions, habiletés relationnelle et leurs propres représentations psychiques. Ce réservoir de potentiel peut être déterminant dans la remise en mouvement de la créativité de nos patients, si le thérapeute sait activer ces âges clandestins...

La mobilisation des âges clandestins sera développée, avec plusieurs illustrations vidéo dans un contexte de traumatisme et de douleur chronique.

Submitter: Maurice Stauffacher

Number and title: 7599 - Immobilité, hypnose, vision...

Immobilité, hypnose, vision...

Introduction : Tout le monde connait le rêve du papillon écrit 300 ans avant notre ère par Tchouang-Tseu dans son traité sur la transformation des choses. Moins connu est la parenté d'expérience avec Milton Erickson, en particulier l'importance pour la santé psychique de savoir changer de régime d'activité (ou d'état de conscience) pour rejoindre une forme de quasi immédiateté dans l'immobilité, qui favorise la métamorphose dans la vision des choses. L'inconscient comme un grand magasin, « the middle of nowhere », l'oubli, le jeûne de l'esprit, l'éloge des moments d'abandon et de confusion créatrice.

Méthode : On l'aura compris, l'atelier proposé est plutôt de forme contemplative. L'induction hypnotique (Nidra) favorisera l'immobilité du « Yoga du sommeil éveillé ». Nous travaillerons ensuite la vision éprouvée, selon la technique du Mandala des rêves que j'ai déjà proposée dans plusieurs ateliers. Nous proposons aux participants de se munir d'un tapis de sol. Le matériel à dessin est fourni. Une lecture conseillée : Leçons sur Tchouang-Tseu, Broché ou Kindle – 7 janvier 2014, de Jean François BILLETER Editions Allia.

Conclusion & perspectives : « La difficulté n'est pas, pour ainsi dire de trouver la solution mais de reconnaître la solution dans ce qui a l'air d'en être seulement la prémisse » Wittgenstein.

Le Docteur Maurice Stauffacher travaille à Lausanne comme psychiatre et psychothérapeute, de formation psychanalytique et systémique. Dans les années 80 découvre le potentiel thérapeutique de l'hypnose. Président de la société Suisse d'Onirologie Médicale, il explore depuis 20 ans l'interface entre le sommeil, l'activité onirique et l'hypnose. Membre de la SMSH et de l'IRHYS depuis 2000, il propose régulièrement des conférences et des ateliers.

Francesca Dupraz est psychologue FSP, installée à Genève dans un cabinet privé. Elle travaille depuis 2008 dans la psychologie, la sexologie clinique et le conseil conjugal. Certificat d'Hypnothérapeute, IRHyS. Elle a obtenu un Master en Psychologie (Orientation Cognitive/Clinique. Université de Genève), un CAS Interventions basées sur la Pleine

Conscience (HES-SO Genève & Université de Genève, Faculté de Médicine), de plus elle dispose d'une formation d'Enseignante de Yoga, (European Yoga Alliance à Genève) et une Formation dans l'approche Sexocorporelle.

Submitter: Gary Bruno Schmid

Number and title: 7612 - That Magic Place Bridging the Mind-Body Gap

„Fantasy is more important than knowledge, because knowledge is limited…" (Albert Einstein)

When we were kids, we were bubbling over with imagination. Meanwhile our fantasy fell asleep a little. The aim of our workshop is to reawaken and rediscover our mind-body imaginativeness with the help of intuition and hypnosis, so that we can use our fantasy for the benefit of our patients, large and small, in the form of stories and subtle signs. This helps them and us to ease our sometimes demanding and stressful everyday lives and to lighten life up with a pinch of magic.

And don't forget:

„Just as the chicken is the creation of the egg in order for the egg to reproduce itself, you are a creation of the universe in order for the universe to become conscious of itself!"

Submitter: Gary Bruno Schmid

Number and title: 7613 - Hypothesis on the Origins of Consciousness Bridging the Mind-Body Gap

A hypothesis on the origins of consciousness is presented. According to this hypothesis, the emergence of consciousness occurs on the basis of the recursive nature of in vivo quantum double-slit transport processes. These processes are similar to how synapses enable learning on the basis of neuroplasticity. Recursive nerve signalling occurs with the help of glia cells, especially astrocytes, by intervening directly in the neural transmission of information - a process experienced subjectively as a hidden observer-, thus providing unconscious being (Da-Sein) the awareness of consciousness (Bewusst-Sein) via increased expression of glial (astrocytic) receptors.

This hypothesis allows for a theory involving specific anatomical and biochemical factors related to quantum theory and the science of consciousness:

Each neural transmission signal manifests itself, in a metaphorical sense, either as a "particle" or as a "wave" depending upon whether and how a (hidden) observer can accompany this process. Accordingly, the hidden observer well-known to hypnotherapy is ultimately hidden in the glial (astrocytic) receptors enabling self-observation, for example, to affect self-healing.

References (in German):

- Schmid, G. B. (2015). Swiss Journal of Integrative Medicine 27(1): 50-54;

"On the Origins of Consciousness: Hypothesis as to the Roll of Glia Cells, multi-branched Nerve Endings and Dendrites".

Schmid, G. B. (2016). Swiss Journal of Integrative Medicine 28(4): 231-240;

"Transmission of Signals in Neurons and the Quantum Mind Hypothesis".

Submitter: Gary Bruno Schmid

Number and title: 7614 - Building Bridges & Travelling Crossroads in Mind-Body Medicine

Your organism intuitively knows what it needs to obtain and maintain health. Each and every defense and healing process, whether induced through injury or illness, ultimately serves self-protection and self-healing. Modern, evidence-based medicine has also come to the insight that the patient's own „inner healer" plays an essential role in both the course of illness and of healing: „Every healing is ultimately a self-healing / Imagination as elixir."

Trance, vitalised in the imagination by six salutogentic factors (A. Antonovsky, G. B. Schmid) and their narrations empowered with medical hypnosis, serves to help one successfully challenge difficult life situations, in particular, those posed by severe illness.

The methods of medical hypnosis and the narrative creation of an individually designed relaxation and self-healing mythos enables one to employ their imagination as a remedy by actively mobilizing one's own self-healing powers within their own personal, given context.

These methods can be taught and learned in order to:

- maintain health and optimize mental and physical resources founded in evidence-based medical knowledge regarding stress and relaxation responses (Salutogenesis),

- regain health and linder pain via the regulation of immune and pain defences founded in evidence-based medical knowledge regarding nocebo and placebo reactions (self-healing/sanabo).

We offer a tasty, experience and practice-orientated workshop spiced up with a little theory. Our goal is to offer insight into hypnotherapeutic techniques for the optimization of self-efficacy and resiliency. Emphasis will be placed upon practical, hands-on experience with reference to the evidence-based background of selected examples. Our practical methods are based upon a broad spectrum of hypnotherapeutic techniques, stress and relaxation responses and salutogenic / consciousness–medicine based research. All tried and true

methods have been carried out in our daily practice and corresponding case studies and demonstrations will be used to illustrate the practical exercises. We also welcome participants to share their own cases and experiences with us and the group.

In addition to the well-known works of Aaron Antonovsky, the necessary theoretical background is also available (in German) as a handbook:

- Schmid GB (2018) Strengthening Self-Healing: How you can optimize your Health through Imagination (1. ed.) Springer-Verlag, Heidelberg

and two medical text books with SPRINGER 2009, 2010.

Submitter: Christian Besimo

Number and title: 7618 - Worte vermögen zu heilen Placebo-Effekte in der (zahn-) ärztlichen Kommunikation

Menschen befinden sich im medizinischen Kontext in einem ausserordentlichen Bewusstseinszustand. Dieser zeichnet sich auf der einen Seite durch eine erhöhte Wahrnehmungsfähigkeit für die Atmosphäre in Praxis oder Krankenhaus sowie für die Gestimmtheit der dort tätigen Fachpersonen aus. Auf der anderen Seite ist aber auch die Wahrnehmung des eigenen Körpers und der Zeit verändert. Dabei können Informationen oder Geschehnisse leicht missverstanden oder ausgeblendet werden. In der zahnmedizinischen Praxis wird diese Ausnahmesituation durch die ungewohnten Untersuchungs- und Behandlungsbedingungen noch deutlich verstärkt.

Vor diesem Hintergrund gewinnt eine heilsam eingesetzte, auf die individuelle Patientensituation bezogene hypnotische Kommunikation eine machtvolle Bedeutung für das Wohlergehen der auf medizinische Hilfe angewiesenen Menschen. Der Vortrag zeigt die bewusstseinsverändernden Mechanismen im (zahn-) medizinischen Kontext auf und weist anhand experimenteller Untersuchungen sowie klinischer Beispiele die positive Wirkung von kommunikativen Placebo-Effekten auf die Therapieergebnisse nach.

Submitter: Christian Schwegler

Number and title: 7684 - Der Hypnotherapeutische Werkzeugkasten

Nach Abschluss der hypnotherapeutischen Grundausbildung gibt es ein großes Angebot an Fortbildungsmöglichkeiten zu verschiedenen Krankheiten, in denen hypnotherapeutische Interventionen im direkten Bezug auf eine bestimmte Störung beschrieben werden.

In diesem Seminar zäumt Christian Schwegler das Pferd einmal von der anderen Seite auf und fasst Techniken verschiedener Therapeuten zu einem Workshop zusammen, um die Möglichkeiten die sich aus diesen verschiedenen Ansätzen ergeben aufzuzeigen und gerade dem „jungen" Hypnosetherapeuten einen Werkzeugkasten an die Hand zu geben, mit dem er einen guten Einstieg in die Praxis bekommt. Natürlich eignet sich der Kurs auch sehr gut, um bereits vorhandenes Wissen noch einmal in komprimierter Form zu wiederholen und somit für die praktische Arbeit wieder besser zugänglich zu machen.

Insgesamt werden in diesem Seminar beginnend mit einigen Überlegungen zum Vorgespräch verschiedene Induktionen, Interventionen und hypnotherapeutische Techniken vorgestellt. Einige davon werden mit der gesamten Gruppe durchgeführt.

Der Fokus dieses Seminars liegt dabei auf der frühen Phase einer hypnotherapeutischen Behandlung, in der es dem Patienten teilweise noch schwer fällt in Trance zu gehen oder in Therapie zu kommunizieren. Es werden daher Techniken zum Aufbau einer positiven Heilerwartung, sowie Techniken zur Kontrolle von unangenehmen Symptomen und Gefühlen vorgestellt, die dem Patienten helfen, aus seiner Ohnmacht der Erkrankung gegenüber heraus zu kommen. Des Weiteren werden die Arbeit mit Stellvertretern, die Arbeit mit Affekten und eine Idee zur lösungsorientierten Zeitprogression vorgestellt werden.

Submitter: Vladimir Snigur

Number and title: 7696 - Metaskills-oriented clinical hypnosis training

It is agreed that mastery of hypnosis lies both in the field of art and science, and a large amount of effort has been put to describe and operationalize the key elements of hypnotic intervention, which is required for clinical excellence as well as for teaching purposes. On this workshop, a teaching approach would be presented, that attempts to incorporate the basic principles of hypnosis and hypnotic communication into a clear structure basing on five metaskills, which can be trained, mastered and applied in hypnosis and psychotherapy in general, as well as in other fields of human interaction.

Metaskills are general and reusable skills which either apply broadly to a wide set of problems, or help you acquire other more specific skills. The key metaskills presented are: pacing and leading, multilevel communication, utilization, confusion and destabilization, and strategic sequencing. Basing on them, hypnosis training is divided into logical steps, giving the trainees the opportunity to master their skills and put them into a framework, that promotes both structure and creativity in clinical practice.

As a result, the participants will have an overview of the model, practice the basic exercises and see how more complex skills and techniques can be built up on the basic structure.

The model was developed basing on Ericksonian approach, but it aims to transcend the polarity of direct—indirect hypnosis into a dimensional view of hypnotic communication. The approach has been developed and has shown to be especially helpful with clinicians who are only beginning their training in clinical hypnosis, but has also been found interesting for experienced clinicians.

Submitter: Walter Bongartz

Number and title: 7729 - Trance – the anthropological perspective

Over all times, across all cultures and continents a huge variety of different trance rituals have developed, but despite their dissimilarities they have 2 invariants in common. 1. Even with very different ethnicities, the structure of the language of trance is always the same. It seems as if over the ages totally different cultures came up independently with the best solution for an effective trance language. 2. Trance is used primarily for the regulation of emotions, also prophylactically. The archaic and the modern model of trance will be compared. It will be shown that certain aspects of the archaic approach can profoundly enrich the modern practice of trance.

Submitter: Walter Bongartz

Number and title: 7730 - Trancesprache – die anthropologische Dimension

Über alle Zeiten, Kontinente und Kulturen (Aborigines, San-Buschleute, Navajos etc.) hinweg beruht die Sprache der Trance in traditionellen Ethnien auf den gleichen Sprachmustern, und dies mit einer verblüffenden Konsequenz so als hätten die unterschiedlichsten Kulturen dieselbe beste Lösung für eine effektive Trancesprache gefunden. Es geht dabei nicht um inhaltliche, sondern formelle Aspekte der Sprache (Formelhaftigkeit und Wiederholungsmuster), die sich entweder auf den Aufbau einer inneren Wirklichkeit in Trance oder die besondere Vertiefung von emotional- körperlichen Erfahrungen im Rahmen tiefer Trancen beziehen.

Die entsprechenden Sprachmuster sind leicht anzuwenden und können problemlos in die eigene Form der Trancesprache integriert werden. Ihre praktische Anwendung, die im Seminar auf Aspekte der Behandlung von psychosomatischen Störungen, Ängsten und Depressionen bezogen sein wird, wird anhand anwendungsbezogener Textbeispiele und Demonstrationen vermittelt.

Submitter: Linda Thomson

Number and title: 7731 - Just Breathe

Life both begins and ends with a breath. Breath can be both unconscious and automatic and conscious and deliberate. It is at the center of the mind - body connection as it is the first physiologic function to change with emotion. Breathing is pivitol to teaching children self-regulation. In this workshop multiple ways to teach diaphragmatic breathing to children as well as adults will be demonstrated. The physiology and the efficacy of stimulating the relaxation response with focused breathing will be discussed.

Submitter: Hansjörg Ebell

Number and title: 7733 - Hypno-Therapeutische Kommunikation in der Psychoonkologie

Bei leidvollen Erfahrungen (z.B. Ängste, Schmerzen, Übelkeit) brauchen/suchen Patienten mit einer Krebserkrankung therapeutische Unterstützung. Hypnose und Selbsthypnose können im Rahmen eines Gesamt-Therapiekonzepts hilfreich sein, denn sie ermöglichen über individuelle Fähigkeiten und Ressourcen der Betroffenen den Zugang zu einem im Laufe der Evolution erworbenen Regulationspotential der menschlichen Spezies. Dies gilt sowohl für viele Symptome der Erkrankung und Nebenwirkungen der Therapie wie auch für den Umgang mit der Erkrankung (Coping). Neben Anleitungen zu Entspannung und Imaginationen ist die aufmerksame Zuwendung („intersubjektive Resonanz“) auf der Beziehungsebene entscheidend.

Dieses Seminar soll an Hand von Fallgeschichten und bezüglich „Technik“ durch Selbsterfahrung bzw. Übungen neugierig machen auf das Potential von Hypnose und Selbsthypnose für die „Begleitung ein Stück des Weges“ von Patienten mit einer Krebserkrankung. Eigene Fälle bzw. Erfahrungen einzubringen, ist erwünscht.

Submitter: Hansjörg Ebell

Number and title: 7734 - Hypno-Therapeutische Kommunikation – Kernelement einer „Resonance based Medicine“

Jeder Austausch zwischen Behandelnden und Behandelten in der Medizin sollte dazu dienen, angemessene Therapieziele zu ermitteln und diese zu erreichen. Dafür sind sowohl objektive Befunde und Erkenntnisse („Evidence Based Medicine“), klinische Erfahrung als auch Gespräche und subjektive Einschätzungen der Betroffenen maßgeblich. Optimale Bedingungen, um Fachkompetenz einbringen zu können, herrschen in einer Atmosphäre wechselseitiger Resonanz zwischen Hilfe Bietenden (Perspektive: Krankheit) und Hilfe Suchenden (Perspektive: Kranksein). Die große Bedeutung von Suggestions-Effekten für Gelingen oder Misslingen jeder Therapie (Placebo und Nocebo) wird zunehmend erkannt und anerkannt. Hypno-Therapeutische Kommunikation bedeutet, sich bei jedem Austausch auf dessen Nutzen für vereinbarte Ziele zu konzentrieren und Ressourcen zu „utilisieren“ (Milton H. Erickson). Eine systemisch fundierte „Resonance Based Medicine“ fördert nicht nur persönlich vorhandenes Potential zur Gesundung (salutogenetische Perspektive), sondern bezieht auch individuelle Fähigkeiten der Betroffenen mit ein, um optimal mit den Konsequenzen therapeutischer Interventionen (pathogenetische Perspektive) umzugehen.

Submitter: Fabio Carnevale

Number and title: 7735 - Rapport as a Golden Bridge. The Cornerstone of Ericksonian Hypnotherapy

There are substantial differences between the therapeutic relationship and the so-called hypnotic Rapport. Infact, we call Rapport that special relationship that is able to create intense interpersonal links and, at the same time, profound disconnections with the non-hypnotic realty, that is a crucial aspect of the therapeutic approach to dissociative conditions.

The epistemology of the ericksonian naturalistic approach is based on relational attunement and neurophysiological co-regulation between therapist and patient.

This lecture will provide a general overview of the clinical implications of rapport from phylogenetic and ontogenetic perspectives.

Submitter: Daniele Lonchamp

Number and title: 7742 - Drawings and conversational hypnosis: instantaneous resolution of nocturnal/diurnal urinary incontinence

Urinary incontinence (diurnal and/or nocturnal) is a common disorder that often requires the involvement of multiple medical teams (family doctor, pediatrician, psychologist, school nurse and even urologist).

The child and his/her parents do like to understand how the body functions. Medical education through drawings is a way to establish rapport; then a variety of pharmacological and non-pharmacological interventions can be offered.

Conversational hypnosis with the aid of drawings is a fun, effective, and constructive technique. It provides medical education (anatomy lesson), this naturally leads to a suggested treatment plan. The clinician encourages the child to find a solution to his/her problem by tapping into his/her own internal resources.

Results can be amazing; sometimes one medical visit is all that is needed.

This clinical case will describe how a medical visit might look like. Psychologists, family doctors, pediatrician, nurse practitioners can easily put this intervention into practice without "doing formal hypnosis".

Submitter: Tobi Goldfus

Number and title: 7745 - Trauma, Young People and the Power They Give Social Media: Charging up the Inner Selfie: Using Hypnotherapy, Ego State Therapy and Somatic Experiencing to Activate Resource States

All social media (SM) is hypnotic! This workshop will underline the importance of bringing the strong digital self of young people into therapy as part of any treatment goals today. Assessment tools will include the Social Media Assessment Form, the Seven Stages of Smartphone Attachment and how to determine what developmental stages and ego states are being practiced online. Powerful online trance phenomena will be compared with therapeutic trance. Trauma that can occur on SM, predicating factors of vulnerability and diagnostic tools using hypnotherapy, ego states and somatic experiencing for accessing resource states will be discussed. Experiential exercises, including the Inner Selfie Technique, cyber-friendly trance-scripts and externalization techniques that build resiliency, repair and healthier digital wellness will be demonstrated.

Submitter: Inger Lundmark

Number and title: 7747 - Hypnosis in the work with sexual symptoms, with couples or individuals

In our times there is a great need to talk to our patients about sexuality, to work on merging the gap between love and sex, to heal sexual traumas and to work with any sexual symptom our patients bring in to our office. A swedish study shows that therapists still don´t adress sexuality in therapy, and not only in Sweden, but all over.

In this workshop we will reveal what hampers us as therapists to do so, and take some steps forward together. In this workshop we adress resources, sensuality, lust, intimacy, joy & pleasure, fantasy & reality, safety & adventures...

Common sexual symptoms are adressed and how to work with them with hypnosis.

Submitter: Rachel Bonaventura Snir

Number and title: 7748 - Memory changes, the underlying unconscious processes and clinical implications: after E. Bonaventura, 1915

Enzo Bonaventura (1891-1948) was professor of Applied Psychology, director of the Psychology Laboratory in Florence (1923-1938) and founder of the Psychology department in Jerusalem (1939).

He believed Psychoanalysis and Experimental Psychology should collaborate, and in his 1915 paper, Experimental Researches on the Illusions of Introspection he stated: Unconscious processes exist and effect human behavior; therefore they must - and can be examined scientifically.

In a series of experiments Bonaventura demonstrated how subjects' actions can contradict their introspection while the gap between action and introspection is observable and measurable. He named this "Illusions of introspection".

He demonstrated memory changes that were either spontaneous or provoked by suggestions. In both cases the subjects believed they were retrieving true memories while they were actually creating new, false ones.

He also found that with time and repetitions, false memories became fixated and it was impossible to differentiate them from true memories. He described inner rules, "Guiding Ideas" that lead the reconstruction of memories and cause true memories to be replaced by new, false ones.

Implications: Bonaventura's ideas are still relevant today, especially for hypnotherapy with PTSD and early trauma:

Realizing how flexible memories are, how undifferentiated false memories are from true ones and how memories can be reconstructed according to "guiding ideas" and suggestions, we can help patients see how their painful memories might be false, liberate them from dysfunctional memories, and together create new, more functional guiding ideas and perspectives.

The talk will discuss Bonaventura's ideas and demonstrate their application in two contemporary clinical cases:

One case in which a patient reconstructed a trauma that never occurred, and another case in which a patient unjustly blamed herself for repeated failures.

In both cases, unconscious memory-reconstructions according to guiding ideas were identified and explained to the patients, and this understanding enabled them to release their painful beliefs and traumas.

Submitter: Zahi Arnon

Number and title: 7750 - Utilizing hypnosis into mindfulness

Mindfulness emerged in Western secular culture in 1979 when Jon Kabat-Zinn founded the "Mindfulness Based Stress Reduction (MBSR) Clinic" at the University of Massachusetts Medical Center. He cut out an summarized the significant principles of Buddhist meditation, it's practice and results. The Mindfulness course (MBSR) Includes 8 sessions of study and practice, and another half a day of meditation.

The original Buddha's purpose was to analyze the fundamental causes of human suffering. He concluded that there are two main causes: One is the impossible wish to avoid all unpleasant situations, realities, feelings and pain, both physical and emotional. The second is the wish that pleasant situations, realities and feeling will not cease.

Analyzing the Mindfulness (MBSR) course reveals that it strives to help participants understand their causes of suffering according to Buddhism, and change by daily practice their attitude towards the ever-changing reality. Giving up the aspiration to control inner personal and outer reality should help participants to cultivate self-compassion, which leads to less suffering.

But not all participants can afford 8 weeks commitment, some even find the course too slaw and boring and quit before its natural ending.

Can we utilize the power of hypnosis to reach the same goals and outcomes of the long mindfulness course in fewer sessions?

The workshop will share suggested program to deal with Mindfulness massages and assimilate them within 3 hypnotic sessions. The program is in its initial phase in private clinic, hopefully to be able to present more outcomes by the date of the congress.

Workshop participants will accept the full program and will be able to freely use it and test its effectiveness.

Submitter: François Thioly

Number and title: 7751 - Implications cliniques d'un modèle de conscience non-locale

La conception dominante du fonctionnement de l'appareil psychique considère le cerveau comme l'organe de production de la conscience. Les avancées des neuro-sciences semblent accréditer cette conception, alors qu'elle relève d'un paradigme scientifique dépassé, celui d'une physique déterministe, newtonienne, que les physiciens ont été contraints d'élargir depuis plus de cent ans à la suite de la révolution conceptuelle qu'a représentée la physique quantique.

Or les paradigmes auxquels nous nous référons, que ce soit explicitement ou implicitement, fonctionnent comme des croyances, et déterminent, orientent, limitent très largement notre approche clinique des patients.

En tant qu'hypnothérapeutes nous sommes confrontés de manière concrète aux effets de l'influence, de la relation, des rapports entre conscience, esprit et corporéité. Notre manière de les penser, donc nos croyances, ont un impact direct sur notre pratique.

Je souhaite illustrer à travers deux vignettes cliniques comment notre approche des patients se trouve enrichie par une conception de la conscience élargie, tenant compte de la vision du monde que nous propose la physique quantique telle que la déploient nombre de physiciens contemporains.

Submitter: Rachel Bonaventura Snir

Number and title: 7754 - The use of physical objects for induction, insight and strengthening therapeutic effect

The effect of metaphors in hypnotherapy is well established. Yet the metaphor is intangible, associated with the therapist and the therapeutic setting and might not last after the session. Anchoring can prolong the effect, though the options here are limited.

This presentation discusses the use of concrete-physical objects as metaphors that can assist induction, suggest age regression, trigger projection, introspection and insight, and when taken home they can prolong and enhance the therapeutic effect.

Zarren & Eimer (2002) introduced the use of marbles for induction and anchoring. Livnay (2017) suggested the use of the marble as a transitional object (after Winnicott, 1953), and discussed the possibility to project onto the marble emotions, therapeutic content and qualities of the therapeutic relationship.

Elaborating on this idea, we here suggest the use of natural objects: sea-shells, stones, dried plants etc., as these objects, typically collected by children, can easily be charged with childhood memories and emotions:

Handing the patient a bowl full of such objects, inviting him to hold it and examine it's content, is an induction to trance, suggesting age-regression to strolling in the park/river-side/beach as a child with all the sensations involved.

The variety of such objects is immense, and this enables their use for diverse purposes: Patients can be asked to choose objects they find appealing, or that represent different ego-states, emotions, aspects of their personality or sides in a conflict.

By choosing, the patients are projecting inner-world elements onto these external objects. While inspecting the qualities of each chosen object they are metaphorically introspecting their inner-world.

The process enables dialogues with the represented elements, externalization of inner conflicts and investigation of possible solutions.

Inviting the patient to take the objects home turns them into transitional objects attached both to the therapist and to the insights achieved, and so enables continuation of the therapeutic process beyond the session.

These ideas were applied in personal and group therapies with interesting outcomes. The workshop will present the ideas and method through theoretical discussion, actual case-reports, demonstrations and group experience.

Submitter: Ronald Alexander

Number and title: 7755 - Accessing the Body's Wisdom: Transforming Symptoms to Healing Resolutions with Ericksonian Hypnosis, Mindfulness and Somatic Experiencing Psychotherapy

In Ericksonian Hypnosis and Mind Body Healing Therapies there is a dynamic intersubjective exchange where the patient's nervous system becomes re-regulated from the sympathetic state to the parasympathetic (dorsal and vagal). This hypnotic exchange is the Bindu bridge or point from which pain, suffering, and affliction transitions to positive self-expression and dynamic inner healing.

Studies support that hypnosis, meditative, and yogic studies are capable of changing our brains by changing our minds. Research reinforces that with a parasympathetic shift activity and movement from right to left in the prefrontal cortex our brains, nervous systems, telomere alteration, and genomic reorganization can shift towards healing somatic and traumatic disorders.

For 2500 years, Mindfulness practices have developed what is referred to as "skillful methods" for study and transformation of the mind-body process. These meditation and visualization practices help to cultivate self-regulation through awareness training - developing concentration, releasing painful affects and applying the principles of Buddhist psychology to resolve afflictive factors of mind-body trauma.

Through the wisdom of these novel approaches to mind-body healing, one can learn to see these symptoms as healing resolutions or psychological learning's for generating positive therapeutic outcomes for unusual and difficult cases. This workshop will provide training in Erickson's revolutionary approach and leading-edge skills in the fields of mindfulness and somatic experiencing therapies for the rapid treatment of trauma, pain and other somatic imbalances. By utilizing the mind-body method for reframing trauma, painful somatic experiences can be transformed into new healing rhythms in the body -- oftentimes with dramatic and immediate results.

This workshop will include teaching Ericksonian hypnotic methods, somatic experiencing therapies, mindfulness meditation training and creative psychological principles. It will be a balance of theory and clinical demonstration.

Participants will learn:

· Framing, reframing, and de-framing old patterns and core beliefs for generating new learning's & neural pathways for brain-mind reeducation and brain plasticity

· Somatic styles for accessing and regulating flow state healing and peak performance for promoting optimal states of creativity and wellness

· The function of pacing and leading for developing rapport and mirroring natural learning rhythms

Submitter: Shaul Livnay

Number and title: 7760 - From oops to "oopsology". How chance occurrences can become a basis for getting unstuck during various impasses in therapy and in life.

How often do we find that chance occurrences, when observed by a spectator with curiosity have led to the greatest discoveries in science ie: Pavlov, mirror neurons, etc.? Accidentally spilling the contents of a test tube can lead to the discovery of new elements! I have taken the "oops" phenomenon and the study of it into the science of "Oopsology". How can we tap into the potential of the latter phenomenon in order find new solutions for resolving impasses in life? That is the challenge that this presentation will attempt to face.

Submitter: Shaul Livnay

Number and title: 7761 - « Take two » A method of replaying, re-experiencing & "editing" past problematic experiences.

I have always been a movie freak, so it was quite natural for me to begin to integrate a method of film directors while refining actors' performances in working on a certain scene: "take two". I have found the latter to be very useful in therapy when a patient brings a difficult situation to a session. In the workshop, I will demonstrate how to apply "take two" to enable a patient to tap their creative resources in re-experiencing and resolving past traumas.

Submitter: Marie-José Manidi

Number and title: 7762 - Passerelles théoriques et cliniques pour la résolution des effets des traumatismes somatopsychiques

En première partie, nous définirons les diverses passerelles théoriques qui s'étendent du conditionnement classique provoqué par un trauma jusqu'aux modèles de la dissociation de l'identité (fragmentation du Soi).

Dans un second temps, nous présenterons les bases de la méthode de projection spatiale des parties Emotionnelles du Soi. Nous inviterons les participantes/s à l'exercer brièvement. A partir de leurs expériences, nous tisserons des liens de compréhension clinique.

Passerelles théoriques

Nous démontrerons l'ancrage théorique du traumatisme dans le modèle du conditionnement classique. Les conséquences du traumatisme revêtent la forme du Stimulus inconditionnel (Si) (déclencheur) qui provoque la plupart du temps une Réponse inconditionnelle (action) inadaptée (Ri). Ce conditionnement est partiellement INCONSCIENT. Toute intervention psychothérapeutique (hypnose, Erickson) (modèle TAI, Shapiro) (psychothérapie sensorimotrice, Ogden, Fischer) agit sur ce binôme afin de le rendre plus accessible au conscient et mieux adapté à l'environnement.

Ensuite, nous illustrerons le CONTINUUM qui va du traumatisme simple vers le traumatisme complexe comme étant un envahissement progressif du conditionnement classique; conséquemment, l'accès aux ressources et à l'état conscient étant toujours plus perturbé.

Enfin, nous introduirons la complexification du modèle du conditionnement classique au travers de la fragmentation post-traumatique du Soi. Celle-ci s'inscrit sur le CONTINUUM évoqué ci-dessus. Elle évolue au-travers de modèles tels que les Systèmes internes familiaux (Schwarz), la théorie des états du moi (Reddemann), les troubles dissociatifs de l'identité (DSM5) et enfin, le modèle de la dissociation structurelle (van der Hart).

Passerelles cliniques

L'évolution des connaissances sur le trauma, nous a amenée à développer une méthode de projection spatiale des parties Emotionnelles du Soi élaborées par la partie Adulte. Ce setting clinique permet dans une première étape l'observation et la description verbale du contenu de chacune des parties, puis un contact avec les sensations ressenties, alors seulement a lieu la résolution en appliquant l'approche la mieux adaptée à chacune (régression en âge, stimulations bilatérales alternées, observation en pleine conscience, etc.). Dans une seconde étape, a lieu une mise en relation EN CONSCIENCE des différentes parties.

Submitter: Paola Brugnoli

Number and title: 7764 - Changes in laser-evoked potentials during hypnotic analgesia for chronic pain: a pilot study

Background: Hypnotic analgesia is one of the most effective nonpharmacological methods for pain control. Hypnosis and distraction of attention from pain might share similar mechanisms by which brain responses to painful stimulation could be similarly reduced in both states. There is ample evidence for the efficacy of clinical hypnosis as a psychological intervention in the treatment of acute or chronic pain. Results are conflicting, however, with some studies showing an increase, others a reduction, and others still no change in the amplitude of event-related brain potentials during hypnosis as compared to control conditions. Here we compared the effects of clinical hypnosis to simple distraction of attention during recording of laser-evoked potentials (LEPs) in patients with chronic pain.

Methods: The dominant hand in ten patients with chronic pain was tested with LEPs during: (I) resting state; (II) clinical hypnosis, and (III) distraction of attention. Nociceptive responses elicited by LEPs were graded on a numerical rating scale (NRS), and the change in N2-P2 complex amplitude during the three experimental conditions was analyzed.

Results: We observed a statistically significant difference in ratings of pain intensity and unpleasantness between HC and BC ($F=7.5$, $P=0.005$ for intensity, and $F=13.74$, $P < 0.0001$ for unpleasantness) and between HC and DC ($F=7.5$, $P=0.010$ for intensity, and $F=13.74$, $P=0.001$ for unpleasantness). The N2-P2 amplitude rate, expressing the N2-P2 amplitude ratio between HC and DC versus BC, showed a marked, significant reduction during HC (N2-P2 HC/BC ratio, 0.59±0.07) when compared to DC (N2-P2 DC/BC ratio, 0.92±0.05) ($P < 0.0001$) N2-P2 amplitudes were significantly decreased during the hypnotic state as compared to the resting state and distraction of attention.

Conclusions: Hypnosis is a modified state of consciousness that may differ from mental relaxation or distraction of attention from pain. A reduction in N2-P2 amplitude may result from the modulation of diverse brain networks, particularly the frontolimbic pathways, which could modify noxious stimuli input processing during hypnotic analgesia. Our findings indicate

that several different brain mechanisms may act together in hypnosis and distraction of attention during pain processing and that clinical hypnosis may provide a useful non-invasive pain relief therapy

Submitter: Paola Brugnoli

Number and title: 7765 - The role of clinical hypnosis and self-hypnosis to relief pain and anxiety in severe chronic diseases in palliative care: a 2-year long- term follow-up of treatment in a nonrandomized clinical trial

Background: Patients with severe chronic diseases and advanced cancer receiving palliative care, have a complex range of pain and anxiety that can arise early in the course of illness. We studied two groups of patients with severe chronic diseases who participated in a nonrandomized clinical trial of early integration of clinical hypnosis in palliative care versus standard pharmacological care. The purpose of this investigation was to evaluate whether a long-term intervention of 2 years with clinical hypnosis and self-hypnosis as an adjuvant therapy in chronic pain and anxiety, is more effective than pharmacological therapy alone. Methods: The study population consisted of 50 patients, 25 in the hypnosis group and 25 in the control group. Evaluations with Visual Analog Scale (VAS) for pain and Hamilton Anxiety Rating Scale (HAM-A) for anxiety and the evaluation of the use of opioids and analgesic medicines were conducted at baseline and after 1 and 2 years.

Results: The two groups were homogeneous in the distribution of sex, age, type and subtypes of diseases and use of opioids and analgesic medicines at baseline. The patients suffered from 3 main types of severe chronic diseases: rheumatic (n=21), neurologic (n=16) and oncologic (n=13). The VAS score at baseline was similar in both the hypnosis group and control group (mean ± standard deviation, SD: 78±16 and 77±14, respectively). The average VAS value for the hypnosis group decreased from 81.9±14.6 at baseline to 45.9±13.8 at 1-year follow-up, to 38.9±12.4 at 2-year follow-up. The average VAS value for the control group decreased from 78.5±14.8 at baseline, to 62.1±15.4 at 1-year follow-up, to 57.1±15.9 at 2-year follow-up. The variance analysis indicated that the decrease in perceived pain was more significant in the hypnosis group patients than in the control group, after 1- and 2-year follow-up (P=0.0001).

The average HAM-A Hamilton anxiety score decreased from 32.6 at baseline to 22.9 and 17.1 respectively at 1-year and 2-year follow-up for the hypnosis group, but it remained almost the same in the control group (29.8, 26.1 and 28.5 at baseline, first and second year respectively). ANOVA showed that the difference between the two groups was statistically significant ($P < 0.0001$). Conclusions: The patient group receiving hypnosis as an adjuvant therapy showed a statistically significant decrease in pain and anxiety and a significantly lower risk of increasing pharmacological pain treatment.

Submitter: Paola Brugnoli

Number and title: 7766 - A STREAM OF CONSCIOUSNESS: ART, CONSCIOUSNESS, SELF-CONSCIOUSNESS AND THE UNCONSCIOUS

'Stream of consciousness' denotes a description of a mental state where one has neutralised, as it were, all conscious 'direction' of one's thinking, and put one's mind in 'neutral', freewheeling along, in a manner of thinking. As we look at consciousness closely, we see that it can be analyzed into many parts: neurophysiology of brain, neuropsychology of mind, philosophy and spirituality. However, these parts function together in a pattern: they form a system. While the components of neurophysiological consciousness can be studied in isolation, they exist as parts of a complex and unified system, the consciousness, and can be fully understood only when we see this function in the overall system. Since the mind reflects habitual thoughts, it is therefore our responsibility to influence our brain with positive emotions, thoughts and energy as the dominating factors in our mind. We can experience many levels of consciousness trough the art experience, and the 'Stream of consciousness' or 'higher consciousness', we become able to live in it continuously. Then, with further practice and development, we become permanently awakened and live in uninterrupted higher consciousness. We can direct our inner power to move and express itself in our own life and those of your loved ones. In this work, we carefully examine the role and use of art to obtain specific states of consciousness, as mindfulness and meditative states. Trough art, we can reach the spiritual awakening, a sudden expansion or shift in consciousness, the complete dissolution of one's identity as a separate self, with no trace of the egoic mind remaining. Long before modern neuroscience, artists were creating works to inspire people and today complex brain imaging scans can show us just how art changes the physiology of our brains. Contemplation, observing, and taking in beauty all stimulate pleasure centers within the brain. This can lead to an elevated state of consciousness, wellbeing, and better emotional health.

Submitter: Joseph Tramontana

Number and title: 7767 - Hypnotically Enhanced Treatment of Addictions: Alcohol Abuse, Drug Abuse, Compulsive Gambling

For years, when the author attended hypnosis workshops seeking continuing education on the use of hypnosis for addictions treatment, all of the workshop titles that included the word "addiction" were for smoking cessation or weight loss. Likewise, there was little in the literature on hypnotic treatment of these conditions. So, the author decided to write the book: "Hypnotically Enhanced Treatment for Addictions: Alcohol Abuse, Drug Abuse, Gambling Addiction, Smoking, and Weight Loss" published by Crown Publishing in 2009. Prior to the book release, he began teaching workshops at ASCH and SCEH, and has done so somewhat continuously including both organizations in 2019. He also presented a 2-day workshop on this title (with a focus on the opioid crisis) to the Canadian Federation of Clinical Hypnosis in Banff, Canada in May 2019. In 2018, he presented a workshop on "Hypnotically enhanced psychotherapy" at the ISH conference in Montreal. There were also some presentations to the ASCH & SCEH societies on Sports Hypnosis (on which he published a second book in 2011).

The goal of this workshop will be to teach, or at least bring to participants' attention practical techniques for employing hypnosis with various addictive disorders. Participants already working with addictions may learn new treatment strategies, or, if not working with addictions, they will be exposed to strategies that might allow for expansion of their practices to include these disorders.There will be demonstrations and participant involvement.

Submitter: Alessandro Norsa

Number and title: 7773 - THE PHENOMENON OF SHAMANIC TRANCE AND ALTERATE STATE OF CONSCIOUSNESS CULTURAL MODELS COMPARED

The focus of the present work is the phenomenon of shamanic trance and modified states of consciousness. The starting point of the study is the evaluation of the cultural difference in which the phenomenon of trance is inserted: on the one hand, in the shamanic world, this phenomenon is a way of getting in touch with the world of spirits and divinities, on the other, in the western context, it is a way of entering into the depths of contact with the personal unconscious.

The data analyzed in the intervention come from a research conducted with the collaboration of 14 Unviversities from different parts of the world. The methodology used to address the study was the administration of an equal questionnaire for the different cultural realities. For the collection of data, the research centers have sent local anthropologists of culture and language to the territory. In this presentation we will introduce, by means of examples, the differences and similarities of this phenomenon that presents different implications in different cultural and historical contexts in an anthropological point of view.

Submitter: Alessandro Norsa

Number and title: 7774 - SHAMANIC TRANCE IN GEORGIA

Data from this work were collected directly in a recent research campaign in Georgia in the Agiara region. In this area, as in other parts of Georgia, some women with shamanic powers pay attention to children who have important organic or psychological problems typical of age (lack of appetite, insomnia) or referable to the cultural reference system (for example the evil eye). The ritual begins with the purification of the environment followed by different sequences of prayers that are interspersed with breaths addressed to the small patients and oriented in different ways according to the case. A first mode of prolonged breath is moved from one shoulder to another, another directed to the chest (in the idea that the soul resides in the heart). If during the prayer recitation the woman has had an apnea or a change in the state of consciousness, it means that the child would have the evil eye. If the same conditions were transmitted to other people present, it would be an indisputable diagnostic confirmation. The invocations and the possibility that women come into contact with the divine constitute the central element of the exorcist activity.

Submitter: Alessandro Norsa

Number and title: 7775 - STATES OF TRANCE IN CUBAN RELIGIOUS PRACTICES

In the Cuban santeria, heir to the African religious practices Yoruba (Òrìṣà-Ifá), the person in need of care enters a state of trance through the sound of the drum. The ceremony (tambor) is officiated by a singer, a choir and four tamboleros. During the ritual the singer invokes an oricha (divinity) and, in the swirling dance the sufferer falls into a modified state of consciousness. What happens in these conditions reminds the events of the tarantata that are found in Puglia in Italy. The person falls to the ground, shakes and wiggles. On awakening it often refers to well-being with respect to the previous condition. Another manifestation of modification of state of consciousness that takes place in a practice called cajòn espiritual in which the antepasados or ancestres (ancestors) are invoked: also in this case the manifestation is accompanied by the music of drums.

Submitter: Christian Ziegler

Number and title: 7776 - Kooperation und Problembewusstsein mithilfe der Hypnotischen Gefühlsmeditation (HGM) in der Hypnotherapie bei Anorexia (AN) und Bulimia nervosa (BN)

AN und BN sind psychosomatische Erkrankungen, bei denen therapeutische Interventionen oft ins Leere stossen. Bei aller Hilfsbereitschaft der Patienten fehlen oft Verantwortung und Fürsorge für sich selbst. Dies erschwert die therapeutische Bearbeitung der Probleme.

Die HGM ist ein elegantes Verfahren, welches hypnotisch das emotionale Leiden hinter der Erkrankung zugänglich macht, indem sie die Emotionen als Hilfe zur hypnotischen Fokussierung und Veränderung utilisiert. Obwohl diese Patienten auf den ersten Blick eher emotionslos wirken, kennen sie ihre negativen Emotionen meist recht gut. Darüber hinaus besitzen sie überdurchschnittliche imaginativen Fähigkeiten, welche sich zur Bearbeitung der Emotionen gut eignen. Eigentliche Hypnose hingegen ist für sie fast immer bedrohlich, aus Angst vor Versagen oder Kontrollverlust.

In diesem Workshop stelle ich folgende diffuse Emotionen vor: Versagend und verlassen, ausweichend und trotzig, abweisend und ungeliebt. Wir meditieren und besprechen sie im Zusammenhang mit «Hilfe nicht annehmen können» und «den Problemen ausweichen». Solange diese Emotionen, die z. T. noch aus der magischen Entwicklungsstufe des Kindes stammen, die bewusste Problemerkennung verschleiern, treiben sie die süchtigen Impulse an und behindern die Selbstständigkeit. In der HGM jedoch entwickeln sich die Emotionen weiter und werden kooperationsfähig. Die Patienten lernen, fortan diese Emotionen weder zur Seite zu drängen noch sich zu einer ungünstigen Handlung hinreissen zu lassen. Und fast wichtiger: Bisher ignorierte Problembereiche in Durchsetzung, Nähe- sowie Aggressionsregulation können nun bewusst geschildert und damit entschärft werden.

Weil die HGM im Grundprinzip einzig aus Fokussierung auf eine gewählte Emotion und auf ein dazu stimmiges symbolisches Bild besteht, eignet sie sich deshalb sowohl zur längerfristigen Problemlösung wie auch zum Einsatz in emotionalen Notfallsituationen. Während der

Herleitung einer gewählten Emotion als Vorbereitung zur Meditation kommen wichtige Alltagsprobleme und lebensgeschichtliche Informationen zur Sprache.

Der Kurs vermittelt Einblicke: - in die einfache hypnotische Technik der HGM, - in die durch die HGM erleichterte Bearbeitung schwieriger Emotionen als Meilenstein der Behandlung, - und in die Problematik der Essstörung.

Submitter: Christian Ziegler

Number and title: 7778 - Thuner Imaginativ-Skala für Kinder (Tisc-K): Hypnotisierbarkeit als ergänzende Verständnishilfe von hypnotischen Prozessen

Zur standardisierten Messung der Hypnotisierbarkeit gab es in den letzten Jahrzehnten keine entscheidenden Veränderungen. Die 1959 erschienene Stanford Hypnotic Susceptibility Scale A (SHSS-A) dient immer noch als Referenz. Sogar für mich als Kliniker lohnt es sich aber immer wieder, mich auf die Grundvariablen der Hypnotisierbarkeit zurück zu besinnen. Zudem habe ich selbst dazu 1995 in der CH-Hypnose und danach in Hypnos eine eigene empirische Untersuchung zusammen mit Markus Neuenschwander publiziert, diese aber noch nie öffentlich vorgestellt. Die Vorteile des Tics-K bestehen unter anderem darin, dass wir sie imaginativ und nicht hypnotisch genannt haben, um so Nebeneffekte des Wortes hypnotisch zu vermeiden. Zudem wurden die Validierungsfragebögen von Schullehrern ausgefüllt, die trotz aller Kenntnisse der Probanden doch eine professionelle Objektivität zu den Kindern mitbrachten.

Die einzelnen Items des Tisc-K sind normal verteilt von leicht bis schwer, was die übliche Einteilung der Probanden in niedrig, mittel und hoch hypnotisierbar ermöglicht. Die Studie umfasst 142 gesunde Kinder und Jugendliche. In der Validierung mittels multipler Regression erklären die Selbsteinschätzung, sowie das Lehrerurteil über Offenheit und Ruhe der Kinder signifikante Anteile der abhängigen Variablen «Imaginative Fähigkeit». Offenheit als Faktor der Hypnotisierbarkeit bezieht sich auf soziale Kooperation, welche von der Sozialpsychologischen Theorie als wichtiger Faktor der Hypnose bezeichnet wird, Ruhe bezieht sich auf die Absorptionsfähigkeit, welche von der Neodissoziationstheorie als wichtige Korrelation zur Hypnose gesehen wird.

Im Vortrag wird die Tisc-k vorgestellt, auf die Relevanz der Ergebnisse für die klinische Tätigkeit hingewiesen und im Zusammenhang mit neueren Arbeiten zum Thema diskutiert.

Submitter: Letizia Gauck

Number and title: 7779 - Hypnosystemic methods to enhance the development of potential

Even high potential does not automatically translate into high performance. Many factors enhance or hinder the realization of talents, interpersonal as well as intrapersonal factors. Societies are naturally interested in developing as many potentials as possible, and for individuals, underachievement can result in a low self-esteem, little motivation and less well-being. You will be given an overview of what is important when diagnosing and helping clients who underachieve.

Self hypnosis can be helpful in dealing with the personal factors such as motivation, goal setting etc. Methods focusing on inter- and intrapersonal aspects of the system will be presented, which are used to address obstacles in the family, at work and also at school.

We will work with trances, hypnosystemic methods, case studies and group discussions.

Submitter: Marco Scaglione

Number and title: 7780 - Hypnotic communication for periprocedural analgesia during transcatheter ablation of atrial fibrillation

Background. Hypnosis is emerging as a promising therapeutic strategy for pain control. No data are available in literature about the use of this technique in a large sample size undergoing atrial fibrillation (AF) ablation.

Methods. 100 consecutive AF patients referred to our centre for transcatheter ablation, underwent hypnotic communication for periprocedural analgesia (Group A). A matched group of 100 patients undergone conventional analgesia approach was selected as control (Group B). Patients signed written informed consent for video recordings and reproduction. Procedural data, anxiety, perceived pain, perceived procedural duration and administered analgesic drugs dosages were compared using validated score scales.

Results. Hypnotic communication resulted in a significant procedural-related anxiety reduction (5.2±1.7 Vs 0.8±0.6, "P < 0,001") and perceived procedural duration (105±39 min Vs 76±32 min, "P < 0,001"). Group A patient reported a painless procedure in 82.2% ("Pain scale ⩽ 2"). As regard analgesic drug Group A used only Fentanest and Paracetamol. Fentanest dosage did not differ between Group A and B (0.145 Vs 0.149 mg, P NS). Group A reported higher Paracetamol dosage (832 Vs 361 mg, "P < 0,001"). Group B used also Midazolam (2.1 mg), Propofol (40.2 mg) and narcosis and intubation was required in 3 patients. Total radiofrequency (RF) delivered time did not differ between Group A-B (26.2 Vs 26.9 min, P NS) as well as mean RF power (35.7 Vs 35.8 W). No periprocedural complication occurred in both groups.

Conclusion. Hypnotic communication during AF ablation was related with significantly reduced procedural analgesic drugs dosage, perceived pain, perceived procedural duration and anxiety without affecting total radiofrequency delivered time and procedural safety.

Submitter: Marco Scaglione

Number and title: 7781 - Hypnosis as coadjutant approach to analgesia in cardiac pacing. A single centre experience

Background. Hypnosis is emerging as a promising therapeutic strategy for pain control during electrophysiological procedures. A combination of local anaesthesia and conscious sedation is often required during cardiac pacing procedures. Few data are available in literature about hypnosis as peri-procedural analgesia strategy during device implantation procedures.

Methods. 20 consecutive patients referred to our centre for cardiac pacing procedures (2 subcutaneous ICD, 2 lead-less pacemaker, 10 trans-venous pacemakers, 6 trans-venous ICD) were prospectively enrolled. Patients signed written informed consent for video recordings and reproduction. Anxiety, perceived pain, perceived procedural duration and administered analgesic drugs were evaluated by validated score scales.

Results. All patients reported nearly anxiety free and painless procedures (anxiety score ⩽ 1, pain score ⩽2). Perceived procedural duration was systematically shorter than real (mean difference 21,2 ± 3,1 min). All procedures were performed under local anaesthesia. Lead-less PM and subcutaneous ICD implantation patients received a small dose of Fentanest intravenously (mean 0,1 mg). No systemic analgesic drugs were administered in conventional pacemaker patients. No periprocedural complication occurred. Surgical incision and device pocket healed as expected. To the mean follow up of 6 ± 1 months no anomalies occurred concerning the device.

Conclusion. Hypnotic communication is a strong coadjutant approach to analgesia in cardiac pacing procedures. It strongly improved periprocedural anxiety and pain control as well as procedure related discomfort perception. While waiting for more robust data, we suggest hypnosis could be a reliable, inexpensive and well tolerated tool to obtain complete pain control and comfort during cardiac pacing procedures.

Submitter: Olivier Garandeau

Number and title: 7782 - Transe Graphique

Comment aller au delà du simple dessin automatique vers une véritable "Transe Graphique", témoignant des méandres du processus hypnotique, véritable feedback de la séance en cours. De l'induction flash à la possibilité de rapide autonomisation du patient, cet atelier pratique et ludique est également enrichi de cas cliniques.

Submitter: Paola Brugnoli

Number and title: 7783 - Neurobioethics in hypnotic communication

Scientific developments in neuroscience have generated potentially contentious issues. These developments affect clinical realms of neurology, psychiatry, psychology. Philosophical issues have both guided such inquiry and are essential to understanding the complex intersection of neuroscientific progress and ethical domains of research, medical practice and the social impact of these enterprises. These questions are foundation to the ethical issues inherent to progress in basic and clinical applications of neuroscience in hypnotic therapy. Some of these debates include whether particular interventions represent treatment or enhancement, the use or misuse of psychological interventions in clinical practice and the scope and tenor of current and future research directions.

The respective abilities in terms of hypnotic communication can be easily learned. Confident empathic attention and a calm, understanding and figurative language narrowing the focus on positive emotions and positive change, which have been shown to improve the patient's chances of healing, are of particular importance. Proper clinical hypnosis goes one step further: it makes explicit use of suggestions, trance, and trance phenomena.

This review of scientific researches on hypnotic communication adopts an interdisciplinary approach to the ethics of neuroscience and the neuroscience of ethics. It is essential to integrate the methodology based on sound philosophical and anthropological principles which are centered on the human person.

This will stimulate cognitive scientists to seek points of contact between the neurosciences and a philosophical-anthropological vision centered on the human person.

Submitter: Lida Nikfarid

Number and title: 7786 - Loving kindness hypnosis for nursing students and their compassionate care

Introduction and aim: While in nursing education there is an increasing lack of intention and attention to teach artistic and humanistic approaches of preparing nursing student, there is professional call for nurses to practice with compassion and loving kindness. The approaches to give such a skill to students are being developed. In this study we assess the efficacy of a meditation and hypnosis based program for improving compassionate care in junior nursing students.

Methods: In this randomized clinical trial study, 70 junior nursing students, selected by a convenience sampling method, randomly assigned to the intervention group and control group in 2019. Data collection tool was The Burnell Compassionate care tool, Persian version. The intervention was a 12 session of hypnotherapy (two in each week) for each group. The hypnosis for the intervention group was the Loving kindness meditation and for the control group it was only a guided relaxation imagery. The scores of the tool in each group. Data analysis was performed using the SPSS software version 18 and t test and Chi-square test.

Results: The study results showed before the intervention, the mean scores were of the group were not significantly different, but after the completion of the sessions, the mean scores of the intervention and control group were 3.72±0.5, 2.82±0.8 respectively. There was a significant difference between these two scores ($p < 0.001$). About all the factors in compassionate nursing care, there was a significant difference between the importance and extent of compassionate nursing care.

Conclusion: The results support hypnosis-based interventions as an evidence based approach to improve skills of compassionate and caring in nursing education. Hypnosis-based interventions has no adverse effects, is not expensive. It should be considered as a method of teaching in nursing schools.

Submitter: Ina Blanc

Number and title: 7787 - Finding creative ways for more personal empowerment

Workshop

Finding creative ways for more personal empowerment

Ina Blanc & Sabrina Mattle

How to enhance our well-being, performance and creativity with methods of hypnosis and self-hypnosis? How to connect to our inspiration and resources with mental exercises? In various fields of psychology as in child and youth psychology, sports psychology or clinical psychology the focus of the treatment lies in achieving a certain goal (like reducing pain, taking more time for yourself, maintaining motivation for cancer therapy, achieving a better quality of life, performing better, or anything else). In this workshop we will introduce you to creative ways of working with such goals and to methods of hypnosis which help to reach them more easily. The workshop will be very interactive in order to give you the possibility to try out these creative methods for yourself.

Submitter: Dina Scagnetti

Number and title: 7790 - Hypnose, Anteile-Arbeit & innere Landkarte

Es werden Erfahrungen mit hypnotherapeutischen Interventionen für den Zugang zu inneren Anteilen gesammelt. Die Ego States symbolisieren wir mit einer bildnerischen Darstellung der inneren Landkarte. Ziel des Workshops ist es, die Kommunikation der Anteile zu erforschen und einzuüben.

Submitter: Maria Høier

Number and title: 7794 - Reclaiming Humanity moving towards Oneness

These are times of a global shift in environmental issues. We are now more than ever focusing on how we are treating our planet and how we are treating each other. The UN is making a huge contribution by acknowledging every company that decides to take responsibility through on or more of the 17 developmental goals.Greta Thunberg is using her voice and engaging millions of people to become more aware and shifting the focus on what I need right now towards how can I ensure and support the growth of my children and grand children. The shift is a generational shift. Our teenagers will be chosing workplaces by the standard of their company environmental values over the offered salary and safety they are provided. We are facing a massive shift in our work field, a lot of jobs will be lost and new ones that we not yet have the knowledge to predict will be born. The future human will continue to have high pressure in producing and at the same time emotional intelligence and cognitive flexibility combined with radical transparency has never been more appreciated, and necessary. As our reliance on technology exponentially increases, so does our need for human values by the people that are programing our devices.

For now we are experiencing a shift in consciousness, as therapists. Our patients become more aware and they demand more presence from their guide. It is crucial that we as professionals are able to meet these changes within ourselves too. We need to dare face the fear on our inside in order to be able to meet our clients in a truthful empathetic role. It is only by connecting to our own duality we will be able to guide in collective wisdom.

This will be done in a playful setting, allowing the participants to let their guard down and feel their own truth. I will be using a method that allows any dissonance to dissolve. The participants will work in groups of three and also be guided as a whole group by me. I will work

with valuers and nature as medicine. How we cycle our integrity, emotions and functions with nature. We are on the same team, not competitors. I have worked with this method for 5 years and it has never failed to bring astonishing results. It is a great way of looking behind our artificial world and discover the real essence within.

The outcome will be to bring more awareness into our thoughts and emotions as practitioners and also be able to leverage our results in clinical practice.

Submitter: Linda Harel

Number and title: 7795 - Healing, Curing and Hypnosis

Healing and curing are two completely different processes but the terms are often used interchangeably.

This presentation will provide definitions of healing and curing and an outstanding medical research on the connection between emotions, bodily sensations, mood disorders and somato-sensory initiated alteration of emotional processing. The findings show that monitoring the topography of emotion-triggered bodily sensations might not only provide a unique research tool but also a biomarker for emotional disorders.

A summary of how hypnosis may assist in healing and curing processes is presented.

Submitter: J. Philip Zindel

Number and title: 7799 - Hypnose in der Therapie: Eine Beziehungssache

Wesentlich an der Hypnose sind nicht die richtigen Techniken, sondern die richtige Gestaltung der Beziehung. Durch die Induktion ändert sich die Beziehung fundamental. Die daraus entstehende hypnotische Beziehung ist eine einzigartige Form von Beziehung, die auch eine besondere Form von Kommunikation erfordert: Zum einen ist sie eine sehr innige, symbiotische Beziehung im Rahmen der therapeutischen Abstinenz. Gleichzeitig gelangen die animalischen und damit auch ethologischen Aspekte in den Vordergrund. Schliesslich beruht sie auf einer therapeutischen Allianz, die das Explorieren unbewusster Ressourcen und Potentiale zum Gegenstand hat.

Submitter: J. Philip Zindel

Number and title: 7800 - L'attitude strictement exploratrice en hypnose : à la fois un prérequis et une méthode

Le principe de " l'exploration cohérente et interactive" considère toute suggestion ainsi que toute autre action en hypnose non comme une incitation plus ou moins subtile visant une forme de comportement, mais comme question implicite posée à l'inconscient du patient : „Quelle est ta réaction si je... ? " Cette réponse inconsciente raconte toute une palette d'attitudes inconscientes qu'il s'agit de mieux comprendre. L'attitude exploratrice se refuse à prédire en quoi que ce soit ce qui sera bon pour le patient, et elle s'engage entièrement dans une recherche systématique et empathique des ressources et potentiels encore inactifs dans l'inconscient du patient. Cette attitude de non-savoir présente de nombreux avantages : Elle est la plus respectueuse de la personnalité du patient et la plus efficace pour accéder aux ressources réelles. Elle implique le patient dans une recherche de soi-même, et elle évite la formation d'attentes irréalistes.

Submitter: J. Philip Zindel

Number and title: 7801 - „Hypnose im Raum“ : Zwei hypnotische Techniken

Etwas vom Ersten, was sich beim Eintreten in die Trance verändert, ist das Raumerlebnis – eine Tatsache, die sich sowohl neurobiologisch nachweisen wie auch durch das subjektive Erleben bestätigen lässt. Die mittlerweile recht verbreitete „3D-Übung“ wie auch die Übung „Den Raum füllen“ beschäftigen sich mit der Nutzung der erstaunlichen Möglichkeiten der Arbeit mit dem Raumgefühl. Beide Methoden aktivieren unbewusste Ressourcen. Sie werden vorgestellt, demonstriert und auch im praktischen Üben erlebend kennengelernt.

Submitter: J. Philip Zindel

Number and title: 7802 - Identifikation als therapeutisches Werkzeug in der Hypnosetherapie

Sowohl die einzigartige Beziehungskonstellation der Hypnose wie auch bestimmte Charakteristika der Trancezustände öffnen besondere Möglichkeiten für gegenseitige Identifikationsphänomene, die therapeutisch von grossem Wert sein können. Hypnotische Methoden wie die „hypnotische Inszenierung des Patienten", die „Modelltrance" oder die „aktive Introjektion des Therapeuten in Hypnose" ermöglichen oft einen konstruktiven Ausweg aus schwierigen Situationen. Nach kurzen, theoretischen Ausführungen werden die Methoden als Gruppentrance oder Demonstrationen vorgestellt.

Submitter: Donald Moss

Number and title: 7804 - Heart Rate Variability Training as an Adjunct to Hypnosis and Psychotherapy

Heart rate variability (HRV) has been a medical index for thirty years for physical and emotional illness. Low HRV predicts risk for further cardiac illness and even death after heart attack. HRV is lower in depression, anxiety states, PTSD, asthma, fibromyalgia, and other illnesses. Conversely, high HRV is a marker for aerobic fitness, optimal health, vitality, and resilience.

This presentation will define heart rate variability, review the physiology of HRV, and introduce potential uses for HRV training as adjunct to hypnosis-based therapies and psychotherapy. Participants will also observe changes in respiration and heart rate variability during hypnotic induction.

HRV biofeedback has applications in health psychology, psychotherapy, medicine, and optimal performance. Only in the past twenty years have practical technologies developed to provide real time feedback on heart rate variability. HRV biofeedback has been applied effectively for treating many mental health and medical problems but has proven equally useful for optimal performance and coaching interventions. Cosmonauts in the Russian space program, soccer players for the World Cup Milan team, and performers in a variety of Olympic events have benefited from training to achieve high levels of HRV.

The presenter will demonstrate inexpensive entry level HRV biofeedback equipment, including the inexpensive emWave® and Inner Balance® devices from HeartMath, and also a higher end multi-modal biofeedback system for more advanced use. The presenters will describe two to three cases in which HRV was integrated with hypnosis treatment to produce an optimal therapeutic effect: one adult woman with traumatic brain injury, one child with panic disorder related to separation, and if time allows one adult woman with cancer.

Submitter: Rainer Blumenau

Number and title: 7805 - Spass im Alltag – Erfahrungen hypnosystemischer Arbeit im ambulanten kinder- und jugendpsychiatrischen Dienst

In diesem Workshop werden in der Praxis bewährte hypnosystemische Haltungen und Fertigkeiten auf den Grundlagen des «Bieler Modells» dargestellt.

Das «Bieler Modell» entwickelte sich in meiner 30jährigen Arbeit mit Kindern und Jugendlichen und deren Familien in öffentlichen Diensten und privater Praxis.

Wie werden verschiedene Aspekte konkret beim Triageprozess, beim Erstgespräch, im weiteren Verlauf der Therapie und beim Abschlussgespräch sichtbar?

Wie können wir, zur Unterstützung von uns Therapeutinnen und Therapeuten, und auch direkt als Intervention gegenüber dem Klientensystem in schwierigen therapeutischen Situationen, das eigene Team einsetzen?

Wie können wir bei dieser anspruchsvollen Arbeit Spass haben?

Anhand von Praxisbeispielen aus einem breiten Diagnosespektrum schauen wir auf den Prozess, den Verlauf einer Therapie, bis und mit Evaluationstelefonat drei bis sechs Monate nach Therapieabschluss. Oder aber, wir fokussieren unsere Aufmerksamkeit auf bestimmte Interventionen oder Therapieabschnitte.

Als TeilnehmerInnen bestimmen Sie den Schwerpunkt unserer Arbeit mit. Wir arbeiten mit Rollenspielen, Dramatisierung, Inszenierung, Humor, praktischen Übungen und Videos zu verschiedensten Therapieverläufen sowie verschiedenen Diagnosen (Anorexie, Anpassungsstörungen, Zwang, psychosomatische Störungen etc.).

Ziel dieses Workshops ist, Kreativität und Spass in der hypnosystemischen Arbeit anzuregen.

Submitter: Stefan Hammel

Number and title: 7807 - The last 24 Hours of Life – How we can Help Patients to Die in Peace

Hypnotherapeutic Approaches with Dying Patients and their Families

What can we do for dying people and their families except for palliative care? What is helpful in communication during the last hours of life?

The perspective of the workshop is twofold, bringing into dialogue the millennium-old pictorial traditions of religion with techniques of hypnotherapy like pacing- and leading strategies, the use of metaphors and the utilization of values and convictions of the dying patients and their families.

Questions addressed are:

- How can we communicate with dying patients – verbally and nonverbally?
- Which words can we choose that they will understand and find relevant?
- How can we perceive and interpret nonverbal responses from coma patients?
- How can we ease the fears and griefs of dying patients?
- How can we reduce their pain or breathing problems while we speak?
- How can we help dying patients to let go of life instead of struggling for survival?
- How can religious imagery (shepherd, eagle, pilgrimage, heaven as home or meeting place) be used by helpers and for dying persons without any strong religious conviction?

The workshop gives case examples of how hypnotherapeutic and spiritual help can be combined to help the emotional and somatic need of the patient – often in non-religious contexts and by non-religious staff respectively in the encounter of patients without any clear religious background.

The workshop reflects on criteria of helpful communication with patients who may be unable to speak or clearly show their needs.

It demonstrates various interventions suitable for reducing their somatic and emotional sufferings.

It gives metaphors and rapport strategies which have been found useful by patients and their relatives and explains their effects.

Submitter: Stefan Hammel

Number and title: 7847 - Hypnosis and the Art of Therapeutic Storytelling

It seems that storytelling has always been a part of hypnotherapy. Milton Erickson was a true master of finding and chosing therapeutic stories and tayloring them tot he needs of his clients. Without doubt, the use of metaphors and anecdotes, known since the times of the ancient orient, has stayed one oft he most effective forms of consultation till this day. Stories can be introduced by the therapist or they can be one of the client's which the therapist has picked up and reframed. The conversation partners can also develop them together.

But how do I discover a useful story and how do I narrate them? What makes a story useful for therapy after all? This seminar will give you techniques for developing useful therapeutic stories spontaneously during a session and for presenting them in a way so they can unfold their therapeutic potential.

It is the target of this presentation to give impulses on how to...

- invent therapeutic stories in line with your clients' needs and his or her view of life
- find anecdotes opening up new options for unique situations at any time
- formulate narrations for achieving therapeutic results
- transform problem-focussed metaphors told by clients into solution-focussed metaphors that integrate into their construction of reality.

The presentation also reflects the use of conversational hypnosis, which - as it occurs - can offer ways of achieving the same outcomes as classical hypnotherapy without formal hypnosis. After all, trance, rapport and suggestion are ubiquitous everyday phenomena rather than merely characteristics of hypnotic work, and the effects of hypnotherapy should therefore be achievable without the ritual of induced hypnosis.

The presentation takes a look at our nighttime and daytime dreams as the prototype of all therapeutic stories and a basic way of bringing order to our mental and social experiences.

The cinema in our head helps us to process impressions, reduce stress, clarify goals, examine possible choices and gain motivation to follow the path we ultimately choose. They are the mother tongue of our unconscious mind, whereas cognitive and analytical discussions are foreign languages to it. Therapeutic stories are seen as guided dreams whose purpose is to exert a healing influence on the body, mind, spirituality and social system.

The outline of the presentation will include practical examples on how to use storytelling in therapy with PTSD, depression, in health care, children and couple therapy.

Submitter: José Cava

Number and title: 7849 - Hypnosis before hypnosis - How to enhance hypnotic responsiveness

It is well known and supported by research that hypnotic responsiveness is very variable among human beings, can be trained and, similar to placebo effect, it can be altered by what clients´ think and expect about hypnosis. What clinicians say and do before a formal hypnotic induction can help their clients´ getting better understandings and expectations regarding hypnosis, and enhance their hypnotic responsiveness. The higher the hypnotic responsiveness the greater the client´s expectations, motivation and commitment to therapy.

On the other hand, clinicians´ expectations and self-confidence can also have a major impact in their client´s hypnotic responsiveness. Milton Erickson was a master in observing other people´s behaviors and in seeding ideas and suggestions for hypnotic phenomena long before he asked for them to happen formally or without overtly asking for them.

In this workshop we will learn, in a very practical way, some of the different strategies and techniques that can be used out of the formal hypnotic process aimed to enhance hypnotic responsiveness, such as:

- How to adapt ideas and facts regarding hypnosis to clients.
- How to facilitate the elicitation of hypnotic phenomena.
- How to choose the hypnotic phenomena to try.
- How to enhance therapist´s own expectations and confidence.

Submitter: Hans Wehrli

Number and title: 7859 - Hypnose optimal in die Arztpraxis integrieren

Hypnotisches wirkt vom Eintritt in die Praxis bis zum Verlassen derselben.

Als Arzt sich dessen bewusst zu sein, ist schon einmal eine gute Basis. Darüber hinaus noch die Kommunikation und den Kontext so zu gestalten, dass die Droge Arzt in einem erweiterten Sinne optimal ihre Wirkung entfalten kann, ist der Inhalt dieses Workshops.

Nebst formeller Hypnose geht es vor allen auch darum, die kleinen natürlichen Trancen, die in einem gewöhnlichen Anamnesegespräch entstehen, zu nutzen, von der "Raisonanz" in Resonanz zu kommen und spielend auch immer wieder zwischen den Ebenen des Erzählens und Erlebens zu wechseln.

Wie kann ich Kommunikation und Kontext so gestalten, dass sich wirksame Heilungsperspektiven eröffnen? Welchen Platz hat dabei die formelle Hypnose?

Die Arztpraxis ist der ideale Ort, um heilsame Suggestionen ungezwungen, organisch einfliessen zu lassen. Die neuere Placebo-Forschung zeigt eindrücklich, wie wirksam, kostengünstig und auch zeitsparend das sein kann. Sie beweist vor allem auch bedeutende Effekte auf somatischer Basis sodass man sich fragen könnte, ob die Bezeichnung Placebo ("ich werden gefallen") noch adaequat ist, oder ob man eher schon von Sanabo ("ich werde heilen") sprechen könnte.

Das Ziel dieses Workshops ist, interaktiv und übend, Anregungen zur Weiterentwicklung des persönlichen Kommunikations- und Hypnosestils zu vermitteln.

Submitter: Nadine Memran

Number and title: 7860 - Douleur chronicisée et Cognition incarnée

Les patients douloureux chroniques consultants une structure d'évaluation et traitement de la douleur chronique et rebelle sont persuadés que la sensation douloureuse décrite est localisée uniquement au niveau du corps . Certains d'entre eux ont des plaintes et des symptômes non expliqués par la médecine et pour lesquelles les émotions pourraient jouer un rôle .

Une première démarche éducative est d'expliquer à ces patients les rapports entre le cerveau et le corps , avec les particularités du rôle des émotions dans la douleur qui se définit comme un état « bio psycho social»

L'accompagnement en hypnose de ces patients peut s'appuyer sur différentes méthodes parmi lesquelles celles préconisées par l'ISP (Integral Somatic Psychology) de Raja Selvam

Cette méthode présente une approche particulière qui se base sur l 'incorporation de

l 'émotion (embodiment) . L'émotion a ici une définition plus large qui peut être primaire sous forme de colère ou de tristesse (fréquemment rencontré dans la douleur chronique) mais également secondaire , comme par exemple « je me sens mal ».

Des exercices dérivés de la méthode ISP sont présentés avec des indications également efficaces pour l'auto hypnose

Submitter: Julie Alayrangues

Number and title: 7863 - Assessment of physiological changes during hypnotic trance: a magnetoencephalography study.

Introduction : The practice of hypnosis in clinics has increased in order to improve patients' medical care, however, the underlying mechanisms of hypnosis remain unknown. We explore the potential physiological changes of the brain, the heart and the respiratory activities during different hypnosis states. Specifically, we compare the oscillatory responses observed during induction, hypnosis trance and post-hypnosis trance.

Methods : The participants' brain activity was recorded by magnetoencephalography (MEG). We use the MEG for its great signal quality and because it offers a better comfort to participants, which is essential for an effective hypnosis. In this study we have developed a new paradigm including three hypnosis sessions separated by an attentional "stroop" task to verify the end of the hypnosis state between each session.

Results : Preliminary results show an increase in theta power during induction. This power remains high during trance duration and decreases in the post-hypnosis state. In addition, during the hypnosis blocks, we observe variations of the heart and respiratory rates that could be related to cardiac coherence.

Theta is associated with a significant number of cognitive activities and states (e.g. attention, orientation, decision making, emotion ...). However, theta seems to play a more specific role in enhancing declarative memory coding and retrieval and in emotional limbic circuits. For these reasons, certain authors suggest that hypnotic responses may require access to limbic circuits which are facilitated by theta oscillations (e.g., feels like for a body part to feel "light", or suggestion of reliving a pleasant activity).

Conclusion : Our data suggest that the hypnotic state can be identified and measured by changes observed in the brain activity. We will improve our analyses in order to determine in real time when a participant is in a hypnotic trance. Furthermore, we will study the link between the brain changes and the cardiac coherence observed during the hypnosis state.

Submitter: Anne M. Lang

Number and title: 7864 - Hypno-Vorgehen mehr als nur der Tool-Koffer – Hypno-Wissen für die gesamte Durchführung!

Der Workshop stellt 4 grundsätzliche Fragen, um die „ganze" Therapiearbeit übergreifend hypnotherapeutisch zu machen. Schauen wir nur auf Hypnotherapie - Interventionen und das therapeutische Tun und vernachlässigen wir Kontextsuggestionen, Verfahrenssuggestionen, die Implikationen unseres persönlichen Vorgehens, dann greift das zu kurz.

Antworten auf folgende Fragen sollen das verdeutlichen. Beispiele belegen das im Workshop.

1. Wie widerstehe ich der mitgebrachten „Problemtrance" des Klienten?

→ Antworten: Die im Problem liegende Lösung erkennen und finden lassen; eine vom Problem ausgehende Zielklärung ausrichten; die Suggestion der Problemtrance erkennen; Arbeiten im Ressourcenraum anstelle der traditionellen im Problemtrancebereich. usw.

2. Wie komme ich dazu zu utilisieren?

→ Antworten: mit konstruktivistischem Geist d.h. der Beschäftigung mit Epistemologie, Sprachwissenschaft und damit wie komplex Situationen und ihre Einordnung sind; sich schon einleitend sagen: gut, dass es passiert ist...; der Satz kann meist gut weitergeführt werden. usw.

3. Wie komme ich dazu, einen Ressourcenschwenk zu veranlassen?

→ Antworten: Entwicklung geht mit dem Wunsch, der Vorstellung nach Vorne und in eine Zukunft, die selbstwirksam gestaltet wird. Schon allein in der Zukunftsvorstellung sind Ressourcen enthalten. Darin sind auch individuellen Antworten erhalten. usw.

4. Wie erkenne ich Kontexttrance und löse sie auf?

→ Antworten: z.B. der des Kontextes von Psychischer Krankheit: mit Normalisieren; Phänomene in Relation und Bezug setzten; die gebrauchten Konstrukte wie Diagnosen erweitern und erkunden in Verhaltensweisen, ihrer systemischen Vernetzung, Ausnahmen von Problemssituationen und dem Beschriebenen. Usw.

Submitter: Haluk Alan

Number and title: 7865 - Hypnotic Reprocessing Therapy

Hypnotic Reprocessing Therapy, HRT; It is a holistic approach consisting of bidirectional stimulation and some hypnotic techniques working together with conscious and subconscious mind. In this technique, desensitization of the problem is achieved by some hypnotic techniques in combination with bidirectional stimulation.

As traumatic events or negative life experiences lead to blockage in the information processing system, a new processing is required in this case. Without reprocessing, the process remains ego-dystonic. The goal is to make the process ego-syntonic.

Psychological dysfunction along with low self-esteem and self-efficacy elements originates from stored information in the nervous system. This information is obtained through bi-directional stimulation and some hypnotic techniques. Reached information is processed and analyzed. As the reprocessed information is transformed, the image of the target event changes. As processing continues the viability of the image decreases, the content changes, and even the image is often lost. This is not limited to the change in image; the change in the picture also affects emotional and cognitive processes and body sensation. The initial level of distress of the target event or image is no longer disturbing after processing. The client expresses this in concrete terms with the SUD (Subjective Units of Distress) level. The process becomes ego-syntonic. Improvements in self-belief begin when desensitization is achieved.

Hypnosis has a special place in both theory and practice of HRT. HRT believes that a therapy approach should include thoughts, feelings and behaviors as well as body sensations and unconscious mind and aim to change in these areas in order to target a complete treatment. Hypnosis is the second mainstay of HRT applications, both in terms of providing a new experience instead of the old experience and developing alternative perspectives. Hypnosis is involved in every stage of the technique, from the double-sided induction method in the application phase to the imaginary techniques and posthipnotic and auto- hypnotic applications.

HRT can be used in the following diseases; Panic Disorder, Anxiety Disorders, Depression, Complicated Mourning, Disturbing Memories, Phobias, Pain Disorders, Eating Disorders, Stress Control, Addictions, Sexual and / or Physical Assaults, Sexual Dysfunctions, Migraine, Complex and Simple Trauma and PTSD...

Submitter: Gaby Golan

Number and title: 7868 - Group Hypnosis: The uses of hypnosis in groups in medical and psychotherapeutic settings.

Group hypnosis may be used in a medical setting, as well as in a psychotherapy setting such as CBT, Habit control group hypnotherapy, Dynamic group hypnotherapy or medical setting. It allows the professional hypnotist to work simultaneously with a group of patients and to facilitate the group dynamic in a dynamic group psychotherapy.

The workshop will focus on the benefits and the faults of group hypnosis and will include

Submitter: Enrico Facco

Number and title: 7873 - Hypnosis for surgery, dentistry and invasive procedures

Hypnosis is a physiological mind activity characterized by focused attention, absorption, dissociation and plastic imagination. In the early 19th century, several hundred surgical interventions were described with hypnosis as the sole anesthetic, in an epoch when no anesthetic drugs were available; then hypnosis was prejudicially abandoned and forgotten following their introduction.

In the past two decades, an increasing number of studies on hypnosis has shown its capacity to modify the activity of the prefrontal cortex, default mode network and pain neuromatrix (including the anterior cingulate cortex, amygdala, thalamus, insula and somatosensory cortex) and increase pain threshold up to the level of surgical anesthesia. Furthermore, hypnotic analgesia also prevents pain-related cardiovascular response leading to an effective patient's protection from surgical stress.

Different hypnotic suggestions may be delivered to yield relaxation, absorption, hypnotic focused analgesia and detachment from both the operating theater and the part of the body to be operated on.

The results of randomized controlled trials available in the literature provides a clear evidence of its significant effects on perioperative emotional distress, pain, medication consumption, physiological parameters, duration of surgery and outcome. Hypnosis may be used as sole anesthetic in minor surgery and invasive maneuvers and may be superior to pharmacological anesthesia in selected patients. It may be also used as an adjuvant technique to be associated in loco-regional anesthesia, pharmacological sedation and general anesthesia.

Hypnosis, unlike any other therapeutic tools, does not call for drugs or equipment, is always available, has no costs and is not burdened with proved adverse events, when administered by competent professionals: therefore, it can help improving both the overall quality of care and the cost/benefit ratio. Therefore, its use should become an essential component of

professionalism of anesthetists, surgeons and dentists, s well as all other caregivers providing invasive interventions.

The workshop will outline the neuropsychogical aspects of hypnotic analgesia and will show how to check patients' hypnotic ability and get an effective sedation and surgical analgesia.

Submitter: Rainer Schaefert

Number and title: 7877 - Gut-directed hypnotherapy: Overview and clinical practice

Objectives: The aim of our workshop is to provide participants with a theoretical overview of gut-directed hypnotherapy (GDH), its effects on gut-brain interactions, and the evidence-base for its efficacy. Equally important will be the practical aspects for daily clinical practice. The attendees will be actively motivated to experience GDH according to the Manchester protocol by themselves and to discuss all the related issues.

Indications and settings: GDH has been shown to be effective in several functional gastrointestinal disorders (FGIDs), especially in irritable bowel syndrome (IBS). Also in inflammatory bowel diseases, especially ulcerative colitis, promising results have been found. GDH is highly adaptable and has proven efficacy in patients of all ages, either performed in individual or group sessions. It is relatively time intensive (6-12, 60-min sessions) and needs to be practiced regularly at home. Nevertheless, it is well accepted.

Mechanisms: FGIDs defined by the Rome IV criteria are considered as disorders of the gut-brain interaction associated with a combination of different factors including motility disturbance, visceral hypersensitivity, altered mucosal and immune function, altered gut microbiota, and altered central nervous system processing. GDH appears to modulate brain-gut pain pathways and sensorimotor function.

Effects and benefits: 1984 a pivotal study by Peter Whorwell indicated the potential of GDH in IBS treatment. Subsequent studies have strengthened these findings. In FGIDs a response rate between 24-73% has been shown. Besides an improvement of intestinal as well as extra-intestinal symptoms, associated factors ameliorate: The need for medication and for healthcare reduces, the socioeconomic burden including absenteeism decreases; patients develop improved resilience and better self-management skills; overall the quality of life as well as psychological and cognitive functions improve. 5 randomized controlled studies (n=280) could demonstrate the superiority of GDH to different control conditions with a number needed to treat (NNT) of 5. This is at least as good as the impact of standard medical treatment.

Moreover, the effects are long-lasting, showing adequate symptom relief during 12 months (NNT=3). GDH is safe and highly effective even in otherwise refractory situations.

Conclusion: In patients with different FGIDs GDH is a therapeutic tool to alleviate efficiently their symptoms and to reduce their implications.

Submitter: Antoine Bioy

Number and title: 7879 - The Development of the Therapeutic Alliance during the First Five Hypnotherapy Sessions

The therapeutic alliance is a principal element that allows the dynamics and effects of psychotherapy to be analyzed. In the past half-century, many studies have explored various psychotherapeutic approaches, including psychoanalytic, cognitive-behavioral and systemic psychotherapy, but hypnotherapy has not been addressed. This research presents the first analysis using current methods of verifying and understanding the dynamics of change in psychotherapy. Luborsky et al.'s (1996) revised Helping Alliance Questionnaire (HAq-II) was administered to 59 patients: 40 women and 19 men, average age of 41.95 years (SD = 12.95) in treatment with psychologists and psychiatrists using Ericksonian hypnosis. Statistical analysis was performed (Student's t-distribution, Wilcoxon signed-rank test, ANOVA).

Our results suggest that the dynamics of the alliance in the first sessions of hypnotherapy involve factors related more to the therapist's adjustment to the patient than to the progress the patient makes in these initial sessions. The use of hypnosis had little effect on the alliance as experienced by the patient, but it had a significant effect on how therapists perceived the treatment: hypnosis increased the factors related to the emergence of a very good therapeutic alliance and reduced those related to the slowing down or hindering of its development. In other words, therapists came to have a more favorable view of the alliance when hypnosis was used, which suggests that its use reassured them about their method, abilities, patient commitment to therapy and the quality of the relationship. This was also the case for self-hypnosis: its use did not improve patients' experience of the alliance but it did improve the therapists' experience of it, in particular at the very beginning of the treatment. One hypothesis, which would need to be verified, is that proposing self-hypnosis to the patient is reassuring for the therapist: because this practice invited the patient to become an active participant in the treatment, the therapist has a more positive experience of the alliance,

independently of the patient's experience of it (since the proposal and use of self-hypnosis did not change how the patient experienced the alliance or the quality of the work accomplished).

Luborsky, L., Barber, J. P., Siqueland, L., Johnson, S., Najavits, L. M., Frank, A., & Daley, D. (1996). The revised helping alliance questionnaire (HAq-II): psychometric properties. The Journal o

Submitter: Antoine Bioy

Number and title: 7880 - Self-hypnosis, Self-awareness and weightlessness: first results

This research was made possible thanks to a collaboration with "L'observatoire de l'Espace" of the National Center for Spatial Studies (nicknamed "french NASA"). The project was the study of self-awareness using the hypnotic method and the practice of self-hypnosis during weightlessness flight, initially designed to train astronauts in weightlessness.

The research consisted in exploring the notion of "self-awareness" in environments where the senses are modified or even altered. Body feelings are the main foundation of this "self-awareness", what happens when the body loses its bearings, oscillating in this case between 0G (weightlessness) and 2G (double gravity)? It is not only an intellectual curiosity: this "self-awareness" intervenes in the psychological and personality processes, in other words in the balance factors of every person. This exploration was done through the use of self-hypnosis, as a fine and rapid method of body perception present at each variation in gravity. A two-month training period was necessary to set up the method allowing this exploration. Regarding the expected concrete benefits, this type of study makes it possible to anticipate the repercussions of space flights or even extended stays in space on the psychic life of astronauts.

We present here the first results of this study. It was carried out according to a qualitative analysis of the experience of weightlessness and hypnosis sessions during this flight, using the "Interpretative Phenomenological Analysis" method (Smith, Flowers and Larkin, 2009). This analysis shows that "self-awareness" is strongly disrupted during these times of gravity variation, and this requires a significant effort for the mind to find a solution to get out of the impression of being a fragmented body (2G) and evanescent with a total loss of control (0G).

Attention processes and their implementation during self-hypnosis sessions partially channel these disturbances of self-awareness. Finally, weightlessness is a favourable environment for hypnotic transits that are both regressive and deep. This research - the only one of its kind carried out to date - calls for new developments, as the encounter between hypnosis and spatial studies is proving to be so fruitful.

JA Smith, P Flowers, M Larkin (2009) Interpretative Phenomenological Analysis. London: Sage.

Submitter: Ulla Engelhardt

Number and title: 7885 - Hypno & Friends: Leicht gem...8 mit der Kraft der 8 & Co' – eine Reise durch vier Länder mit Monstern, Kraftwesen und starken Kindern! - Ein kreativer Therapieablauf zum Auflösen von Ängsten und Blockaden bei Kindern und Jugendlichen

Im spielerischen Therapieablauf 'Leicht gem...8 mit der Kraft der 8 & Co.' tauchen die Reisenden auf der Suche nach ihren inneren Schätzen in eine Welt voller Abenteuer und Begegnungen ein. Liebevoll gestaltete Utensilien sorgen für eine fast märchenhafte Atmosphäre. Zudem bietet die Reiseleitung reichhaltige Methoden an und begleitet das Kind (Jugendliche und Erwachsene gleichermaßen!) auf dem Weg zum Ziel.

Im Kraftland werden zu Beginn der Reise in einem hypnotherapeutischen Selbstwerttraining die Fähigkeiten und Stärken des Kindes ausgegraben, wodurch es sich von Anfang an als angenommen und kompetent erlebt. Dermaßen gestärkt geht es dann mit der Selbsthilfemethode PEP im Sorgenland den Angst- und Sorgenmonstern an den Kragen. Im Wohlfühlland werden anschließend u.a. mit Teilearbeit mit Handpuppen und Embodiment-Übungen die inneren Kräfte weiter mobilsiert und verankert. So erreicht das Kind selbstbewusst und motiviert das Glücksland, wo es schon von einem Zauberwesen erwartet wird und zu guter Letzt die Glückstreppe zum Ziel besteigt.

Der Therapieablauf eignet sich besonders bei Prüfungs- und Versagensängsten, weiteren angstauslösenden Situationen, Lern- und Leistungsblockaden, Misserfolgen, Scham, Schuldgefühlen, Verhaltens- und Selbstwertproblemen oder belastenden Erfahrungen. Er hat sich auch als ein sehr wirkungsvolles Instrument beim Einstieg in die Therapie und für einen positiven Beziehungsaufbau zwischen KlientIn und TherapeutIn erwiesen.

Ziele der Reise durch die vier Länder können sein: Ausgraben, Nutzen und Verankern von Ressourcen, Aufspüren und Verändern einschränkender Glaubenssätze, Zielfokussierung, Stressbewältigung, Fördern von Anstrengungsbereitschaft, Ausdauer und Frustrationstoleranz, Erleben von Selbstwirksamkeit, Motivationsaufbau, Glaube an die eigenen Fähigkeiten, Selbstwertstärkung und Potenzialentfaltung.

In meinem Workshop führe ich Sie mit Vortrag, Demos, Übungen und Fallbeispielen Schritt für Schritt durch den Therapieablauf 'Leicht gem...8 mit der Kraft der 8 & Co.'. Sie entdecken neue Verbindungen bewährter kreativer Therapiemethoden, die Sie anschließend in Ihrer Arbeit mit Ihren KlientInnen altersgerecht umsetzen können. Auf Ihre Heimreise nehmen Sie einen 'Koffer' voller Tools mit, die, zu einem spielerischen Ablauf verknüpft, viele Möglichkeiten bieten, ressourcenorientiert und lösungsfokussiert kleine und große KlientInnen auf deren Reisen zu begleiten.

Für Ihre aktive Mitarbeit bringen Sie bitte Buntstifte mit!

Submitter: Ernil Hansen

Number and title: 7887 - Suggestions are effective even when given under general anesthesia

There is evidence that the central auditory pathway stays intact even in coma or general anesthesia. In a recent meta-analysis we have evaluated 32 RCTs that indicated positive effects of verbal suggestions during general anesthesia, namely moderate effects on postoperative medication and nausea, but not on pain. We performed a randomized, controlled blinded multicenter study on 385 patients undergoing surgery of 1-3 hours duration under standardized and controlled general anesthesia, where a taped 20-min text with positive suggestions were played repeatedly under controlled deep anesthesia. Postoperative pain (NRS) was significantly lower (by 25%) in the intervention group starting from admission to the recovery room until the next day. Number of patients needed to be treated (NNT) to avoid NRS≥3, the common threshold for pain medication, was 5.3. Accordingly, postoperative opioids were significantly reduced by one third. NNT to avoid opioid application was 6, an increase in the number of patients without need for opioids by 60-80%. Consumption of non-opioid analgesics were also reduced. Pain and analgesics use are not independent parameters; however, their correlation diminished by the intervention, suggesting development of pain tolerance. Further significant effects were observed on postoperative nausea and vomiting, on the need for antiemetics, and on recovery from anesthesia.

Our study provides evidence that meaningful suggestions reach and affect patients even under general anesthesia, and demonstrates a feasible, low-cost, non-pharmacological intervention to reduce medication and side effects of surgery and anesthesia. Compared to hypnosis for medical interventions the observed effects were at least as strong or perhaps higher with the suggestions given under general anesthesia, however with much less effort. In this study, the first after 18 years, the observed effects were much stronger than in the older trials reviewed in the meta-analysis, inter alia because of adequate group size and strict avoidance of

negations. The results of this study call for wide application of therapeutic suggestions in surgical patients, should trigger a more careful shielding of patients from negative influences in the OR, and initiate further research on unconscious patients like during intensive care or resuscitation. For hypnosis the presented study inspires a discussion on the role of hypnotic induction and on the substance of therapeutic suggestions.

Submitter: Eberhard Brunier

Number and title: 7888 - Allergy Therapy with hypnosis

Allergy Therapy with Hypnosis

A Self-Organisational Therapy Concept

Hay fever, neurodermatitis or food allergy – within all diagnoses a psychological component can be found. If the patient's subconscious realizes its "mistake" of immune disorder it can be corrected and restored to normality with the help of hypnosis, without relapse or displacement of symptoms, once and for all!

The patient learns his/her own cure, unassisted..Demo with patiens!

Submitter: Lida Nikfarid

Number and title: 7892 - Hypnosis related methods of procedural pain reduction in children hospitalized for chronic conditions.

Procedural pain always has been a challenge of pediatric nursing, which demand more attention especially when it is about children with chronic diseases. Nonpharmacological interventions always are considered effective to relieve pain and discomfort. In our field study, we used some hypnosis related techniques such as distraction and guided imagery on children (age 4 to 10 years old) to examine their effectiveness on procedural pain of these children hospitalized for chronic health conditions. Using theoretical basis and adapted with Iranian culture we designed about 15 methods to use on children with different age, sex and health situation group. The recording video and qualitative and quantitative methods were used to assess their experience. There were significant relationship between using the methods with less pain experience for children in all age groups ($p < 0/00$). Qualitative interviews with the children and their parents revealed their satisfaction and pleasure in the experiences. Implications for nursing practice, education, and research are discussed.

Submitter: Lida Nikfarid

Number and title: 7893 - Hypnosis as a method of spiritual and mental health improvement in mothers of children with cancer.

Cancer has many negative psychological and spiritual effects on families of affected children. As a part of a comprehensive project to improve health in mothers of children with cancer, we used some hypnosis based interventions for this group to influence on their positive health related consequences. In this presentation we will introduce the method of designing the intervention program and report some results from a pilot study. As a preliminary study we found that the majority of mothers have a moderate to severe level of psychological and spiritual distress assessing standard tools. The interventions are designed by a team of experts in different fields of psychotherapy, psychoanalysis and psychiatric nursing. A variety of methods are using based on the history of mother. The modifications of routine hypnosis interventions to be adopted for a Muslim group will be discussed.

Submitter: Antoine Bioy

Number and title: 7894 - Soulager les douleurs complexes avec l'hypnose / Relieving complex pain with hypnosis

Nous définissons les douleurs complexes comme étant des douleurs persistantes, aux facteurs d'apparition et de maintien multifactoriels et parfois inexpliqués. Typiquement, nous parlons ici de fibromyalgie, de syndrome douloureux régional complexe, des douleurs nociplastiques... Ils posent des difficultés réelles de prise en charge, et la démarche thérapeutique est elle-même complexe à penser et à mettre en place.

Lors de cet atelier, nous présenterons la méthode que nous mettons en place afin de les approcher au mieux en 5 étapes ainsi que les recommandations cliniques à respecter, issues de la littérature scientifique. Ces étapes et recommandations seront illustrées par des démonstrations et exercices en sous groupes utilisant les métaphores, les supports à médiation (dessin...), les jeux de rôles... En particulier nous mettrons l'accent sur le rôle de l'intention dans les processus de changement et sur le pouvoir suggestif des temps qui précèdent les séances elle-mêmes, et la façon de les structurer.

A l'issue de cet atelier, les participants repartiront avec une méthode claire pour accompagner les douleurs complexes, dont ils auront mis en application les techniques clefs. Un guide sera également mis à disposition gracieusement, récapitulant l'ensemble des notions clefs.

We define complex pain as persistent pain, with multifactorial and sometimes unexplained onset and maintenance factors. Typically, we are talking here about fibromyalgia, complex regional pain syndrome, nociplastic pain... They present real difficulties in terms of management, and the therapeutic approach itself is complex to think about and implement.

During this workshop, we will present the method we are implementing in order to best approach this type of pain in 5 steps as well as the clinical recommendations from the scientific literature to respect. These steps and recommendations will be illustrated by demonstrations and subgroup exercises using metaphors, mediated media (drawing...), role plays... In particular, we will focus on the role of intention in the process of change and the

suggestive power of the period of time preceding the sessions themselves, and how to structure them.

At the end of this workshop, the participants will leave with a clear method to help accompany patients with complex pain, for which they will have applied key techniques. A guide will also be made available free of charge, summarizing all the key concepts.

Workshop in french and english

Submitter: Yoshikazu Fukui

Number and title: 7895 - Should we need to improve both conscious and non-conscious attitudes toward hypnosis? : Interaction between conscious and non-conscious attitudes toward hypnosis on hypnotizability

Introduction: It has been known that the attitude toward hypnosis of clients is an important factor for successfully inducing them into hypnotic state, and the more positive its attitude gets, the higher the hypnotizability becomes. On the other hand, previous research has measured the attitudes toward hypnosis subjectively by using self-reported questionnaire, although the hypnotizability has been objectively measured by experiments. So, we have developed the hypnosis Single Target-Implicit Association Test, which can objectively measure the non-conscious aspect of attitude toward hypnosis (Fukui & Oura, 2016). In our study we found that there were significant correlations between the non-conscious attitude toward hypnosis and some sub-scales of hypnotizability (Fukui et al., 2018), and that most of the participants considered hypnosis as positive consciously, whereas they considered hypnosis as negative non-consciously (Fukui & Oura, 2016; Oura et al., 2017). This, however, is not certain yet whether or not the combinations of conscious attitude and non-conscious attitudes toward hypnosis can substantially influence on hypnotizability in some different ways. So, we investigated the interaction between conscious and non-conscious attitudes towards hypnosis on hypnotizability.)

Methods: 49 university and graduate-school students participated in the study. They carried out both the questionnaire and the experiment in the different contexts. The conscious attitude toward hypnosis was measured by the self-reported scale which was developed by Shimizu & Kodama (2001), whereas non-conscious attitude towards hypnosis was measured by hypnosis ST-IAT. Hypnotizability was measured by Japanese version of HGSHS Form A (Takaishi, unpublished).

Outcome: As a result of regression analysis, for some sub-scales of hypnotizability, the main effect of non-conscious attitude toward hypnosis was significant, but not was of conscious attitude towards hypnosis. And the interaction between conscious and non-conscious attitudes toward hypnosis was not significant either.

Conclusion: Our current study revealed that there is not a significant interaction between conscious and non-conscious attitudes toward hypnosis on hypnotizability. Therefore, we conclude that we need to improve non-conscious attitude toward hypnosis before the induction into hypnosis.

Submitter: Ute Stein

Number and title: 7898 - Schnellinduktionen bei Kindern in der zahnmedizinischen Behandlung

Den Teilnehmern werden drei Schnellinduktionen bei Kindern altersabhängig zur Erreichung einer Compliance zwischen Zahnarzt und Patient vorgestellt.

Submitter: Beatriz Suarez-Buratti

Number and title: 7900 - Personalized interventions with hypnosis for anxious children: Ericksonian tools and therapeutic responsiveness

As it happens with adults, children and adolescents are not exempt from anxiety problems but the adverse consequences are more intense and lasting than in adulthood as they significantly affect the social and emotional development and limit the child's ability to learn behavior, thinking and communication skills necessary for life, or they can lead to disruptive behaviors.

Depending on their developmental stage level, the child's reaction to anxiety may occur in the form of fear or excessive worries, but it can also manifest in restlessness and irritability or in a variety of physical symptoms and sleep or eating problems.

Some emotionally loaded events such as moving, the birth of a sibling, the death of a relative, divorce of parents, can precipitate the onset of anxiety problems. Children's exposure to incessant media coverage of disasters or problematic smart-phone use and mobile gaming can increase anxiety and may cause emotional dysregulation.

Some anxious children may not communicate their feelings and many parents are unsure whether to be concerned. Most anxiety symptoms tend to be minimized or are ignored and, therefore go unnoticed. Anxiety is often mistaken for another disorder, resulting in ineffective treatment.

Helping anxious children and adolescents develop the ability to respond differently to anxiety can be a challenging process. In recent years there has been a growing interest in the therapeutic benefits of using hypnosis for anxiety conditions in children and teens. Following on the steps of Milton Erickson, more and more emphasis is being placed on the value of delivering personalized interventions respecting the child's needs and dignity. Ericksonian psychotherapy and hypnosis offer unique resources to help anxious children and adolescents get "unstuck" and start doing things differently in a comfortable atmosphere.

In this workshop we will explore the main principles of the Ericksonian model of hypnotherapy and the individualized application of strategies shown in our clinical practice to help anxious

children and adolescents become more autonomous and self-regulated. We will discuss how to introduce hypnosis to a child and parents in a way that builds positive expectations. Vignettes from young patients will be used to demonstrate verbal and non-verbal Ericksonian techniques in structured and informal sessions. We will provide the opportunity to interact and create a personalized story utilizing the interests of a young patient.

Submitter: Sinan Güzel

Number and title: 7902 - IST (Inner Sage Therapy) - A new method of hypnotherapy that reveals the body's self-healing ability.

If expected or unusual changes in our body or behavior are affecting our lives negatively, we look for ways to get rid of this situation. “Disease”, “discomfort” or “symptom” are the that we use to describe this condition.

We almost always miss that these symptoms or diseases also mean we should take care of our minds and bodies.

IST (Inner Sage Therapy) is a method that I have developed to take these signs seriously and to provide a common action between the subconscious mind who knows why these signs exist and the conscious mind who tries to examine these signs within the framework of logic and analysis.

The conscious mind, which tries to cope with the problematic behavior, focuses on ignoring the feelings and emotions coming from the subconscious mind after many unsuccessful attempts and tries to develop sensible new behavior for the future. Often it fails to develop or maintain this logical behavior. This process causes the conscious mind and unconscious mind to be disconnected from each other on this behavior.

IST (Inner Sage Therapy) is a method that tries to provide synchronized walks of the conscious mind and subconscious mind, taking into consideration that the wisdom of the subconscious mind and its good intentions that are always clear, without any doubt. IST is a form of therapy that blends symbolization, regression and, if necessary, projection methods.

The main problem with today's therapies is that even if adequate rapport is provided, in some cases subjects cannot easily talk about the details of their symptoms or put them into words. Beginning from the anamnesis, the principle of conducting the process with the choices of the subject himself was taken into consideration during all of the imagination stages of the technique along the therapy. There is no need in providing details about the symptom during IST application. It is sufficient for the subject to know which problem he / she wants to work

with. This increases the compliance of the subjects who have difficulty explaining their problem (sometimes even to themselves) to the therapist.

Aims and objectives:

1- To provide the participants with the necessary information about the method with a brief presentation of the conscious and subconscious foundations.

2 - To provide more detailed information with sample case presentation.

Submitter: Sinan Güzel

Number and title: 7903 - Safe Place Creation Techniques

Since hypnotherapy is a collection of therapy methods that deal with problematic behavior, its ultimate goal is to achieve behavior change. These changes are intensively tried to be achieved at the subconscious level. Thus, it begins with emotions originating from the subconscious mind, which is the main generator of behavior that appears to be at the level of consciousness. Since the old behavior has become a habit, even though it has become a problem, the behavior itself often makes us feel as if you are in the comfort area. Therefore, in order to achieve a change in behavior, an area in which one feels more confident than in the comfort area in which we are accustomed is needed. This sense of confidence provides the basis for mental preparation for the change to be achieved.

People often try to deal with problematic behaviors on their own or with different therapies, and because these attempts fail, they resort to hypnotherapy. That is, when the person who has become problematic comes to us, he accepts this symptom as unbearable, unbeatable and unchangeable. Therefore, dealing with behavior that no one can change means dealing with an unknown. This requires courage. That is the reason to create a safe place (sanctuary) during hypnotherapy to provide this courage.

Hypnotherapy has many different safe place creation techniques. All these safe place building techniques vary not only from therapy to therapy, but also from therapist to therapist and from subject to subject.

Conventional hypnosis techniques use therapist-based safe place generation techniques more intensively, while conversational techniques mostly use subject-based safe place creation techniques; however, both groups have multiple subgroups. Hypnotherapists are often considered to be familiar with these safe place building techniques during their trainings; however, since the detailed classification of these techniques hasn't been made, it cannot be assessed whether hypnotherapists have lack of information about these techniques.

The aim of this presentation is to classify all of the safe place building techniques that are in use and explain them with examples.

Submitter: Floriane Udressy

Number and title: 7904 - Mythes de création et clinique du naissant

Mythes de création et clinique du naissant

Introduction

« Y avait-il l'eau profonde, l'eau sans fond ?... Pas de signe distinguant la nuit du jour... L' Un respirait sans souffle. » Rigveda

Les mythes de création du monde dévoilent la richesse des représentations de l'origine. Genèses ou cosmogonies, ces récits premiers mettent en scène les images émergeant à la conscience des humains face au mystère de l'existence.

Socialement, ces mythes de l'origine sont convoqués rituellement lors des passages de vie.

Dans la pratique de l'hypnose autour de la naissance, j'ai pu observer avec curiosité et attention comment des thèmes caractéristiques de ces mythes apparaissent spontanément et régulièrement.

Nous aborderons ici l'hypnose clinique de la naissance au sens large, les situations où l'énergie physique et/ou psychique est en gestation, où les prémices de création, de renouveau et de transformation vers l'inconnu s'activent.

Méthodes

Durant cet atelier, je propose un bref apport théorique, voyage dans le temps pour découvrir ou redécouvrir quelques mythes de l'origine, nous laisser toucher, ressourcer par leurs images et leur poésie spécifique.

Après un temps d'approfondissement en hypnose, centré sur l'émergence et l'amplification de ces thèmes, nous ferons des liens concrets avec le champ professionnel de chacun au travers de situations cliniques.

Résultats

Le feed back et de la mise en commun des expériences vécues en petits groupes nous permettra une synthèse et une analyse : accéder à la richesse des images de création, se sensibiliser à leurs forces et développer son propre langage métaphorique durant la transe.

Conclusions & perspectives

Les mythes de l'origine semblent jeter un pont entre le temps et l'éternité, l'intérieur et l'extérieur, le personnel et l'universel, l'inconscient et le conscient, facilitant le processus de transformation.

Le praticien découvre comment habiter ces images vivantes à l'œuvre lors des passages de vie : accompagner le naissant alors que rien n'est encore visible.

Submitter: Nicole Cuddy

Number and title: 7905 - Going from picture to movie using TREM

GOING FROM PICTURE TO MOVIE USING TREM

We practice hypnosis by using our TREM method which means Time, Space, Resources and Motion.

Leonardo da Vinci said that bodies, space and time are generated by motion, and we try to adapt his idea to our work by devoting more time to time, extending the space available and mobilising the necessary resources to get our patients moving. We have discovered that our patients are frozen in time, have narrowed down their space or find themselves in an impasse.

The description they give us is like a photo which is thus a two-dimensional and not a three-dimensional world. So we stimulate them by using the exploration of these 4 aspects (time, space, ressources and motion) to reset their lives three-dimensions.

Feelings and emotions may be locked in the body but they can be set free by motion and speech.

Children's drawings and videos from adults will illustrate how to transform a two-dimensional picture into a three-dimensional film.

Submitter: Isidro Pérez Hidalgo

Number and title: 7906 - INTEGRATING ULTRADIAN HEALING RESPONSE IN A HYPNOTIC TREATMENT FOR IRRITABLE BOWEL SYNDROME

INTRODUCTION

Irritable Bowel Syndrome is a very common problem and a long-term condition of the digestive system.

Complaints include pain, bloating, constipation, diarrhea, nausea and indigestion, or a sudden need to use the bathroom. Symptoms may get worse after meals.

Causes are still unknown though some factors are proposed:

- Diet
- Stress
- Genetic factors
- Hormones
- Digestive organs with a high sensitivity to pain
- An unusual response to an infection
- A malfunction in the muscles that move food through the body
- A depressive mood.
- Post-traumatic stress disorder
- Chronic fatigue syndrome

Management of IBS includes:

- Diet
- Medications (laxatives, antispasmodics, antidepressants)
- Psychological therapies (mainly CBT and hypnotherapy)

Hypnotherapy research

Since 1984, when the pioneering formal study of Whorwell was published, there has been an outgrowing research literature on the use of hypnosis in IBS.

METHODS

23 adult patients diagnosed under the label "Irritable Bowel Syndrome" were exposed to a hypnosis program with three stages:

1. Neutral hypnosis (at the office), followed by home practice oriented to a reduction of general anxiety. Each hypnosis session lasted about 25 minutes.
2. Hypnosis with specific suggestion oriented to optimize the brain-gut connection (including also home practice).
3. Self-hypnosis according to Ernest Rossi´s ultradian response.

Besides, the patients were instructed to arrange their tasks in alignment with the Basic Rest-Activity Cycle in the daytime.

According to this approach, human beings experience 90 minutes of activity followed by 20 minutes of rest, cycled over throughout the day.

OUTCOMES

Positive results were seen in 19 out of 23 patients. (in these patients overall IBS severity was reduced in more than 60% after four months of treatment).

A follow-up questionnaire was answered by 15 out of 19 patients that have experienced positive outcomes. Clinical improvement was conserved after one year with slight variations.

OUTLOOK

We think that ultradian self-hypnosis may be a valuable tool, when added to more conventional hypnotic strategies.

In our study, though a control group was not available, we purpose further research on this subject combining the symptom-oriented suggestions with open suggestions administered in a chronobiological pattern.

Submitter: Pascal Burger

Number and title: 7907 - Hypnosis against test anxiety for medical students in a controlled design

Introduction

Test anxiety is a common phenomenon among university students with a prevalence between 10-50%. Studies suggest that medical students are especially prone to test anxiety (Hahne, 1999; Schaefer et al., 2007). Hypnotherapy was already used for the treatment of test anxiety in different settings (e.g. Erickson, 1965; M Sapp, 2013), but none of those studies included a detailed analysis of different dimensions of test anxiety or an intervention in a controlled setting.

Methods

In the presented study, we screened 410 first year medical students at the University of Erlangen over three semesters, from 2017-2019. We repeatedly assessed them with the PAF, the revised German version of the Test Anxiety Inventory. The PAF also defines four subscales of test anxiety: Emotionality, Worry, Interference and Lack of Confidence. A total of 66 students with the highest test anxiety values (PAF) were separated in two matched groups. Participants at one group received a one-hour hypnosis session, participants of the other group being controls and did not receive any treatment. The students were advised to listen to the hypnosis which was also recorded on their mobile devices about once a day until the examination.

Outcome

In a comparison between the first (start of the semester, before the hypnosis) and the third assessment (before the last examination of the semester) the hypnosis group showed a reduction of the global test anxiety score as well as significant differences between three out of four subscales.

Conclusion & Outlook

Even a very short hypnotic intervention may be useful against test anxiety during the first semester.

Submitter: Simonetta Mauri

Number and title: 7908 - THE NARRATIVE OF THE LION STORY AS SUPPORT DURING RADIOTHERAPY, a case report

BACKGROUND

The diagnosis of a tumor and the subsequent treatment are sources of significant stress for the patient. They find themselves in a crisis situation, and feelings of anxiety, worries of an uncertain future and fear of dying, prevail. Medical hypnosis, in particular, hypnotic metaphor communication, is an optimal method for helping the patient throughout the oncological treatment.

CASE

A 68-year old man, former director of a major company, who had been operated on 4 years previously for prostate cancer, unexpectedly was given the diagnosis of a recurrence of his cancer. He developed significant anxiety during subsequent examinations, leading to panic attacks which were difficult to treat even when administered psychotropic drugs by his psychiatrist. In addition, he also suffers from claustrophobia, and feared lying under the large medical linear accelerator which would be used for his 35 radiation treatments. The patient requested medical hypnosis. He underwent two sessions which utilized the B. Trenkle's Lion story. This resulted in a rapid disappearance of panic attacks and a significant reduction in anxiety. The patient calmly completed his entire radiotherapy without the aid of sedatives and with only minimal side effects.

DISCUSSION

According to B. Trenkle, the Lion story is so effective for oncological use due to the richness of its positive suggestions, its stimulation of the senses, its time distortion and its projection into the future. The patient would think about the Lion story already in the waiting room, and during the radiotherapy "saw the young lion discovering the world". The noise of the machine became "the wind that rustled the leaves of the forest", the treatment table "the grass around the lake", the accelerator light "the rays of the sun". The patient used the narrative of the Lion

story for all of his subsequent examinations and went on to apply it generally to any anxiety-producing situation in his life.

It is striking to note how the patient in this case report chose the elements in the Lion story which best suited his needs in overcoming obstacles.

References

1.Bernard Trenkle. Februar 2013. Die Löwen-Geschichte: Hypnotisch-metaphorische Kommunikation und Selbsthypnosetraining. Deutschland: Carl-Auer Verlag.

2. Elvira Muffler. 2014. Kommunikation in der Psychoonkologie: Der Hypnosystemische Ansatz. Deutschland: Carl-Auer Verlag

Submitter: Michael Capek

Number and title: 7909 - Self Forgiveness

Under guidance this will be a self-hypnotic session for all participants. The session will be of benefit to those who have the need to self-forgive; or need to understand a process to help others self-forgive. The session will be introduced with a brief account of what is forgiveness and self-forgiveness. Following a description of what to expect in trance, the participants will be taken through a journey of self-healing. The whole session will be personal, content free and disclosure free.

Submitter: Karmit Ariely-Kagan

Number and title: 7913 - The Use of a Furball in Hypnosis

Tactile sensations of soft and furry objects are often associated with primary feelings of safety and comfort. Touching and petting an artificial furball usually promotes (or initiates) positive and comforting associations – of the touch of one's transitional object, of some loved one's hair, or of a pet.

A demonstration of how to use a furball for hypnosis induction, for creating a safe place as needed in many treatments will be presented.

The furball technique is effective as competitive behavior in treatment of habit disorders such as trichotillomania. A short case study will be introduced.

Submitter: Julia Schuerch

Number and title: 7917 - Medical Hypnosis in Emergencies

Most people know and use medical hypnosis in a pre-planned session in a quiet and relaxed atmosphere.

The workshop will demonstrate that medical hypnosis can also be used in a very successful and useful way in the emergency room or any other emergency situation. The approach and techniques need to be adapted to the ones usually learned. Different types of techniques will be presented and their adaptation for emergency situations will be not only discussed but also put into practice. A discussion about limitations and pitfalls will help the participants to use hypnosis in a safe way even in emergencies.

In this very practical workshop we will do practical exercise after a very short theoretical introduction and exercise all kind of situations and techniques which can be put in practice at once. The workshop will be organized in such a way, that very realistic situations will be created, and you discover how to use medical hypnosis in an emergency situations with a noisy environment and interruptions.

Submitter: Turgut Akyol

Number and title: 7920 - Muezzi technique

Would it not be so nice to handle the main complaints of your patient within 4 to 5 sessions? If the question ends up in a yes for you, then here is a productive gift for your professional therapeutic utilization. Muezzi technique is a direct and quick hypnosis technique in the verge of excellence with a background of 45 years.

This technique covers authoritarian, parental, permissive, guidance and supporter approach. It helps the patient to remember and select the corresponding approach that is most suitable for the behavioral reaction to the troublesome moments in their life. The technique includes one or more leavening sessions. The word leavening is used to describe the maturation of hypnosis concept in patient's mind, as it happens during cheese production. In every session, after taking the verbal approval from the patient, the technique is usually performed by touching patient's forehead, temples, arms and hands during induction and suggestion. The eye to eye fixation procedure during induction, creates commitment, attachment and trust on the patient's side.

Overall this technique relies on both patient's and therapist's mutual learning process. Starting from the scratch patient learns the concept of hypnosis as well as the therapist's therapeutic approach. Similarly, the patient reaches a point of awareness about the information she or he does not know that she or he knows about self. The technique includes intuitively crafted and intensely experienced word combinations. An example for the opponent words that increase patient's potential is "While your eyes get shut slowly, your consciousness will come open fresh!". In fact, the technique includes similar stages like most other hypnotic techniques; i.e. classical induction, direct or metaphoric suggestions, visualizations, patient's verbal approval and final repetitive suggestions for closure.

The most prominent item of a hypnotherapeutic support is to establish self-respect and empowering the ego strength of the patient. The technique asks the patient to repeat the suggestions after the hypnotherapist either audibly, in whispering mode or internally. The final targeted suggestion is given to conscious mind by the words; "While being in realization of me,

leaving your self-responsibility to you…". Desire and wish to change help patient to change. The willpower for happy and colorful life together with attunement between patient and hypnotherapist is the secret of success of this technique.

Submitter: Claudia Elisabeth Weinspach

Number and title: 7921 - Healing Trauma with Ritual and Ceremony: Connecting Ericksonian Hypnosis and Native American Spirituality

Although there is a long tradition, especially in indigenous cultures, of healing with ritual and ceremony, the modern scientific world rather excluded spiritual components of healing for a long period of time.

It was the Cartesian revolution that includes the idea that all phenomena can be understood and thereby indicating that you can only trust that which can be explained. As a consequence the mind was separated from the intuitive wisdom of our body and spirit.

Ceremonies provide the structure though which we touch the spirit and promote our own healing as well as the healing of others.

What will be taught: In this workshop we will apply new research findings (like the brain´s plasticity) with ancient wisdom to expand our healing power. In the language of ceremony we will explore the factors that promote the healing process.

Relevance to the conference:

Learning more about ancient wisdom that can be applied in modern therapy not only enriches the therapeutic repertoire of each therapist or doctor but also helps creating a new balance in society. Honoring and applying spiritual components includes helping patients being connected within them and thereby strengthen their immanent healing powers.

Presentation Format: lecture, experiential

Submitter: Nicole Ruysschaert

Number and title: 7922 - Help the helper: Dealing with risks of health care professionals

Introduction: Health care professionals, psychotherapists, dentists are particularly at risk of burnout, compassion fatigue or vicarious traumatization as they face human pain and suffering.

Methods: Aspects of empathy, the role of mirror neurons and how we perceive the pain and suffering of others will be reviewed. After reviewing some risk factors, I will introduce some methods and ways to recover and/or prevent. 'Compassion satisfaction' and 'resilience' are key concepts. How and by which methods are they activated and improved? Hypnosis deserves a central role within a whole strategy to re-balance oneself. In/with hypnosis one finds ways 'back home' to reconnect with oneself, find engagement, satisfaction, motivation for future work. One develops an inner locus of control to be better prepared in facing the storms of human life and work and promote processing of experiences.

Outcome: Therapists/health care workers find how to become more resilient and engaged the positive antidotes of burnout and compassion fatigue.

Conclusion & Outlook: Only by consciously taking care of oneself can health care professionals and their clients benefit from a long-lasting and satisfying career.

Submitter: Nicole Ruysschaert

Number and title: 7923 - HYPNO-PSYCHOTHERAPY FOR LASTING CHANGES: NEURO-PSYCHOTHERAPY OR NEURO-HYPNOSIS?

Introduction: what's in a name? how can new research data boost the integration and use of hypnosis in medical and psychotherapeutic practice?

Methods: Some neuroscience data of psychotherapy, matching with clinical experience demonstrate which processes are required for resolving issues which impair quality of life. 'Brain-wise' therapists mobilize these processes. Creating rapport in hypnosis, particularly mobilizes the social engagement system or ventral vagus system, promoting safety and calmness: a prerequisite to face difficult life issues. Symptoms are considered as the best way one had to deal with issues when they arose. Clients learn from their symptoms and are assisted in hypnosis to explore them. Symptoms are keys, to open doors from where implicit memories can be found and the process of memory deconsolidation / reconsolidation can be started promoting lasting changes. Psychotherapy with hypnosis where intensive mind/body interaction is activated facilitates the processes of lasting changes.

Outcome: As a result of attending this session participants will be able to:

- Get insight in some neuroscientific processes involved in rapport

- Understand how memory deconsolidation/reconsolidation is necessary to promote lasting changes

- See how hypnosis opens doors to access implicit memories and creates new experiences

Conclusions: as the field of neuroscience, research and clinicians are finding ways to inspire each other the future of hypnosis looks promising.

Submitter: Nicole Ruysschaert

Number and title: 7924 - « FLEURIR » LES PETALES DE SATISFACTION DANS LA VIE ET AU TRAVAIL. Prévention et rétablissement du burnout ou épuisement professionnel

Introduction : Le burnout, syndrome d'épuisement professionnel, semble une épidémie ou même une pandémie. Les statistiques sont inquiétantes. Le burnout ne touche pas seulement les professionnels de santé qui vivent des risques plus spécifiques, résultant de l'empathie, de l'absorption d'information sur la souffrance auxquels ils sont exposés. En fait, toutes les professions sont à risque : la charge de travail, l'imprévisibilité, le manque de soutien, la compétition remplaçant la coopération, ne plus donner du sens à ce qu'on fait et plusieurs autres éléments.

Méthodes : Nous allons revoir les signes précoces et les phases de burnout de sorte que les employés individuels et l'organisation soient sensibilisés au problème.

La prévention est la meilleure thérapie. Au niveau individuel il y a des antidotes efficaces, des éléments qui font fleurir. Fleurir (c'est-à-dire cultiver) est un acronyme composé à partir du 'flow' à trouver, de l'engagement positif et de la motivation, l'utilisation des ressources, de l'imagination et la résilience. La description de chaque élément sera suivie de plusieurs exercices en hypnose.

Dans le processus de guérison à la suite d'un burnout, on commence par des mesures spécifiques de repos, de récupération physique et mentale, d'une activation dosée et graduelle, et d'une reprise de contact avec la vie en dehors du travail. Il faut aussi faire l'analyse des facteurs de risques comme les événements traumatisants, le harcèlement, les conflits de personnalités, la vie familiale et sociale, les conflits au travail et l'interface travail et vie privée pour constituer la base du plan de traitement. L'hypnose et les aptitudes qui font fleurir l'esprit de l'individu méritent leur place dans la préparation du retour au travail et l'adoption d'une attitude d'autodéfense et de résilience.

Résultats : A la suite de cet atelier vous allez

- Être plus à alerte des signes individuels du burnout et ceux au niveau de l'organisation.

- Découvrir, mobiliser et pratiquer les éléments du fleurir en hypnose pour la prévention du burnout.

- Avoir l'expérience pratique avec des exercices en hypnose spécifiques.

Submitter: Giuseppe Regaldo

Number and title: 7929 - The hypnotic hallucination influences the hypothalamic regulation of appetite

Appetite regulation controls food intake and consequently body weight. Hypnosis, by the hallucination of eating food, has been employed to modulate gastrointestinal functions, but its effects on appetite peptides and substrates are unknown. In a trial, we investigated the effects of a hallucinated breakfast (HB) by hypnosis on subjective appetite and some appetite-regulating hormones when compared to a real breakfast (RB). Eight healthy post-menopausal women were randomized in a cross-over design to consume HB or RB and underwent measurements of appetite sensations, blood sample collection. Results showed that HB increased postprandial satiety and decreased hunger

RB significantly increased postprandial levels of glucagon-like-peptide-1 and peptide YY at 20, 60, 90 and 180-min, whereas acylated-ghrelin and leptin levels did not differ between meals. Postprandial neuropeptide-Y and orexin-A values significantly increased at different time-points after the RB meal, but not following HB, while α-melanocyte-stimulating hormone levels enhanced after HB only. No differences in energy and macronutrient intakes were self-reported following the two meals. In conclusion, a meal hallucination increased perceived satiety and decreased hunger sensation, impacting on the brain peptides involved in appetite control.

Submitter: Shinichi Oura

Number and title: 7930 - Do you still believe the statement for impressions on hypnosis from clients?: The relationships among conscious/non-conscious attitudes towards hypnosis, the impressions on hypnosis and social desirability

Introduction: The attitude towards hypnosis is an important factor for inducing clients into hypnotic state successfully. In previous research, because the attitudes towards hypnosis have been measured by self-reported scales, the conscious attitudes towards hypnosis have just been measured. These days, however, we can measure the non-conscious attitude towards hypnosis by using PC version of hypnosis Single Target Implicit Association Test (hypnosis ST-IAT; Fukui & Oura, 2016) and we found that the non-conscious attitude was significantly correlated with hypnotizability (Fukui & Oura, 2019). By the way, to which aspects of the attitudes towards hypnosis does the impression on hypnosis which clients mention relate? Oura et al. (2020) suggested that the conscious attitude towards hypnosis was related to the proportion of positive and negative words about the impression on hypnosis which participants mentioned, whereas the non-conscious attitude was not related to the impressions on hypnosis. Since it was suggested that the impressions on hypnosis which participants mentioned were produced from their conscious aspects, the impressions on hypnosis may have been exaggerated positively or negatively. Therefore, the number or proportion of words about the impression on hypnosis may be related to social desirability. In present study, we examined the relationships among conscious/non-conscious attitudes towards hypnosis, the impressions on hypnosis, and social desirability.

Methods: The data of 63 university students was used for the analysis. The impressions on hypnosis were collected by free description. The conscious attitude towards hypnosis and social desirability were measured by the self-reported scales, whereas non-conscious attitude towards hypnosis was measured by paper-pencil version of hypnosis ST-IAT (Oura & Fukui, 2018). The higher the scores of both attitudes get, the more positive they become. A part of the data was the same as Imaida et al. (2019) and Oura et al. (2020).

Outcome: As a result of a correlational analysis, the conscious/non-conscious attitudes were not correlated with social desirability, whereas the number of words in the negative impression was negatively correlated with impression management, a sub-scale of social desirability significantly.

Conclusion: It was suggested that the impressions on hypnosis which clients mentioned were distorted because of social desirability.

Submitter: Maria Cristina Perica

Number and title: 7937 - "The interrupted road": using naturalistic creative processes to enhance repairing, restructuring and self-healing capacity in Ericksonian Psychotherapy

Healing is often a creative process and, in psychotherapy, a co-creative process that allows to move from some positions to other ones, more adaptive for the patient. The presentation will give some hints to use our natural creativity in hypnosis to stimulate the patients' capacity to repair, to heal, to restructure their life experience. The interrupted road metaphorically represents the situation when patients use words as: "I can no longer…".

Hypnotic techniques and operational ideas will be presented through clinical cases to use creativity and generativity for the activation of self-repairing processes and personal development.

Educational Objectives:

- Describe natural creative processes and point out isomorphisms with healing processes.

- Present hypnotic techniques to use creativity and generativity in the therapeutic process.

- Utilize hypnotic rapport to foster an embodied therapeutic experience

Submitter: Walter Tschugguel

Number and title: 7938 - Die Verwirklichung des Anderen in mir mittels Hypnose

Ziel:

Zu erlernen, auf welche Weise wir im Vorgespräch und in der hypnotischen Intervention den Anderen in uns erleben können.

Inhalt:

Erickson betonte stets, dass erfolgreiche Therapie darauf beruhe, die Individualität des Anderen, seine Einzigartigkeit, zu nutzen. Ich ging daher über Jahre hindurch der Frage nach, auf welche Weisen wir Gefahr laufen, im therapeutischen Prozess unsere eigenen Wirklichkeitsmodelle und Kulturprogramme, wenn auch nicht explizit, so zumindest implizit, mittels Haltungen, metasprachlichen Verhaltens und zuletzt auch sprachlich, durch Bemerkungen, ad-hoc Reaktionen, etc. innerhalb unserer Patienten zu verwirklichen, also mehr oder weniger gute Ratschläge abzugeben. Ich fand, dass weniger gut gemeinte (auch hypnotische) Ratschläge oder formale Techniken als vielmehr eine bestimmte Haltung den Erfolg von Therapie ermöglicht. Diese Haltung bezeichne ich "Die Verwirklichung des Anderen in mir".

Was geschieht dabei? Indem ich nach einer konkreten Situation frage, bei der mein Patient seine Angst, Schmerz, etc. erlebt und versuche, diese Situation zu verstehen, also nachzuvollziehen (und eben nicht zu erklären oder zu analysieren, also in Einzelteile zu zerlegen), betrete ich sein Terrain, und lerne seinen Weltentwurf und seine Zwecke kennen. Ich bin in sein Universum eingetreten, das sich von meinem unterscheidet und meine Perspektiven erweitert. Ich habe mich der Welt des Patienten untergeordnet, und werde dabei selbst bereichert. So fokussiert realisiert der Patient, verstanden zu werden. Er braucht nicht zu fürchten, dass für ihn wesentliche Themen unscharf oder gar nicht beleuchtet sind und er kann sich auf den Hypnose-Prozess unvoreingenommen einlassen. In der Hypnose werden - wie beim Tanz - gegenseitig Erfahrungen ausgetauscht, die das lebendig-Risiko-nehmen implizieren. Auch hier ist die Maxime meines Vorgehens das gemeinsame Finden von Zwecken aus einer Atmosphäre des Miteinanderseins. Die Grundlage meines metasprachlichen und sprachlichen Handelns ist, mit meinen Mitteln zu wollen, was der Andere will.

Methode:

Vorbemerkungen, Demonstration mit TeilnehmerIn,

Gruppenübung, Feed-back Runde.

Submitter: Peter Naish

Number and title: 7939 - Why Hypnosis is the 'Natural' Treatment for PTSD

It has long been recognised that sufferers from posttraumatic stress disorder are frequently highly hypnotisable. The connection is so strong that it was once suggested that high hypnotisability might be a risk factor for PTSD. This seemed a reasonable conjecture, since hypnotic susceptibility is a fairly stable trait and there was no reason to suppose that a single traumatic incident could change that. However, with a growing understanding of epigenetics it has become clear that the direction of causality is the reverse: trauma increases hypnotisability.

There are a number of intriguing parallels between hypnosis and PTSD, for example both are associated with time distortion and the production of realistic hallucinations (flashbacks in PTSD). These effects appear to be related to a shift of neural activity towards the brain's right hemisphere. This is the hemisphere associated with fear, but it is also the hemisphere towards which many people have been shown to shift when hypnotised. Interestingly, Mindfulness (which is sometimes taken to be similar to hypnosis) probably facilitates a shift towards the left hemisphere.

This presents us with a difficult choice: do we use hypnosis to help PTSD patients, on the basis that they are very responsive, or should we use Mindfulness which might bring them back from their over-use of the right hemisphere? It will be argued that, for several reasons, hypnosis is generally the better choice. An example of its use will be presented.

Submitter: Oana Maria Popescu

Number and title: 7942 - The Wizarding School

One of the most important tendencies in current child psychotherapy is the integration of various therapeutic approaches and techniques. In addition to that, child psychotherapy has its own particularities, among which the most important is that many times children cannot verbalize their difficulties. In this context, hypnosis and imagination play an important part. On the other hand, children have imaginary friends they talk to, and these imaginary friends have long fascinated psychologists, parents and teachers alike. All children play and play is an important part of child development.

The psychotherapy program "The Wizarding School" involves a therapeutic relationship which is facilitated by the fact that the psychotherapist is a play mate for the child, within a so-called "extended hypnotic trance". The whole program is a sort of a live fairy-tale based on the "Harry Potter" series.

We will work with techniques such as: the wizarding school regulations, the wizard's diary, magic wands, herbology, the pensive, the magic map, casting spells and other secret techniques and interventions ... that you can find out about if you become a "wizard" in child hypnosis.

Submitter: Anna Robbiani Agustoni

Number and title: 7943 - CHANGING THE PERCEPTION OF TASTE AS A TECHNIQUE FOR RESOLVING NERVOUS HUNGER: A CASE REPORT

BACKGROUND : Nervous hunger is a very widespread mechanism that aims to provide comfort or achieve a positive feeling that may be hard to find in everyday life. Normally the subject does not experience a real sense of hunger but rather the irrepressible need to feel food in his or her mouth. Medical hypnosis is an excellent way to allow the subject to find a better emotional balance at the same time as supporting self-control. Equally interesting may be the use of changing the perception of taste to encourage the patient to experience a different form of comfort by choosing other reward activities.

CASE :A 55-year-old woman wantes to meet me to improve her eating habits and reduce her overweight.In addition to nutritional counselling, she requires the use of medical hypnosis to contain nervous hunger and the abuse of sugary foods. 5 sessions of hypnosis are carried out with formal induction in which she is helped to relax, to have better self-control and to recognize bodily sensations. At each meeting, the patient reports that she still suffers from nervous hunger. I therefore propose a further approach in which I suggest a hypnotic hallucination with a sensory alteration to bring about a change of perception from sweet to savoury taste. During the next consultation she reports having significantly reduced the consumption of sweet foods and increased the consumption of markedly savoury foods. She suggests that she should repeat this exercise but with the introduction of a taste perception of smoked foods, which are not normally to her liking at all. This approach has a very positive impact on her nervous hunger, and the use of Sudoku as a reward activity is spontaneously introduced.

DISCUSSION:The hallucinations induced during a hypnotic session are suggested by the therapist in order to allow the patient to try out an unfamiliar experience. These experiences are helpful in encouraging a better approach to reality. The first approach changing the perception of taste from sweet to savoury shows us how the patient can be strongly influenced

. Modifying food choices demonstrates to the patient the effectiveness of hypnosis. This awareness allows her to propose the solution to her own problem. Moreover she also independently finds a valid alternative to nervous hunger by introducing the use of games such as Sudoku.

References :1.Michael D. Yapko, Trancework, Brunner-Rout

Submitter: Almut Otto

Number and title: 7946 - Hypnose ohne Hypnose in der Zahnarztpraxis

Vor allem Angstpatienten schaffen den Weg in die Praxis häufig erst dann, wenn sie akute und starke Schmerzen haben. Sie sind ein Stressfaktor für alle Beteiligten.

Durch gezielte Kommunikation, ohne klassische Induktionen, lassen sich schnell und sehr effizient gewünschte physiologische und emotionale Veränderungen erzielen. Diese Primingeffekte erzeugen spontane Hypnosen bei den Patienten, die sehr hilfreich im zahnärztlichen Praxisalltag sind. Denn Worte schaffen innere Bilder, Bilder erzeugen Gefühle, Gefühle verändern die Wahrnehmung und dementsprechend die physiologischen Reaktionen.

Nicht nur Worte, sondern auch kinästhetische Reize und Körpersprache bewirken schnelle und effiziente Trancen. Wir werden in diesem Workshop Beispiele auf Video zeigen, Demonstrationen durchführen und die theoretischen Hintergründe erläutern. So können die Teilnehmer diese Techniken sofort in der Praxis umsetzen. Ein Beispiel:

Beim Kürretieren einer Alveole begleitet der Zahnarzt dies mit den Worten: "Es hört sich jetzt so ähnlich an, wie das Auslöffeln eines Eisbechers." Erläuterung: Der Patient hat umgehend eine visuelle Vorstellung, er dissoziiert, der kinästhetische und auditive Reiz wird umgedeutet. Die Vorstellung von Eis ist mit dem Gefühl von Kälte verbunden (Kühlung der Wunde).

Der Einsatz solcher Formulierungen umfasst das gesamte Gebiet der Zahnmedizin. Der Fantasie und der Wortwahl des Behandlers sind keine Grenzen gesetzt – es geht darum, das gewünschte Ziel der Behandlung entspannt zu erreichen. Das Lachen des Patienten ist eine Nebenwirkung dieser Therapie. Auch schwierige Therapien werden für Patient, Mitarbeiter und Behandler als positiv erlebt.

Submitter: Assya Todorov

Number and title: 7947 - Hypnose et thérapie avec le cheval

Hypnosis and Equine-Facilitated Psychotherapy (EFP)

The author is a medical FMH specialist in psychiatry and psychotherapy, a hypnotherapist and also an animal assisted therapist practicing in Geneva, Switzerland. At the moment, she is enrolled in a DAS (Diploma of advanced studies) program in therapy with horses in Lausanne. She divides her time between her private practice in psychiatry and psychotherapy in the city and her activity as a therapist with horses for the Equi page Foundation, which offers sessions of equine assisted therapy and adapted riding.

Thanks to her different professional experiences (psychotherapy, hypnotherapy and animal assisted psychotherapy), the author arrived at certain reflections suggesting that hypnosis might be used advantageously in sessions of equine facilitated psychotherapy (EFP).

To orient the participants in this workshop, we will begin with a session of group hypnosis using a background sound of horses in their everyday habitat.

The author will next present the results of a qualitative study which began in the autumn of 2019 in which each of five patients benefited from five sessions of hypnosis and equine facilitated psychotherapy. These sessions took place at the Hauts de Corsinge stables in the Genevan countryside.

Numerous questions came up during the course of this study: What does hypnosis add to a session of psychotherapy with horses? How does hypnosis with a horse in its immediate environment differ from a session of hypnosis in a medical office? In other words, what is unique to this combination of "Hypnosis and Equine Facilitated Psychotherapy (EFP)"?

The author has wondered about the best way to select a horse and prepare it for a session. How to integrate the horse in the triangular relationship of a session of hypnosis and EFP? How best to prepare the therapist? How to choose the patients for such a session?

Outside the walls of the doctor's office, inside a stable and places usually used for sports activities with horses, where to find an appropriate place to induce a trance?

And indeed, what kind of hypnosis to use?

The results of this study will be discussed, and then a short film with a clinical vignette will show some key moments of this work.

There will be time for questions and exchanges at the end of the workshop.

N.B. Both French and English can be the working languages of the workshop.

Submitter: Salvatore Bellissima

Number and title: 7948 - Hypnosis and virtual reality in psychotherapy: altered states of consciousness?

Altered states of consciousness, even without the use of drugs, have long been known: the near-death experiences, those of sensory deprivation, mysticism, deep meditation testify to this. I hypothesize that hypnosis associated with virtual reality can lead to similar experiences.

A controlled experimentation with brain imaging techniques is difficult to achieve because the VR device cannot be inserted into an electronic equipment: therefore the method used was to compare the values of serum serotonin, and also the ones of the EGG, both in wakeful conditions and in a trance state in VR. These tests were carried out on me, in conditions of rigor and scientific control. This work, which consists in inducing a state of trance on the patient and in the observation of various 3D videos on the VR device, has allowed us to observe how the person reports the lived experience with considerations similar to those of the altered states.

What has been possible to notice is that the serotonin is increased from 119 to 224, while the β waves were dominant among all the waves, when passing from the wakeful state to the trance one. Below there are some statements of patients undergoing hypnosis in VR.

The affirmation of a young drug addict is emblematic: "I felt like when taking on too much ketamine, disconnected from here, out of the world"; “amazing, beautiful, I feel pulled towards the center. I feel sucked by the colours, I felt like I was part of what was ahead of me”; “It would be interesting try it with LSD. What they have in common is that you feel sucked into it”. Another patient was more specific: “It is as if I were alone, alone in the universe. As if this chair was floating in the mesosphere”; Another patient stated: "these geometric figures move languidly around spheres". At last two different patients had similar perceptions: “the ellipses crossed me and gave me a different feeling, they gave me their energy”; "I see the energy of life, it is as if my spirit was connected to this energy, I feel pure and loving".

The patients, undergoing psychotherapeutic treatment, subjected to such experimentation, present greater compliance, openness to novelty and self-esteem that seem to accelerate the process of change.

At the moment no idiosyncrasies, serious states of anxiety or side effects have been detected in relation to the activities performed.

Submitter: Giuseppe Regaldo

Number and title: 7950 - Effects of Self-Hypnosis in Promoting Weight Loss in Patients with Severe Obesity

We present the results of a randomized controllod trial performed with the aim of evaluate whether self-hypnosis added to lifestyle interventions contributed to weight loss, changes in metabolic and inflammatory variables, and quality of life (QoL) improvement in severe obesity.

Individuals (with BMI = 35-50 kg/m2) without organic or psychiatric comorbidity were randomly assigned to the intervention (n = 60) or control arm (n = 60). All received exercise and behavioral recommendations and individualized diets. The intervention consisted of three hypnosis sessions, during which self-hypnosis was taught to increase self-control before eating. Diet, exercise, satiety, QoL, anthropometric measurements, and blood variables were collected and measured at enrollment and at 1 year (trial end).

A similar weight loss was observed in the intervention (-6.5 kg) and control (-5.6 kg) arms (β = -0.45; 95% CI: -3.78 to 2.88; P = 0.79). However, habitual hypnosis users lost more weight (-9.6 kg; β = -10.2; 95% CI: -14.2 to -6.18; P < 0.001) and greatly reduced their caloric intake (-682.5 kcal; β = -643.6; 95% CI: -1064.0 to -223.2; P = 0.005) in linear regression models. At trial end, the intervention arm showed lower C-reactive protein values (β = -2.55; 95% CI: -3.80 to -1.31; P < 0.001), higher satiety (β = 19.2; 95% CI: 7.71-30.6; P = 0.001), and better QoL (β = 0.09; 95% CI: 0.02-0.16; P = 0.01).

CONCLUSIONS:

Self-hypnosis was not associated with differences in weight change but was associated with improved satiety, QoL, and inflammation. Indeed, habitual hypnosis users showed a greater weight loss.

Submitter: Matteo Coen

Number and title: 7952 - Can one monitor the hypnotic state using the bispectral index?

Objective: Hypnosis is a useful therapeutic tool for the as pain and anxiety. Apart from a few unreliable clinical signs, there is no objective and easy way to determine whether the patient is in a hypnotic state, neither to measure hypnosis depth. Both rely on subject's experience and therapist's estimates. The hypnotic state is associated with variations in brain electrical activity. Measuring brain activity using electroencephalography is cumbersome and difficult, in particular for the non-specialist. We hypothesized that the Bispectral Index (BIS), a simplified EEG activity devices commonly used to monitor the depth of anesthesia (pharmacological hypnosis) could be instrumental to measure the global electric activity correlating to a hypnotic state and its depth. BIS values represent an integrated measure of cerebral electrical activity ranging from 0 (absence of brain activity) to 100 (awake state).

Aim: to describe the variations in the BIS during the hypnotic state, and to establish whether these variations correlate with the subjects' perception and therapist's impressions of trance's depth.

Methods: At the end in this study, 12 healthy volunteers will be included. During a standardized hypnotic session of about 30 minutes (induction, relaxation, deepening, safe place, trance termination), the BIS values will be evaluated at three moments: before hypnotic induction, during the session, and after the return to normal state of consciousness.

Results: Herein, we present the results obtained with the first 6 subjects. We observed a significant decrease in the average values of the BIS during the hypnotic state compared to the awake state (83.2 ± 7.3 vs. 97.8 ± 0.6 %; $p < 0.00001$), corresponding to values measured in light and paradoxical sleep (stages 1-2 sleep depth). In all subjects, the BIS rapidly returned to values of the awake state.

Conclusions: These preliminary data suggest that the BIS may represent a simple and reliable tool for the assessment of the hypnotic trance, and to monitor its the depth.

Submitter: Matteo Coen

Number and title: 7953 - Hypnosis in acute medicine. Report of three cases.

Introduction: The use of hypnosis in medicine is rapidly growing. Its application in different medical branches (e.g. dermatology, gastroenterology) are well defined. Yet, hypnosis in the setting of acute medicine has been seldom described.

Methods: Hypnosis was introduced in the University Hospitals of Geneva (HUG) about 30 years in the service of anaesthesiology. Thanks to the recently created "Programme Hypnose HUG" (PHH) a growing number of health care workers are being formed to this therapeutic modality. We report 3 cases in which hypnosis was successfully used. (1) A 67-year old woman was hospitalised for acutely decompensated heart failure needing emergent veno-arterial extracorporeal membrane oxygenation (V-A ECMO) for haemodynamic support. Hypnosis was induced about 10 min prior to procedure initiation and was discontinued at the end of the procedure (1.5 h duration). The medical hypnotist used patient's memories ("being in vacation… shopping at the marketplace") to create an imaginary place (safe place) and reach a state of relaxation. The patient did not complain of any distress during the procedure, without need of anxiolytics. (2) A 75-year-old COPD patient was admitted for acute hypercapnic respiratory failure. NIV was initially refused because of claustrophobia. Hypnosis was then proposed. The metaphor of mountain ascension ("your breath is different… but you enjoy every step") was used to guide the patient through the changes in breathing occurring during NIV. This first session lasted 2 hours (during which the patient felt asleep); the following NIV sessions were more easily accepted. (3) A 34-years-old woman was admitted for a thunderclap headache dur to cerebral vasospasm. Despite opioids the patient was extremely painful. Hypnosis was used to reify (i.e. to make it concrete, as an object) the pain: the constricted vessels were visualised as "dry prunes in a jar" that the patient choose to "rehydrate … slowly…". This visualisation resulted in a rapid reduction of discomfort.

Results: These cases illustrate that hypnosis can be a useful, rapid, safe and versatile approach to many situations encountered within the acute medicine setting and characterised by anxiety, distress and pain.

Conclusion: Our observations, along with those from other medical contexts, suggest a promising role of hypnosis in acute medicine. Further studies are needed in order investigate the indications and the effects in its peculiar setting.

Submitter: Michael Gow

Number and title: 7954 - 'The Double Mirror Technique'- a fast and effective technique for a change.

'The Double Mirror Technique' technique is a method of future rehearsal based on a dual-track model. This is my adaptation of a technique that I first learned from dentist Geoff Graham on the first hypnosis training course that I attended, in 2000. Over the last 20 years my version has evolved following my studying similar dual-track and future rehearsal techniques described by David Spiegel, Michael Yapko, Shaul Navon and Leon Gevertz to name a few. The technique which will be taught is littered with effective secondary techniques and Ericksonian language, all of which will be highlighted and explained. As well as these and the inclusion of my own ideas, I have also incorporated techniques that I have learned from the many fabulous hypnotists who teach at events such as the ESH Congress, BSMDH (Scot) workshops, during my Masters training, from within books. Where possible I will reference the sources, but I would like to sincerely thank all who take the time to teach and pass on skills that help us treat our patients. It is the passion of others to do this that has inspired me to do the same.

I have used this technique literally hundreds of times over the last 20 years and have found it to be fast and effective for anything that requires change in the patient's thinking, motivation, and behaviour. To name a few examples, it can be used for helping patients overcome phobias, addictions (eg smoking), parafunctional habits (eg bruxism, nail biting), hypersensitive gag reflexes, and with lifestyle changes (diet and exercise).

In this workshop I will teach how to establish SMART (Specific, Measurable, Attainable, Realistic, Time-bound) goals with patients and how to utitlise effective positive anchoring. These are essential to the technique and indeed are arguably essential tools to use in ANY hypnosis case.

The guideline script that will then be taught in detail and demonstrated should be considered as such. It is a guideline. The best hypnosis techniques should suit the style and abilities of the hypnotist as well as being appropriate to the patient. The guideline script can and should be adapted as required for each case where it is used and this will be discussed. The technique

that will taught will provide a suggested structure and delegates will get the opportunity within the session to practice the technique with other delegates. I invite you to join me to learn 'The Double Mirror Technique'- a fast and effective technique for a change.

Mike Gow.

Submitter: Juliana Bilachi

Number and title: 7968 - Effectiveness of hypnosis techniques to quit smoking

Effectiveness of hypnosis techniques to quit smoking

Juliana Bilachi and Aldemir Bilaqui

Background: The project was developed at the Institute of Cardiovascular Disease (IMC), and it lasted six months. Quitting smoking is still the only way to prevent the premature death of about six million people across the world each year. The most important factors that affect the efficacy of quitting smoking are the motivation, the identification of the phases and the permission for the subconscious deconstructs the smokers' history with the cigarette.

Objective: The main objective of this treatment is to help patients quit smoking through Hypnosis Methods and to verify the accuracy of the treatment and the guidance according to the smoker's addiction phases; consequently, offering them more comfort and safety during this process in order to avoid relapses.

Methods: This treatment had 30 participants, 15 men and 15 women. The intervention was done through Hypnosis techniques that were based in an eclectic model of this approach. First, anamnesis was done through a Historic Questionnaire, a Survey to identify the addiction phases and The Oxford Happiness Questionnaire (in the beginning and in the end of the treatment). The addicts who were in the second phase had six sessions of hypnosis (9 in total) and the smokers who were in the third phase underwent four sessions (6 in total) ; there were people who were in the fourth phase who attended two sessions (5 in total). The patients were assisted by a medical team, but none of them took drug therapy.

Results: The quantitative result shows the effectiveness of the project developed. The most important information is the number of people who interrupted tobacco dependence: 23 (76%) out of 30 quit smoking, of which 13 (43%) were men and 10 (33%) were women. According to the Questionnaires, the qualitative results present a significant increase of 2 points; there were no changes concerning the final score of 7 patients (7) who did not quit smoking.

Submitter: Juliana Bilachi

Number and title: 7969 - Is Hypnosis efficient in the treatment of Parkinson's disease?

Is Hypnosis efficient in the treatment of Parkinson's disease?

Juliana Bilachi and Isidro Perez Hidalgo

Background: Parkinson's disease is a neurodegenerative disorder that affects dopamine-producing in an area of the brain called Substantia Nigra. In Brazil, the prevalence of this disorder has a rate of around 200 hundred thousand people. The symptoms could develop slowly over years. This case study reports on a 63 year-old male who has experienced a pill rolling tremor in hands, bradykinesia, limb rigidity, gait and balance problem and moderate symptoms of depression.

Objectives: To help the patient to fade the physical symptoms of Parkinson's disease and to get rid of his depressive thoughts and feelings.

Methods: At first, a Historic Questionnaire was applied. The Stanford Hypnotic Clinical Scale (SHCS) was designed to assess an individual's susceptibility to hypnotic suggestion followed by Hamilton Depression Rate Scale (HDRS) and the Perceived Stress Scale (PSS). The Parkinson's disease Questionnaire was done by his neurologist who prescribed him medicines for Parkinson and Depression. Hypnosis was elected as the modality of the treatment of this case after the other intervention failed to produce remission of depressive symptoms. The patient had twice weekly sessions of clinical hypnosis during the first month after once a week session of hypnosis over the course of three months. Self – Hypnosis was practiced during the treatment.

Conclusion: The results of this case study suggest that clinical hypnosis treatment is efficient treatment option for fading Parkinson symptoms. During and after the end of this treatment the patient has been experienced clinical significant improvements in hands tremor, stiffness,

slowness of movements and symptoms of depression. These improvements were confirmed by validated self-reported measures and by the satisfactory qualitative information stated by him.

Submitter: Aminata Bicego

Number and title: 7971 - Etude du dropout lors de prises en charge non-pharmacologiques en douleur chronique

INTRODUCTION : En Belgique, la douleur chronique concerne 1 adulte sur 4. Actuellement, les patients et le personnel soignant incluent des techniques non-pharmacologiques telles que l'auto-hypnose dans la prise en charge globale des patients. Bien que leur efficacité ait été démontrée, peu d'études s'intéressent au dropout (DO) et à ses facteurs explicatifs, dans ce contexte spécifique. Le but de cette étude est de mieux comprendre les facteurs intervenant dans le dropout dans le cadre de différentes prises en charge non-pharmacologiques.

METHODE: 583 patients (âge $\bar{X}$ = 49,5, SD = 13,3, 107 hommes) souffrant de douleur chronique ont été inclus dans l'étude. 211 patients étaient randomisés en 4 groupes : auto-hypnose/auto-bienveillance, musicothérapie/auto-bienveillance, auto-bienveillance, psychoéducation. 372 patients non randomisés ont été inclus dans un groupe auto-hypnose/auto-bienveillance motivation car ils étaient demandeurs d'apprendre spécifiquement l'auto-hypnose. Les variables socio-démographiques et les niveaux d'anxiété, dépression, fatigue, douleur, attitudes envers la douleur, locus de contrôle et qualité de vie ont été mesurés via des échelles standardisées. Des analyses univariées entre le groupe DO et le groupe ayant continué le traitement ont été réalisées afin de sélectionner les variables à inclure dans une régression logistique binaire.

RESULTATS: Aucune différence significative au niveau de l'âge et du sexe n'est mise en évidence entre les deux groupes ($p = .14$ et $p = .59$). Les analyses univariées ont sélectionné le niveau d'études ($p = .007$), l'expertise du thérapeute ($p = .01$), le diagnostic « céphalées » ($p = .04$), les traitements ($p < .001$), l'intensité de la fatigue ($p = .03$), le handicap perçu ($p = .03$), le contrôle perçu ($p = .003$) et la santé mentale ($p = .01$). La régression logistique binaire a retenu le niveau d'études ($p = .02$) et le contrôle perçu ($p = .01$) comme facteurs protecteurs contre le dropout. Plus précisément, le fait d'avoir un diplôme de secondaires supérieures comme diplôme le plus élevé ou de percevoir un certain contrôle sur la douleur ($p < .01$ et $p = .01$, respectivement) diminue le risque d'arrêter prématurément le traitement.

CONCLUSION: Contrairement à la majorité des études portant sur le dropout, notre analyse univariée a mis en évidence des facteurs protégeant les individus d'arrêter prématurément le traitement. Cependant, d'autres études sont nécessaires afin de généraliser nos résultats.

Submitter: Katrin Helbig

Number and title: 7979 - How to use climbing therapy to create a real life experience of coping with problems

The polyvagal theory demonstrates how patients get dissociated from their own body experience because of negative experiences in the past. The consequences are excessive demands on themselves that lead to mental problems. In this context, healing means helping the patients to restore a connection with their own body. This presentation shows how climbing therapy connected with self hypnosis is an effective way to do so. During the presentation the different elements of a climbing session with patients with anxiety disorders are shown with pictures. Furthermore it will be explained how climbing therapy helps overcoming these anxieties. Grawe's Common Factors of Psychotherapy explain why climbing therapy is so effective: during a climbing session a patient experiences actualization of his problems, uses self hypnosis (activation of resources) and is guided by the therapist to reduce symptoms and achieve his own goals (problem solving). In addition, the presentation shows how climbing therapy strengthens the therapeutic relationship, trains body awareness and fosters selfconfidence and mindfulness. Climbing therapy can help patients to overcome their anxieties instead of avoiding them and trains using self hypnosis in an effective way. These experiences can be utilised in many other 'traditional' therapy sessions. Climbing therapy is an example for how helpful it can be to leave the normal therapy setting and focus on actively coping with problems.

Submitter: Ali Özden Öztürk

Number and title: 7984 - "Island" Metaphor and the Hypnosis

"Island" metaphor can be an effective tool in hypnosis.

An island is surrounded by the world. And, each island creates a world in it.

The island is affected by the wind and the sea. Yet, the island has its own dynamics and potentials to face the outer world and to cover an inner world.

For instance, the rocky shore of the island is shaped by the wind and the sea. On the other hand, this high and sharp side of the island protects the island against devastating waves and winds.

In this presentation, I will present how to use "island metaphor" in hypnotherapy with AUCH (Awareness Under Conscious Hypnosis) Method.

"Island" symbolizes the body of the patient. Then, the dynamics and potentials of the island can help to maintain and to achieve the wellbeing of the patient.

AUCH is a state of consciousness created by specific induction techniques and suggestions; and it aims the psychological, physical and social well-being and health of the patient.

AUCH has three main principles which are "Awareness, Differentiation and Feeling". These principles are associated with the three main steps of AUCH©: "MAYA (Making Acceptance with Your Awareness), Induction and Auto-Hypnosis".

Key Words: AUCH (Awareness Under Conscious Hypnosis), Medical Hypnosis, metaphors, resilience, Awareness, Consciousness

Submitter: Juliana Bilachi

Number and title: 7985 - The effectiveness of hypnosis in the treatment of thrombocytopenia and stress: a study case

The effectiveness of hypnosis in the treatment of thrombocytopenia and stress: a study case

Juliana Bilachi and Isidro Perez Hidalgo

Background: Thrombocytopenia is an autoimmune disorder that consists in attacking the immune system body by the production of autoantibodies against the platelets or the megakaryocytes (which is the platelet producing cells). Thrombocytopenia may be inherited or caused by several conditions. The high level of stress could intensify the seriousness of thrombocytopenia.

Objective: The present study case aimed to assess the effectiveness of clinical hypnosis to reduce the thrombocytopenia disease and to achieve the patient's physical and psychological wellbeing.

Methods: This study case had a male patient who is fifty years old. His medical team leaded him to hypnosis sessions. A Historic Questionnaire was applied in the first session. The hypnosis techniques were Progressive Relaxation, Age Regression, Stress Relief, Healing Images, Mind-Body Images, Reducing Anxiety, Age Progressive and Rewrite the Scripts. The patient was attended once a week during three months (12 hypnosis clinical sessions) and at the same time, he did self-hypnosis four times a week.

Conclusion: The clinical application of hypnosis techniques was efficient to reduce the patient's thrombocytopenia disease. He began to use different parts of his mind to think differently, changing the way his body responds. Hypnotherapy helped him to feel, act and behave in healthy and helpful ways.

Submitter: Ernil Hansen

Number and title: 7987 - Recognition and avoidance of Nocebo effects and negative suggestions

Medical situations are hot spots in the life of a patient with potentially long lasting effects arising from the use of either negative expressions or encouraging statements, or the lack of empathy or a positive physician-patient relationship. Health care personnel should be aware of and evaluate what patients are exposed to, hear and see. Knowing more about the effects of nocebos and negative suggestions, combined with increased attention to these matters, provides the basis for better recognition of detrimental influences in their own clinical environment and to be able to avoid, stop or neutralize them. Patients, their symptoms and their healing are negatively affected by the omission of placebo effects, by nocebo effects and by negative suggestions. The models of placebo and nocebo research, namely conditioning and expectation, can valuably be complemented by knowledge and experiences of hypnotherapy, namely trance, suggestion effects and therapeutic relationship.

Applications are presented and discussed including emergency medicine, informed consent, and surgical interventions,

Hansen E, Zech N: Nocebo effects and negative suggestions in daily clinical practice – forms, impact and approaches to avoid them.

Front Pharmacol 2019; 10:77. doi: 10.3389/fphar.2019.00077

Submitter: Anita Jung

Number and title: 7988 - Music in Hypnosis to Attune to Rhythms of Connection

Music and rhythm find their way into the secret places of the soul. – Plato

The Greek philosopher Pythagoras was among the first to recognize the healing powers of music. Milton Erickson, the musician of mind, body and soul, was the first to structure communication for greatest effect so that clients could change many aspects of their life, not merely their presenting symptoms. Just as the cadence of voice and patterns of speech form the music of Ericksonian communication, repetition and rhythm create the emergence of a trance state in music, film, and in poetry. The utilization of art and creativity in a hypnotherapy model functions as a catalyst accentuating the nuances of core competencies such as tailoring, utilization, strategic approach, and destabilization. Elegantly gift-wrapped in landscapes of music, poetry, and film, participants will playfully learn how to cultivate a mutual process of discovery.

The format of the presentation will be didactic and experiential. Steeped in rhythmic components participants will explore how to invite dissonance and harmony and will experience how to awaken a natural process of growth to evoke curiosity and openness to new challenges and possibilities while fostering an innate capacity for healing and learning.

Educational Objectives:

1. Demonstrate and design a consistent method to add hypnotic rhythm to your voice.

2. List 3 songs as a tool to interrupt a pattern and transform a symptomatic state that you will add to

   your current medical or therapeutic practice.

3. Demonstrate and design a consistent method to attune to the rhythm of you and your client to

   increase rapport.

Submitter: Jasmina Markovic Bozic

Number and title: 7989 - PERIOPERATIVE USE OF HYPNOSIS AND ITS APPLICATION IN AWAKE NEUROSURGERY

Medical procedures are associated with great deal of emotional distress that causes direct negative experience as well as the possible negative consequences for patients. It can be used during the preoperative, intraoperative and postoperative period to reduce stress, anxiety, pain, nausea, fatigue, inflammatory response, medication consumption, recovery times and hospital stay. Positive impact has also been shown in patients undergoing awake craniotomy for brain tumour resection.

The awake state is a choice for several neurosurgical interventions. When a tumour is immediately adjacent to eloquent cortex, the awake state optimizes the extent of resection and increases success.

Anaesthesia for awake intracranial procedures requiring patient cooperation presents a challenge to anaesthesiologist. He has to ensure optimal surgical and mapping conditions, make the surgery safe and effective and reduce the stress of the patient (adequate sedation, comfort, prevention of pain and vomiting).

Drugs administered during the procedure should provide an adequate level of sedation and analgesia, but must not interfere with functional testing and electrocorticography.

A variety of anaesthetic methods are used: local anaesthesia (scalp blok, infiltration of dura), monitored anaesthesia care (MAC technique: scalp block and sedation) or asleep-awake-asleep technique (general anaesthesia and awakening during mapping).

The main challenges for patients undergoing awake craniotomies include anxiety and fears, terrifying noises and surroundings, immobility, loss of control, and the feeling of helplessness and being left alone. In such situations, psychological support might be more helpful than

pharmacological approach .

We introduced therapeutic communication with hypnosis leaving patients less sedated and competent during the entire surgical procedure without stress.

Hypnosis session is usually carried out 2-5 days before surgery, to gain patients approval and confidence and to teach the patient how to construct an imaginary place where they can feel safe and protected. We introduced numerical scale for the psychological assessment of the surgery and subjective experience of hypnosis.

Careful patient selection, preparation and attentive cooperation of the medical team are the cornerstone for a successful awake procedure.

The aim of the presentation is to present our protocol for the anaesthetic management and our experiences.

Submitter: Chema Nieto Castañón

Number and title: 7991 - Communication in emergency contexts. The ComS model. Communication for rapid symptom control in high-risk clinical settings: an hypnotic approach

Effective communication in clinical settings is an area of growing interest and relevance. Many studies correlate effective communication with clinical outcomes, symptom relief or adherence to treatment, among others. The particularly demanding challenges that emergency settings pose do enhance the need and importance of effective communication skills. This workshop aims to serve as an introduction to a simple and systematic communication model that can inspire more effective ways of using naturalistic hypnosis in complex clinical contexts for rapid symptom control, rapport building and patient satisfaction.

The ComS model is based on three very basic ideas;

1. relevance of developing a hetero-directed self-trance focused on patient ongoing behaviour

2. reinterpretation of patient behaviour as a symptomatic, negative trance

3. professional opportunity to redirect patient's symptomatic trance to a therapeutic, positive one

a) hetero-directed self-trance

A clinician self-trance is a very interesting tool to debunk conscious interference, particularly in high-risk and challenging situations such as those of an emergency room, as well as to enhance observation skills and a non-judgemental approach.

b) patient's symptomatic trance

Many of the patients admitted to the emergency department show behaviour that can be directly related to hypnotic phenomena and their own experience and mental frame can be equated with (a symptomatic) trance experience. In this context, patient's perceptions,

feelings, thoughts and behaviour can be better understood -and dealt with- as symptomatic trance effects that inevitably turn out as symptom magnification.

c) redirecting patient's negative trance

Conceptualization of patient behaviour as evidence of negative trance also helps clinicians set the therapeutic goal of redirecting patient's symptomatic trance to a therapeutic one. Ericksonian hypnotic language and techniques are used here without hypnosis presentation or formal induction, from "utilization" to basic techniques (i.e. pacing-and-leading) to direct and indirect suggestions (embedded commands, presuppositions, metaphores, etc.), to help the patient regain control, reduce fear, frustration and anxiety and minimize clinical symptoms such as pain.

The 90 minutes workshop will frame a conceptual and practical overview of this model in a thrilling learning experience aimed to develop a mental framework for more effective communication in emergency contexts.

Submitter: Takahiro Imaida

Number and title: 7992 - Effect of belief in supernatural phenomena and dissociatve tendency on the attitude towards hypnosis and expectation about hypnotic state

Introduction: In Japan, hypnosis and paranormal phenomena may generally be identified (Imaida et al., 2019). Moreover, the dissociative experiences may be understood as a supernatural-like phenomena because dissociative tendency causes experiences of loss of initiative, such as possession (Kokubo, 2016). Therefore, when a person who believes in supernatural-like phenomena or who has high tendency to dissociate is induced into hypnotic state, experiences similar with supernatural-like phenomena may occurred. The purpose of current study was to examine the effects of beliefs in supernatural phenomena and dissociative tendency on attitude towards hypnosis and expectations of hypnotic state.

Methods: Participants were 201 university and graduate school students. This data overlaps with that reported by Imaida et al. (2019). Expectation of hypnotic state ware measured by the questionnaire (Shimizu, 2009), and 2 subscale scores were obtained: expectation of loss of initiative and expectation of potential releasing. Attitude towards hypnosis were also measured by questionnaire (Shimizu & Kodama, 2001). The belief in supernatural phenomena was measured by questionnaire (Nakajima et al., 1993), and 4 subscales were scored, such as belief in supernatural power, spirit, superstition, and ancient civilization. Dissociative tendency was measured by Dissociative Experience Scale (Tanabe & Ogawa, 1992)

Outcome: As a result of hierarchical multiple regression analysis with expectation of hypnotic state and attitudes towards hypnosis as dependent variables, and belief in supernatural phenomena and dissociation tendency and interaction among independent variables, belief in supernatural power predict attitudes towards hypnosis, and dissociative tendency directly predicted expectation of potential releasing and attitudes towards hypnosis. In addition, it became clear that attitudes towards hypnosis were increased when both beliefs in supernatural power and dissociation were higher, and expectation of potential releasing were increased when both beliefs in superstition and dissociation were higher. On the other hand, it was found that attitudes towards hypnosis and expectation of potential releasing were suppressed when the belief in spirit and dissociative tendency were decreased.

Conclusion: The results suggests that when applying hypnosis to strongly dissociated client, careful psychological education of hypnosis must be needed.

Submitter: Valerie Dormenval

Number and title: 7993 - Body-safe-place: "qu'est-ce que vous faites pour vous faire du bien?"

SMSH, Bâle, 2020, présentation orale 15 minutes

BODY-SAFE-PLACE «qu'est ce que vous faites pour vous faire du bien?».

Dr. Valerie Dormenval, médecin-dentiste-hypnothérapeute-superviseur

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Introduction:

Cette présentation cherche à montrer l'apprentissage tant côté médecins-dentistes-hypnothérapeutes (MDH) que côté patients d'un exercice simple d'hypnose: le body-safe-place.

Méthode:

Exercice en intervision, par groupe de 2 ou 3 MDH, suivit de la mise en pratique clinique en cabinet médical dentaire, avec les patients.

Présentation de l'exercice d'hypnose:

1. L'hypnothérapeute interroge son patient adulte «que faites vous pour vous faire du bien? » ou son jeune patient (<10-12 ans) «qu'est ce que tu aimes bien faire?»

2. Réponse du patient; le MDH demande de préciser des détails sonores, visuels et kinesthésiques.

3. Le médecin-dentiste-hypnothérapeute demande «où dans votre corps le ressentez vous le plus?»

4. Réponse du patient et/ou geste du patient.

5. Début de transe: induction et restitution exact du descriptif du patient avec le vocabulaire précis du patient.

6. Lorsque le MDH pense pouvoir commencer les soins, il en demande l'autorisation au patient avec un yes set. Demande au patient d'ouvrir la bouche.

7. Faire les soins: (lors de l'exercice: soin=recouvrir la bouche du patient et pincer avec une pince à linge)

8. Décrire la fin de l'activité choisie par le patient pour se faire du bien.

9. Suggestion post hypnotique de facilitation et d'apprentissage

10. Sortie de transe.

Extraits de video d'un groupe de MDH en supervision.

Extraits de vidéo du même exercice au cabinet de médecine-dentaire avec un patient.

Outcome:

- Evaluation de l'exercice en intervision par les médecins-dentistes hypnothérapeutes.

- Evaluation de l'exercice en clinique par les médecins-dentistes hypnothérapeutes.

- Evaluation des soins cliniques par les patients.

Outlook:

Lors de l'exercice en groupe, le superviseur propose des suggestions de facilitation pour les prochaines mises en applications clinique du même exercice par les MDH, tout comme les MDH propose au patient des suggestions post-hypnotique de facilitation et d'apprentissage.

Conclusion:

Bonheur de proposer de se faire du bien, tant pour les patients, que pour les médecins-dentistes-hypnothérapeutes, et aussi pour moi de vous en parler.

Submitter: nicolas GOUIN

Number and title: 7994 - hypnose et psychotraumatismes

Nous vous proposons, dans un premier temps, d'explorer un cas clinique.

La patiente en question a connu plusieurs traumatismes à différentes périodes de sa vie.

Après quelques consultations, où elle apprend les bases de l'hypnose, elle se présente un matin avec tout un scénario imaginaire destiné à « réparer » son histoire traumatique.

Elle demande alors à ce que ce scénario soit utilisé au cours d'une transe hypnotique.

L'hypnose lui permettra de revisiter son passé traumatique sous la forme d'un personnage fictif tout à fait résilient. De son côté, le thérapeute incarnera différents personnages au fil des consultations afin que la patiente puisse vivre différentes expériences réparatrices ; jusqu'à la résolution complète des traumatismes.

En s'inspirant de ce cas clinique, nous vous inviterons dans un second temps à expérimenter cette approche au cours d'un exercice pratique mêlant hypnose et jeu(x) de rôle. Cette façon de pratiquer dans le cadre du traitement des psychotraumatismes peut volontiers s'apparenter à un autre cas clinique d'Erickson : « l'Homme de février ».

Submitter: Miguel Marset

Number and title: 7996 - Application de l'hypnose médicale dans les processus de changement

Introduction

En mobilisant les systèmes sensoriel et émotionnel de la personne, l'hypnose devient un outil thérapeutique orienté vers un changement utile, reléguant notre part rationnelle et sociale au deuxième plan.

L'hypnose permet l'élaboration d'un langage et d'une communication d'accompagnement à la prise de décision, notamment à l'endroit de conduites addictives, dans l'intégration d'ambivalences inhérentes à tout processus de changement, ainsi qu'au maintien des acquis issus du changement, comme dans l'observance thérapeutique des traitements médicaux, par exemple.

Aussi, dans le processus de changement, il est essentiel de construire et de nourrir la motivation du patient en adéquation avec l'objectif visé. Ainsi, l'approche motivationnelle se construit dans ledit stade de contemplation où l'ambivalence, le doute et les difficultés à sortir de la consommation, à atteindre un objectif occupent autant la parole que le système émotionnel.

Méthodes et résultats

La transe hypnotique ouvre un espace contemplatif où le patient passe d'objet de la dépendance à sujet de son propre changement en unifiant et sédimentant un désir de changement qui apparaît souvent de façon polymorphe et éclatée au début du processus. L'état et la pratique contemplatives réduisent la distance entre l'observant (le désir du patient) et l'observé (l'objectif à atteindre) ; cet espace connecte le patient à son espace émotionnel profond, par-delà sa rationalité, dans l'intégration d'ambivalences, qui lui donnes accès enfin à la décision.

Ainsi, le patient va pouvoir s'approprier un objectif au départ abstrait et lointain en lui donnant une forme non plus rationnelle et extérieure mais singulière et intime : une forme dont l'ergonomie renforce les chances d'atteinte de l'objectif.

Notre approche motivationnelle se base sur les techniques des mains d'Ernest Rossi. Il s'agit de renforcer les arguments du patient sur les avantages de quitter la consommation sans oublier l'élaboration des arguments exprimés sur les avantages que la consommation leur apporte, afin de déplacer certaines catégories du jugement qui inhibent le processus de changement.

Conclusions

Nous présenterons notre approche et les résultats basés sur notre activité clinique dans le cadre d'ateliers.

Le dialogue motivationnel dans le cadre de l'espace contemplatif favorisé par la transe hypnotique permet la prise de décisions et l'atteinte des objectifs thérapeutiques.

Submitter: Eniko Kasos

Number and title: 7997 - I am rubber you are glue: The influence of verbal suggestions on the electrodermal orienting response during active-alert hypnosis

I am rubber you are glue:

The influence of verbal suggestions on the electrodermal orienting response

during active-alert hypnosis

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Being exposed to verbal suggestions is an everyday occurrence, and our response may be influenced by several factors (hypnotizability, authority, situation). Carefully formulated suggestions, direct or indirect, form the core of hypnotic interventions. Automatic processes have long been thought about as bottom up processes, but recent studies utilizing verbal suggestions, have been challenging this idea pondering a top down aspect.

The aim of this study is to examine if simple verbal suggestions have any effect on the orienting response, measured by electrodermal laterality differences.

Participants were exposed to two type of suggestions in an auditory oddball paradigm in two conditions. We hypothesized that suggestibility, condition and suggestion will interact, to moderate responses.

Our results indicated differences in SCR amplitudes between the left and right side of the body. Both high and low hypnotizables are affected by suggestions but their responses to

suggestions are dependent on the situation. Interestingly, low hypnotizables during the control situation responded similarly to high hypnotizables during hypnosis.

According to our study, the effect of the suggestion depends on the situation and the suggestibility of the person on the receiving end, indicating that both bottom up and top down activation seem to be involved in the orienting response. Our results reaffirm the clinical usefulness of suggestive communication.

Submitter: Peter Lude

Number and title: 7999 - The Subtle Processes of Coping with Spinal Cord Injuries and Resilience

Based on the oral presentation, the crucial aspects will be deepened.

This workshop will be held in German. "Die subtilen Bewältigungsprozesse"

Introduction

Coping is a very complex process. Over the last decades, research came step by step closer to the subtle processes beginning from disorders such as depression, PTSD, anxiety, then exploring adaptive and maladaptive coping strategies, then investigating appraisals. Longitudinal studies revealed functional and dysfunctional behaviour, coping strategies, appraisals, their relations, correlations and differences in respect of the outcomes and the rehabilitation process as a whole. One might consider the onset of a spinal cord injury as the beginning process of continuing decision making. What causes the individual with a SCI to survive? The psychological process right at the beginning of the coping process could be understood as a "free space" where the psychological decision for life or death occurs or even has to be made. It is the beginning of the long term adjustment process.

Methods

Patients (N=237) sustaining a SCI aged 17 or above were recruited from specialist spinal injuries centres across six European countries. Measures of SOC, appraisals, coping strategies, and psychological well-being were administered at 6 and 12 weeks post-injury and at a 1 year follow-up. A second analysis (N=121) compared the patients with their close persons and a reference sample of the general population (N=306).

Outcome

The first reaction to a SCI is a strong buffering stress-related natural survival process inside the person with SCI, a mobilisation of psychological resources. Interestingly, family members often show the symptoms that are expected to be shown by the person with SCI such as feeling depressed, loss of appetite, sleep disturbance, hopelessness. People scoring high on SOC at 6 weeks post-injury showed significantly better psychological outcomes at 1 year post-injury and SOC showed significant relationships with appraisals at 12 weeks post-injury and coping strategies 1 year postinjury.

Conclusion & Outlook

The body reacts with strong natural survival processes to a vital threatening. It can be assumed that psychological reactions foster the will to survive. How can these processes be influenced and supported in a way that an individual becomes able to live a life with a severe disability and a strong personality? Some crucial aspects will be presented. Psychotherapy might profit from these findings.

Submitter: Floriane Rousseaux

Number and title: 8000 - Comparaison de l'hypnose et de la réalité virtuelle dans la gestion de la douleur et l'anxiété pré et post opératoire en chirurgie cardiaque.

Introduction : L'hypnose et la réalité virtuelle sont de plus en plus utilisées durant les procédures médicales pour diminuer l'anxiété des patients et la perception de douleur. Pourtant, peu d'études comparent ces techniques entre elles de façon randomisée et contrôlée. Notre objectif est de les comparer et de les combiner pour tester leur efficacité dans la gestion de l'anxiété et de la douleur en chirurgie cardiaque.

Méthode : Nous comparons 4 groupes randomisés : contrôle (C), hypnose enregistrée (H), réalité virtuelle (RV) et réalité virtuelle combinée à l'hypnose (RVH). Chaque patient bénéficie d'une session avant l'opération et d'une session 24h après. Une session dure 20 minutes. Les variables anxiété, douleur, fatigue et relaxation sont mesurées avant et après chaque session au moyen d'une échelle visuelle analogique. Un modèle linéaire mixte (GLMM) a été réalisée afin d'étudier l'effet du groupe (C, H, RV, RVH) sur les variables d'intérêt. Ces modèles ont de plus été ajustés par des facteurs confondants potentiels.

Résultats : 100 patients (âge $\bar{X}$=66,18 ; SD=11,48 ; 24 femmes) ont été intégrés dans notre étude. Les résultats montrent une diminution de l'anxiété dans tous les groupes indépendamment de la technique utilisée en préopératoire ($p < 0.0001$). La relaxation augmente également dans tous les groupes en préopératoire ($p = 0.0018$) et post opératoire ($p = 0.03$). Il n'y a pas de différence significative pour la douleur et la fatigue ($p > 0.05$).

Conclusion et perspectives : Les trois techniques standardisées (H, RV, RVH) ne montrent pas une efficacité spécifique dans la gestion de l'anxiété et de la douleur avant et après une chirurgie cardiaque. L'anxiété diminue significativement après les 3 techniques (H, RV, HRV) ainsi que dans le groupe contrôle, ce qui ne permet pas de différencier les techniques selon leur efficacité. De futures études pourraient investiguer l'impact de l'hypnose réalisée et adaptée par le psychologue juste avant l'opération ainsi que quelques jours après celle-ci.

Submitter: Christian Schmitt

Number and title: 8001 - Des techniques utilisées par un anesthésiste en pratique quotidienne en France./Hypnosetechniken eines Anästhesisten in Frankreich

Dans cet atelier seront présentées les techniques utilisées quotidiennement dans ma pratique dans une clinique en France.

Les différentes techniques explorées seront :

- des techniques d'induction directes telles la nano-induction de Gaston Brosseau et une technique derivée des techniques de Spiegel
- le travail avec le temps, en particulier la régression dans un temps proche et la progression avec anticipation au-delà d'un évènement anxiogène
- le travail avec la confusion.

Vidéos Démonstrations et exercices enrichiront cet atelier .

In diesem Workshop werden die alltäglichen Techniken aus meiner Anästhesie-Praxis in einem Klinikum in Frankreich vorgestellt.

Dabei werden verschiedene Techniken gezeigt:

- schnelle Induktionen wie Nanoinduktion von Gaston Brosseau oder eine Technik aus der Spiegeltechnik abgeleitet,
- die Arbeit mit der Zeit, besonders der Rückschritt in eine nähere Vorzeit und der Fortschritt über ein Angstereignis mit Antizipation,
- und die Arbeit mit Konfusion.

Videos, Demonstrationen, und Übungen bereichern diesen Workshop

Submitter: Maria Teresa Corsetti

Number and title: 8003 - Psychological Distress and Quality-of-Life are Improved in Autoimmune Patients through Tandem-Psychotherapy, combining individual hypnosis and Eye- Movement- Desensitization and Reprocessing (EMDR) treatment for trauma, followed by supportive-expressive g

Objective: Autoimmune diseases are associated with psychological distress, resulting in greatly impaired quality-of-life. Tandem-Psychotherapy comprises trauma-focused psychotherapy with hypnosis and Eye-Movement-Desensitization and Reprocessing (EMDR), followed by supportive-expressive group therapy. The objective was to evaluate whether Tandem-Psychotherapy could reduce Psychological Distress and improve Quality-of-Life.

Methods: In a case-control study, 45 patients with autoimmune disorders were divided into two groups: 24 patients in the therapy group (TG) and 21 in the control group (CG).

Therapeutic protocol of Tandem-Psychotherapy

Individual Phase :

The therapeutic protocol was constituited from successive hypnotic steps, tailored on the basis of individual responses. The steps were: 1) relaxations; 2) ego-strengthening, following the Hartland schema; 3) finding the safe place; 4) addressing past memories, with the affective bridge technique; 5) addressing disturbing memories using the silent abreaction technique .

For patients that had partial results after all the steps, EMDR was applied

Group Phase:

After completing the individual phase, the patients were grouped in groups of at least 8 partecipants.

Two therapists ran the group sessions, applying the supportive-expressive therapy. Every session ended with twenty-minutes group hypnosis.

At start-of-treatment point, the patients were evaluated with SCL-90-R for distress and psychological symptoms, Life-Stressor-Checklist- Revised for relevant trauma, and SF-36 for Quality-of-life. SF36 and SCL -90 were repeated at the end of treatment and at 6-month-follow-up.

Results: Relevant trauma was found in 24 TG patients and in 17 CG. 18 TG patients exhibited psychiatric comorbidity with 18 in the CG. At start-of-treatment, all patients exhibited high level of distress (GSI > 0.5) and high Depression and Anxiety scores in SCL-90-R. At end-of-therapy, the TG exhibited greatly improved GSI ($p < 0.001$), Depression ($p < 0.001$), and Anxiety ($p < 0.001$) compared to the GC; SF-36 scores were also much better in the TG, with significant differences ranging from $p=0.002$ to $p=0.0004$ at end-of-therapy. These results persisted at the 6-month-follow- up.

Conclusions: Tandem-Psychotherapy is a way to treat the patients with Hypnosis in a tailored approach. It is effective for improving psychological symptoms and quality-of-life in autoimmune patients with high levels of distress and psychiatric comorbidity

Submitter: Tatiana Siourdaki

Number and title: 8004 - Hypnosis as method of psychotherapy for patients with identity trauma

Recent years have seen more and more research on the role of stress and psychotraumas. Specialists are getting more interested in the subject of unresolved childhood psychotraumas. Identity trauma is a primary kind of trauma when a child is forced to refuse from his healthy identity and healthy desires and identifies himself with the desires and needs of mother (V. Broughton, 2014). A lot of psychological voids and "blind spots" develop amid the deficit of parental love. They may be displayed by developing the following symptoms: post trauma stress disorder, depression, dissociation, interpersonal issues and behavioral management problems.

When we worked with clients with identity trauma, we applied hypnosis interventions in the form of formal hypnosis and communication techniques. Clients were openly offered to experience hypnosis. These theses describe a specific client's case. A woman, 35 years old, married with 3 children, Saint-Petersburg (Russia). She asked for therapeutic help in connection with her "lack of self-confidence and lack of confidence in her professional abilities, and lack of self-love". In the course of the therapy, hypnosis helped reveal identity trauma provoked by defect of parent-child relationship with mother, absence of father.

Using hypnosis in psychotherapy resulted in the connection of the client with her inner resources, freedom of choice and action, independence, drive to something new irrespective of all possible risks and chances; trust to the world and herself, careful and patient attitude towards Self and well-tuned self-regulation; tendency of growth of psychological internality of a person– willingness to take responsibility for your life without relying on others; getting rid of traumatic symptoms, transformation of traumatic maladaptive reactions to adaptive protective responses. Keeping of identity means maintaining emotional resonance with other people under a relative impermeability of your own personal boundaries.

While studies of war time neuroses, accident or natural disaster aftermaths or other emergencies attract a lot of attention, studying of early childhood psychotrauma influence on

developing psychotrauma symptoms among adults is still very little researched. It is worth mentioning that hypnosis as a method of psychotherapy has demonstrated its effectiveness when working with patients with psychotraumas.

Submitter: Peter Stephan Sandor

Number and title: 8006 - Hypnose und Selbsthypnose bei Migräne und anderen Kopfschmerzen

Mit Bezug zu pathophysiologischen Erkenntnissen über Migräne und andere Kopfschmerzen werden Hypnosetechniken vermittelt. Es handelt sich um teils einfache, teils komplexere, aber schnelle und effiziente Techniken, die sich im klinischen Alltag bewährt haben und als Selbsthypnosetechniken gut vermittelbar sind. Bei akuten Schmerzen einsetzbare Methoden werden unterschieden von präventiv anwendbaren Techniken, die teils über verbesserte Stresskontrolle, teils durch spezifische Effekte, wirksam werden könnten. Probiert und geübt wird in Kleingruppen, mit dem Ziel, das Erlernte bereits in der Woche darauf in der Sprechstunde einzusetzen.

Die Zielgruppe sind alle Gesundheitsfachpersonen, die mit Kopfschmerzsyndromen, aber auch anderen Schmerzsyndromen im Bereich des Kopfes zu tun haben.

Submitter: Éva Ilona Bányai

Number and title: 8007 - Long-lasting effects of adjuvant hypnotherapy administered during chemotherapy treatment of breast cancer patients: Hypotheses-testing and beyond the hypotheses.

Despite the propagation of the bio-psychosocial view of cancer, there is an unfortunately small number of controlled studies providing scientific evidence about the role and efficacy of psychological support provided by hypnosis.

On the basis of Éva Bányai's social psychobiological theory of hypnosis conceptualizing hypnosis as a model situation of social support, and on the basis of the marked physiological changes in hypnosis, we hypothesized that an adjuvant psychological intervention that uses hypnosis as a main modality of supporting breast cancer patients will have positive effects on the immunological functions, on the side effects of the treatment, on the coping capacity (psychological immune system), on the quality of life, and on the disease-free survival of patients diagnosed with intermediate and high risk HER2 negative breast cancer.

In order to test the above hypothesis, a randomized prospective outcome study was designed in which the effect of hypnotherapy, administered through headphones during cytostatic infusions (4 AC and 12 PAC) and blood tests, is compared either with the effect of musical assemblies or with the data of a control group without listening to hypnosis or music, but also receiving special personal attention. The blood counts, the NK cell activity, psychological immune competence of the patients, and the quality of life were measured before the first AC and the first PAC treatments, at the end of the chemotherapy, then in every 12 months for 3 years of follow-up. The research has been conducted since October 2011, and the presented results are based on the data of 161 patients.

In summary, the results support our hypotheses concerning better immunological functions and diminished side-effects (see in detail in Jakubovits et al.'s paper), better coping capacity (see Vargay et al.'s paper), longer lasting improvement of quality of life (see Józsa et al.'s paper) as a result of hypnotherapy. Data on survival, however, need a longer follow-up period.

Beyond the hypotheses, on the basis of the content analysis of the patients' subjective experiences and psychological interviews, a marked posttraumatic growth, and a tendency of the patients to pass on the social support were also detected, most strongly in the hypnosis group.

We can conclude that our results confirm that hypnosis is especially effective in mediating social support.

The research was supported by the Hungarian Scientific Research Fund (OTKA K 109187)

Submitter: Pia Puolakka

Number and title: 8008 - Forensic Hypnosis

This presentation is based on a literature review article written as a final paper for forensic psychology specialist training (2017-2019) coordinated by Åbo Akademi University in Finland. The purpose of this review is to examine the practice, risks and limitations of using hypnosis in forensic investigation and judicial proceedings. I will analyze research findings and court rulings and evaluate the reliability and validity of evidence and witness statements obtained through hypnosis. I will discuss hypnosis as a memory tool and a means for procuring evidence for pre-trial investigation in criminal investigations. Moreover, I will examine the misuse of hypnosis for criminal purposes, such as coercion or entrapment. More broadly, forensic hypnosis research is linked to the study of memory functions, traumatic memories and criminal interrogation and interview techniques, in which, for example, false memories, false confessions, non compos mentis determinations and legal protection are key issues. Forensic hypnosis can be said to have two main purposes: 1) to gather evidence for pre-trial investigations and 2) to be presented as independent evidence in legal proceedings. The research question of this article is how and in which cases the use of hypnosis is justified and reliable.

The method was a literature search that was conducted in the PsycInfo database by search terms 'forensic hypnosis' and related concepts such as 'hypnotherapy', etc. Moreover, literature references were collected from a selection of international and Finnish sources. To find news stories about legal cases involving hypnosis, a Google search using the search terms 'forensic hypnosis cases' and 'hypnosis in court' was conducted.

The potential and status of hypnosis depends greatly on whether it is used in the pre-trial phase to find clues and procure evidence to advance a criminal investigation or whether hypnosis-induced memories are presented as evidence in court. In pre-trial investigation, hypnosis-based evidence must be verified by other means in order for it to stand in court. If no other evidence is available, the value of hypnosis-induced memories is therefore minimal and

at best circumstantial. Thus, hypnosis is first and foremost a memory tool, not evidence in itself but rather a way to track, locate and procure evidence and find answers. If, however, hypnosis is considered a means to obtain statements, more efforts are needed to improve hypnosis-based interview methods.

Submitter: Inci Cavusoglu

Number and title: 8009 - Successful management of vaginismus: An Integrative approach & Hypnodrama

Vaginismus is defined as recurrent or persistent involuntary spasm of the musculature of the outer third of the vagina during vaginal penetration attempts , which interferes with coitus and makes sexual intercourse impossible. In this report, we describe the successful treatment of vaginismus in 28 patients in 2017 using cognitive behavioural therapy combined with hypnodrama. The integrative approach involved education, mirror & touching exercises ,Kegel's exercises,,graded insertion of dildos, hypnodrama (ego enhancement ,exposure to dildos, desensitization and sexual intercourse experience under hypnosis)

Submitter: Jlenia Frasca

Number and title: 8011 - Integrated hypnosis with Brainspotting and other techniques, in patients with complex trauma

INTRODUTION: Complex trauma often leads patients to be very defended and to make not accessible the material that should be processed and let go. The blockage can be only psychological or only physical or both. It is assumed that using hypnosis along with other techniques can be a great help in the processing of very severe pains.

METHODS: Ericksonian hypnosis, brainspottingi, emdr, systemic constellations. These techniques are applied depending on the specific situation by acting on different levels:

- body, to increase the tolerance window or to cross the defenses through the body;

- to process traumas that generated ptsd;

- to process epigenetic and transgenerational trauma;

- longer sessions, one and an half hour and two hours;

Results: In acting with different methods have been obtained interesting results in the impact that therapy has in patients with complex trauma. The longer sessions and the use of brainspotting allowed me to welcome the patient more calmly, to enter into the trauma even the pre-verbal one, to act in the bodily memories. The systemic constellations and the change of transgenerational perspective, allowed to leave in the past what continued to be acted in the present. Sometimes the simple application of emdr allowed to process traumas that had generated several ptsd.

COCLUSIONS: Certainly the use of techniques integrated with hypnosis as being more effective in complex trauma. I believe that hypnosis can be considered symbolically as the table on which the dishes (the other techniques) can be choosen by the patients, if of course, we know and allow the use.

Submitter: Éva Ilona Bányai

Number and title: 8012 - Long-lasting effects of adjuvant hypnotherapy administered during chemotherapy treatment of breast cancer patients: Physical indices of immune functions.

Behavioral risk factors such as stress and depression are associated with cancer patients' chemotherapy-induced nausea and vomiting (CINV) and a more vulnerable immunological function. The activity of natural killer cells in the peripheral blood was most significantly affected by social support. Hypnosis is usually applied and investigated in relation to anxiety, vomiting, quality of life, and function of the immune system of cancer patients. The purpose of the present paper was to test the hypothesis that adjuvant hypnotic social support administered during chemotherapy treatment of breast cancer patients has positive effects on the physical side-effects like nausea or vomiting, and on the immunological functions like Natural Killer Cell Activity (NKCA).

In our three-arm study, the moderate-to-high risk breast cancer patients received adjuvant hypnosis versus music or personal attention as control conditions during chemotherapy. Patients received chemotherapy treatments according to standard international protocols (4 Adriamycin/Cyclophosphamid (AC) and 12 Paclitaxel). During the 21 chemotherapy sessions, the patients listened to pre-recorded hypnosis or music via headphones from an MP3 player. We used imaginative active-alert hypnotic suggestions to facilitate the activity of the immune system and the psychological and bodily resources. Observers sat in the treatment room by the patients and noted signs of nausea and vomiting. Blood tests to determine NKCA were conducted before treatment and on the week following the end of chemotherapy.

The results of data analysis show that complaints of nausea and vomiting occurred the least frequently in the hypnosis group (nausea 9.1%, vomiting 0.5%), they were more frequent in the music group (nausea 12.3%, vomiting 1.75%), whereas their most frequent occurrence was in the attention group (nausea 36.8%, vomiting 20.1%). The immunological outcomes showed a favorable effect of adjuvant hypnosis on the NKCA, too. As opposed to the generally reported decrease of NKCA because of chemotherapy, in our groups, the NKCA remained at its initial

value; moreover, after AC chemotherapy treatment, it was significantly higher in the hypnosis group than in the other groups.

We can conclude that the hypnotic social support during chemotherapy protected the cancer patients against the chemotherapy-induced nausea and vomiting and immunosuppression.

The research was supported by the Hungarian Scientific Research Fund, OTKA K 10918

Submitter: Éva Ilona Bányai

Number and title: 8013 - Long-lasting effects of adjuvant hypnotherapy administered during chemotherapy treatment of breast cancer patients: Subjective experiences and psychological immune functions.

Introduction:

Hypnosis in cancer treatment has been extensively studied and has been proven to be beneficial. However, there is limited information available on the subjective experiences of patients undergoing this form of psychological support. The present aim was to examine the subjective experiences of breast cancer patients receiving adjuvant hypnosis/music/special attention during chemotherapy. A further aim was to explore the relationship between the involvement in intrapsychic work as a result of intervention and the persons' psychological characteristics such as psychological immunity, quality of life, and posttraumatic growth.

Methods: Hungarian breast cancer patients received hypnosis, or music, or special attention as an adjuvant treatment to chemotherapy. Patients' psychological immunity (PI), quality of life (QoL), and posttraumatic growth (PG) were measured during a three-year period. Data were analyzed from two aspects, namely, the type of intervention (hypnosis/music/special attention) and intrapsychic involvement in these interventions (high/low involvement).

Outcome:

Differences in psychological outcomes (PI, QoL, PG) were more pronounced according to the level of involvement as opposed to type of intervention. Those patients whose subjective experiences reflect a deeper intrapsychic work as a result of the interventions have a better PI, QoL, PG during treatment and in the follow up period. This difference appears already at baseline. Based on baseline PI and QoL, the level of involvement can be predicted. However, among the three types of interventions, hypnosis facilitates involvement the most.

Conclusion & Outlook:

An association seems to be present between psychological immunity, quality of life, posttraumatic growth, type of intervention, and personal involvement throughout cancer treatment. Higher involvement seems to have a protective effect in preserving a higher psychological immunity, a better quality of life, and a greater sense of personal growth. Hypnosis as an intervention seems to facilitate the most a deeper intrapsychic work and might generate a protective effect for those who show lower PI and QoL.

The research was supported by the Hungarian Scientific Research Fund (OTKA K 109187)

Submitter: Stella Nkenke

Number and title: 8015 - How to support patients with Complex Regional pain syndrome (CRPS) effectively with hypnotherapy Complexes Regionales Schmerzsyndrom (CRPS) erfolgreich hypnotherapeutisch unterstützen

Submitter: Giorgos Sakkas

Number and title: 8016 - Critical Flicker Fusion Frequency as an index for assessing mental alertness during hypnosis.

Hypnosis has proven clinical utility, but the basic nature of hypnotic phenomena still remains unclear. To whether or not hypnosis may involve an altered mental state is still unclear while a hypnotic state has never been convincingly demonstrated, especially involving some objectively measurable and replicable physiological phenomena that cannot be faked or simulated by non-hypnotized control subjects. Critical flicker fusion frequency (CFFF) reflecting/requiring visual integration, visuo-motor skills and decision-taking process might be a powerful, fast and simple tool in assessing mental state in hypnotic states.

The aim of the current study was to examine whether the critical flicker fusion frequency (CFFF), can detect changes in mental state before and after hypnosis.

Therefore 10 healthy volunteers (5M/5F) were assessed using the CFFF index before and after a hypnosis session lasting 1 hour. Cognition and arousal were assessed immediately before the induction phase and immediately after the eye-opening period using CFFF system. All participants were blind on the CFFF score on both time points.

The CFFF score was statistically significantly lower after hypnosis (48±9 Hz vs 42±5 Hz, P=0.02) compared to pre hypnotic state while the range of CFFF was much narrow after hypnosis compared to before (7±4 Hz vs 4±2 Hz, P=0.041) In addition, the magnitude of the changes was significantly greater before hypnosis compared to post hypnotic period (P = 0.04).

During hypnosis, it seems that cognitive performance/ability as it was assessed by the CFFF system is reduced by 12% after one hour of a hypnotic state, reflecting a reduction in visuo-motor and decision taking capacity of the person. In addition, we suggest that the CFFF test is a global marker of cerebral arousal as the result of visuo-motor and decision taking testing based on a simple visual stimulus with an uncomplicated set up that could be used under various conditions and settings.

Submitter: Éva Ilona Bányai

Number and title: 8017 - Long-lasting effects of adjuvant hypnotherapy administered during chemotherapy treatment of breast cancer patients: Quality of life

Although studies demonstrate that hypnosis improves the quality of life of cancer patients, a longitudinal study of its effect is still lacking.

The aim of the present paper is to show that hypnosis administered during chemotherapy and blood tests to intermediate and high risk breast cancer patients can have a long lasting beneficial effect on the quality of life (QOL) of patients, even years after the end of the intervention.
In a randomized, controlled study (see Bányai et al.'s paper in detail), the QOL of 3 groups of patients (listening to 1. hypnosis or 2. music; 3. not listening to hypnosis or music) was measured by the WHOQOL-100 questionnaire after the surgery, at the end of the two phases of chemotherapy and at 12, 24 and 36 month follow up.

The results show that although there was no significant difference among the groups before chemotherapy, during the intervention phase, patients of both the hypnosis and music groups showed more dynamic changes in the QOL than those of the control group without intervention. In spite of the evident negative effects of chemotherapy on the QOL of cancer patients, in the intervention groups we detected positive changes as well already after the first phase of chemotherapy. These positive changes, however, did not prove to be long lasting in case of the music group, since after the 12 month follow up they disappeared almost completely. It is all the more striking in light of this that at the 36 month follow up patients of the hypnosis group still judged their general health and quality of life significantly better than at the first measurement point. This long lasting beneficial effect of hypnosis on QOL seems to be related to a better psychological immunity and a marked post traumatic growth of the patients.

We can conclude that hypnosis has a beneficial effect in breast cancer patients not only immediately after its administration, but its positive suggestions can become internalized, resulting in a better quality of life even years after the end of the intervention.

The research was supported by the Hungarian Scientific Research Fund (OTKA K 109187).

Submitter: Bruce E. Wampold

Number and title: 8018 - Is it the relationship or is it the treatment that makes psychotherapy work? The case for an integrated mode

There has been a tension in the field of psychotherapy between those who think that the benefits of psychotherapy are due to the particular treatment being delivered and those who think the benefits are due to the relationship between the client and the therapist. In this presentation, the importance of relationship and treatment are recognized and integrated into a contextual model for how psychotherapy works. Evidence from psychotherapy, placebo studies, entomology, anthropology, and neuroscience are discussed to examine the complex ways in which psychotherapy works.

Submitter: Ann Williamson

Number and title: 8019 - The Power of words and imagination - managing perioperative anxiety

This workshop will focus on ways that the anaesthetic team can minimise anxiety by the language that they use to their patients. Ways to engage their patient's imagination and focus their attention to help them feel calmer will also be described. These rapid hypnotic techniques can easily be taught to patients so that they have a lifelong tool they can use for anxiety management. Hypnosis has been shown not only to reduce pain and anxiety but also to be cost effective, reducing medication and increasing patient satisfaction.

Learning outcomes:

1. To understand how to avoid negative suggestion and give positive suggestion

2. To be able to rapidly reduce anxiety by utilising the patient's breathing, tension and imagination.

3. To understand some of the recent evidence supporting the effectiveness of hypnotic intervention for procedural anxiety, pain and in perioperative practice.

Submitter: Joseph Meyerson

Number and title: 8021 - The role of hypnosis in the treatment of psychosomatic patients

Over the course of psychosomatic disorders, symptoms, usually emerges as a physiological concomitant of psychic events. Patents, frequently are not aware of or do not agree easily, to consider a psychological component of a psychosomatic disorder during therapy. Hypnotic and Strategic - Ericksonian approach to this patients can help the therapist to address and to treat the psychological roots of the disorder more easily. Throughout the workshop, a practical, diagnostic and therapeutic model for treatment of psychosomatic patients, will be presented and demonstrated on volunteer participants.

Submitter: Olivier Ryhiner

Number and title: 8022 - Hypnose, Meditation, Kontemplation

Drei verschiedene Disziplinen mit einem gemeinsamen Nenner, dem Trancezustand.

Was ist eine Trance?

Wird dieser Zustand durch Fremdbestimmung induziert, oder ist jede Trance letztlich

durch eine Selbst-Induktion gesteuert?

Submitter: Olivier Ryhiner

Number and title: 8023 - Linke Hemisphäre - Rechte Hemisphäre. Entweder - Oder? Nein: Sowohl - Als auch!

Für gute Hypnosearbeit braucht es eine Vernetzung, eine Zusammenarbeit beider Hemisphären: Die rechte Hemisphäre, wo Intuition, analoge, assoziative Denkweise, Emotionalität und Phantasie zuhause sind (die klassische Welt der Hypnose) und die (beim Rechtshänder dominante) linke Hemisphäre, die Schaltzentrale des vernünftigen Denkens, des bewussten Willens, des Engagements und des Commitments, sollen hier explizit zusammenarbeiten. Anders als bei der traditionellen Hypnose, bei welcher der Klient dem Therapeuten weitgehend die Kontrolle über das Geschehen abgibt, arbeiten hier Bewusstes und Unbewusstes (sowohl des Klienten, als auch des Therapeuten!) eng zusammen.

Submitter: Susanna Carolusson

Number and title: 8024 - How to deal with dissociative clients' transference in Ego State Therapy

Theoretical and practical use of the concept "transference". Dissociation as a defence and denial of shameful aspects of trauma. Different ego states in various transferences, illustration of process.

I will present how I integrate "utilisation" of negative transference reactions, with psychodynamic understanding of such phenomena, in Ego State therapy as the choice with dissociative patients. Negative transference has its roots in early life trauma, abandonment, poor attachment and lack of basic trust, which influence future relations to authorities and love objects. Therapists are tested and exposed to repetitions of traumatic relational patterns from the past, by projection. In such cases, the therapy process is all about validating activated traumatic experiences and suggesting imaginary corrective emotional experiences with "child states" in a safe relation. Format: Presentations and discussions, questions and answers.

Submitter: Susan Pinco

Number and title: 8025 - Limbic Communication; the crucial ingredient in Transformative Hypnosis

Like much that is deeply imbedded and emergent in our psyches, the mastery of Milton Erickson often defies a simple explanation. Words may be descriptive but fall short of unpacking the exquisite intricacy of his work. With currents as deep as this it has taken years for Jeff Zeig, one of Erickson's students, to come up with the potent phrase "Limbic Communication" to describe that crucial element that underpins the art and artistry of Erickson and all impactful experiential therapy.

This seminar will introduce you to the concept of limbic communication, explore why it is central to the work of Ericksonian Hypnosis and offer you a frame work for developing your skills in this area. Through lecture and accompanying experiential exercises you will learn how to talk to your clients limbic brain rather than their neocortex and in so doing improve outcomes and facilitate transformation.

Submitter: Mehdi Fathi

Number and title: 8027 - Hypnosis for chronic and cancer pain

Chronic pain refers to pain which remain more than three month unlike medication or interventions. This kind of pain is disastrous specially in cancer patients.

Cancer patients who engage metastasis to the bone have more unpleasant sensation of pain.Then use of some approaches to deal this situations are so important.Many techniques and interventions are produced by physicians such as nerve blocks.In overall metastatic situations high dose of opioids may be needed.Surely these medications have many disadvantages as like as addiction,toleration ,apnea,hemodynamic disability and so on.

Hypnosis has introduced as a safe,beneficial and feasible.Hypnotic trance can dissociate patient from his/her disastrous,pain and unpleasant emotions.Also hypnosis can help the patient to tolerate side effects of chemotherapy and radiotherapy .

Trance and meditation acts by altering brain state via heated imagination.These imaginations result to neuro transmitters which may conclude pain relief.

In this presentation techniques of hypnotherapy for pain reduction in cancer patients would be discuss and some simulations and modeling would be done to better learning.

Submitter: Mehdi Fathi

Number and title: 8028 - Principals of hypnoanesthesia ,Hypnotic suggestion for intra and postoperative pain control

Pain is an individual somatosensory – emotive experience.This emphasizes that we must deal with pain case by case because patients personality is different .Their cognition about pain,their competence and their life styl and attitude would effect their pain perception and pain tolerance.Then many of psychological intervention can help pain sensation.Ther are some well known interventions for this manner including cognitive therapy ,mental relaxation,biofeedback and hypnosis.

Hypnosis is an attentive receptive brain state .Its principle components are absorption,dissociation and reduce peripheral awareness.Hypnoanalgesia has defined as guided imagery that may lead to dissociation to pain sensation or distortion of pain perception.Hypnotic suggestions induce hypnotic state and then hypnotherapist guides them to association of manners that associated to calmness,painless or sensation of other senses far as pain like pressure instead of pain.This suggestion may control pain during surgery.Many reports are about wide variety of surgeries that had done under hypnotic state without using anesthesia drugs.(Cesarian section,labour abdominal surgery,orthopedic operation and so on).

Also suggestion can lead to induce postoperative painless period.It needs to induce conditioning state during surgery and suggest patient to be pain free on postoperative period.

My presentation would including some brief movies about surgeries that I have done them without anesthesia just only through hypnosis and they show intra and postoperative analgesia.

Submitter: Nazmine Guler

Number and title: 8031 - Hypnosis in Emergency Department , "Less Medication , Saving Time"

In the emergency department, hypnosis is mainly used during invasive medical care. Wound suturing of pediatric and adult patients, reduction of articular dislocations, insertion of thoracic drains, lumbar puncture and peripheral venous line insertion are some of the procedures.

In pre-hospital settings, hypnosis helps to manage the patient care in pain and stress.

We also use hypnotic communication in the European emergency call hotline 112. It is important to manage the stress of the caller in order to have the correct information for the emergency situation.

Objective is to Share some of the hypnotic techniques used in Emergency circumstances

Submitter: Gaston Dunkelmann

Number and title: 8035 - Selbsthypnose

1.) Kurzintervention zur Stärkung der Resilenz (G. Dunkelmann)

2.) 10 Schritte Protokoll zur Schmerzlinderung (CH. Ziegler)

Selbsthypnose hat viele Facetten. Es ist eine uralte Methode, mit selbst gewählten Suggestionen und Gefühlen das eigene Lebensgefühl zu beeinflussen. Unser Workshop zielt auf den Gebrauch im gestressten Praxisalltag ab.

Im 1. Teil unseres WS lernen wir eine einfache, hochwirksame Selbstintervention. Diese geht sowohl über Körperentspannung wie auch über inhaltlich individuell angepasste Selbst-Suggestionen vonstatten, die wir einfach erlernen können. In 1 bis 2 Minuten haben wir - zum Beispiel zwischen 2 Patientenkontakten - die Möglichkeit uns zu lockern und zu entlasten. So können wir uns neu an unserem Berufsalltag erfreuen.

Im 2. Teil präsentieren wir ein einfaches 10-Schritte Protokoll, adaptiert nach J. Barber und M. Erickson, zur lindernden Umwandlung von Schmerzen und Erleichterung des Einschlafens. Tiefe Trance, Wahrnehmungsverschiebung

Submitter: Gary Gedall

Number and title: 8037 - Augmented hypnosis

Augmented Hypnosis is defined as a: "A form of hypnosis or trance state, induced and, or reinforced by any external aid or device, other than the voice of the hypnotist."

Using external aids to induce trance states is NOT new, it is, in fact the oldest form of trance induction and reinforcement.

However, few therapists actively think about or use these aids or techniques in their practice of hypnosis.

The aim of this presentation is help us to reflect on how we can increase the efficiency and effectiveness our therapeutic practices.

Submitter: Eric Willmarth

Number and title: 8038 - Favorite Stories and Important Lessons from the World of Hypnosis

Everyone has a favorite story about hypnosis and often these stories provide important lessons regarding clinical applications or about hypnosis itself. This presentation will provide videotaped stories from some of the hypnosis world's greatest clinicians and researchers including Erika Fromm, Eva Banyai, Peter Bloom, Jeff Zeig, Cory Hammond, Harold Crasilneck Sheryll Daniel and others. Each story is selected for a particular lesson and discussion. Perhaps new stories can also be shared in real time!

Submitter: Manfred Prior

Number and title: 8043 - Tranceförderliche Kommunikationsstrategien in "normalen" Therapie- und Beratungsgesprächen

In diesem Vortrag wird erläutert und demonstriert, wie man fördern und wahrscheinlicher machen kann, dass der Klient immer nachdenklicher und nach und nach immer besinnlicher wird. Es wird beschrieben und veranschaulicht, was man genau tun kann, damit der natürliche Gesprächsverlauf mit wachsender Nachdenklichkeit, immer mehr sich besinnen und zur Besinnung kommen in kurze und immer längere und tiefere Trancezustände mündet ohne dass formal eine Trance induziert wurde. Durch die genauen Beschreibungen und Demonstrationen wird auch deutlich, durch welche Gesprächsstrategien man Nachdenklichkeit und "zur Besinnung kommen" erschweren kann.

Submitter: Stéphane Le Toumelin

Number and title: 8045 - Le corps et l'hypnose comme alliés de la réassociation pour les troubles alimentaires.

Dans ma pratique d'infirmier, souvent, j'explique de manière didactique aux patientes atteintes de boulimie ou d'anorexie qu'elles sont déjà en état d'hypnose .

La personne soignée peux ainsi mieux comprendre sa maladie et cela vient en catalyseur de l'entretien motivationnel.

Cela permets à la fois dans mon expérience de construire/renforcer une alliance thérapeutique tout en proposant un début de travail de reconnexion autour du corps.

Je vous propose d'explorer de manière concrète ces aspects,le corps sera au centre des métaphores et des cas cliniques :

- Anorexie une transe par Focalisation ?

- Boulimie comme transe négative

- La posture sur la chaise / Hommage à François Roustang.

- Bain ou Douche ?

- Une armure ? mais comment ?

- Cohérence cardiaque et toucher

durée possible de 25mn à 1h

Submitter: Kathleen Long

Number and title: 8046 - Emotional Baloons and patients from General Practice

A simple technique that can be easily used with children and families and also used by the patient themselves once taught. Allows them to off-load emotions in a simple positive way and collapse emotional anchors and somatic representation of emotion. I designed it to help children express and deal with their emotions in a non destructive way.

A few cases from general/ private practice using simple techniques to resolve quite complex issues and completing the circle.

Submitter: Sylvie Courtis

Number and title: 8047 - Au delà du son: hypnose et vibration

Atelier interactif par étapes successives permettant à chacun de découvrir comment s'harmoniser au mieux selon son ressenti vibratoire face aux situations émergentes. Intégrant la voix, instrumentarium simple, déplacements corporels, positionnement interpersonnels, nous vous proposons d'explorer comment la part vibrante du thérapeute participe à l'accordage subtil du ou des patients.

Ces propositions peuvent être adaptées et utilisées en soins individuels ainsi qu'en thérapie de groupe

Submitter: Frauke Nees

Number and title: 8048 - „Bringen Sie Ihren inneren Kritiker zum Lachen!“ Training von Kreativität und Veränderungskompetenz mit interaktiven Methoden aus dem Improvisationstheater

Übungen und Spiele aus Improvisations- und Bewegungstheater führen dazu, mit der ganzen Aufmerksamkeit im Hier und Jetzt zu sein, wobei sowohl der Körper als auch alle Sinne einbezogen werden. Mit Humor und Leichtigkeit werden im Spiel die Beziehung zu sich selbst und zu den anderen gefördert. Die Entwicklung von Imagination ist von wesentlicher Bedeutung, um aus alten Mustern auszusteigen, etwas Neues zu erfahren und überhaupt in der Fantasie neue, andere Möglichkeiten von sich und der Welt zu entwickeln. Imagination öffnet den Raum für das, was sein könnte und hilft dabei, nicht stehen zu bleiben bei dem, was ist (van der Kolk, 2016).

Es werden Kreativität, innovatives Denken und das Vergnügen, sich auf neues Terrain zu begeben, mit Spaß an der Sache trainiert. Fehler werden als Chance betrachtet und die dabei frei werdende Energie in neue Denk- und Handlungsmuster transformiert, um unbekannte Situationen flexibel und entschlossen zu meistern.

Die Übungen dienen gleichzeitig folgenden Zielen: Kooperative, positive Beziehungen, Zugehörigkeitsgefühl, Emotionsregulation, Gelassenheit, Stärkung der eigenen Identität, Selbstwertgefühl und Selbstbewusstsein, Selbstausdruck, Flexibilität, Spontaneität, Selbstwirksamkeit.

Submitter: John D. Lentz

Number and title: 8050 - Instant Trances

This workshop offers participants new ways of thinking about instant trances and their value. Using slides and stories he will invite you first to think in a different way about trance, and then realize how easily it can be done and then finally that you can do it The author perfected this approach for years working with a population where he could not use formal trance, and still wanted to make a difference. He did and what he learned he is willing to share with you, so that you can utilize these tools easily in your practice. Demonstrating the concept with volunteers, the author will also invite the participants to have the opportunity to practice this new approach if they want, or to simply experience and watch how easy it is to utilize instant trance. He will explain the concept with power point and vivid stories that will make the tool useable in your practice. You will come away with a new way of eliciting and utilizing trance that is instantaneous, practical and simple to do.

Submitter: Consuelo Casula

Number and title: 8063 - Post Traumatic Growth: a bridge toward a healthier future

Positive psychology puts a past trauma on a side of a bridge, and post traumatic growth at the other side. The patient is invited to cross the bridge in a trance state and learn not only to bounce back following trauma but mainly to experience post traumatic growth.

To help the patient to cross the bridge and reach the post traumatic growth the therapist follows a process divided in three phases.

The first phase starts from the here and now of the therapeutic process. The hypnotist helps patients to elicit the hidden resources they have in their current life, recognizing what they have learned that could not have learned in any other way.

The second phase consists in building a safe place where the patient feels secure enough to face the past trauma with the current resources developped after the trauma. In the safe place of the present and with the current resources the patient is ready to see the past traumatic episodes in a different way, to reframe what happened finding a new meaning of his/her life.

The third phase reinforces the meaning of life patients have found in the previous phases and invites them to use their creative immagination to build a healthier future full of hope and resilience. Post Traumatic Growth process helps patients find a way to put their suffering back into the past, creating a scar that allows them to let the wounds heal and become stronger than before.

Learning outcomes

1. Describe the process of helping the patient to elicit his/her current resources. 2.Demonstrate how to bring those resources into the past trauma 3. Discuss the validity of the Post Traumatic Growth process

Submitter: Marcello Romei

Number and title: 8066 - Metaphor and Word Play Hypnothic Strategy in Dentistry.

Since the application of Hypnosis in Dentistry ,there has been a deep question of whether hypnosis is useful enough and if it is usefull through all the different disciplines.

Through all the last year,I have been testing and working with different collegues to understand and achieve this goal in order to firmly prove that using Metaphor,Word Play and other strategies shows acceptable and interesting results.

Furthermore during and after the hypnotic suggestion, patients discover a new situation of calmness and peace through the treatment they never ever have before.

In conclusion,as a clinical proffesional my findings suggest that metaphor and Word play before and after the treatment can positively inluence not only a new " getting on well " relation with our patients but change their physiology for good.

keywords : Metaphor,Hypnosis,Physiology

Submitter: Sara Piri

Number and title: 8067 - Intérêt de la pratique de l'hypnose dans la thérapie PRI pour se connecter avec les souffrances refoulées du passé.

Le but de cet article est de proposer une nouvelle approche combinée de la thérapie PRI avec les techniques hypnotiques adaptées à cette thérapie.

Développé par Ingeborg Bosch Bonomo en l'an 2000, la PRI (Past Reality Integration) est c'est une psychothérapie intégrative qui consiste à faire intégrer des souffrances refoulées de l'enfance dans la conscience adulte.

La PRI se fonde sur le fait que nous avons tous une conscience divisée : une partie de notre conscience perçoit le monde avec les yeux de l'enfant que nous avons été ; l'autre partie voit le monde à travers les yeux de l'adulte que nous sommes devenus.

Pour unifier notre conscience, la thérapie PRI nous amène à affronter et à éprouver consciemment les anciennes douleurs refoulées de notre enfance afin que nous puissions démanteler nos mécanismes de défenses.

Les cinq mécanismes de défense selon la PRI sont des processus de déclenchement d'une émotion visant à détourner le mental de l'individu d'une douleur qui lui serait insupportable : la défense primaire, la peur, le faux-pouvoir, le faux-espoir, le déni des besoins.

Dans la PRI, la régression, est utilisée consciemment comme outil thérapeutique pour donner directement accès à notre conscience d'enfant et la collection de souvenirs menaçants de l'amygdale dans le but de la réguler les émotions désagréables.

C'est donc pour cet aspect régressif et intégratif qu'on fait appel a l'hypnose dans cette thérapie, malgré que Mme Bosch ait déclaré que sa méthode diffère absolument des autres approches régressives dont l'hypnose.

En effet, malgré tout le respect dû à l'excellence de la méthode PRI et de la théorie de Mme Bosch, nous défendons l'idée selon laquelle les techniques de l'hypnose (par exemple « the affect bridge ») peuvent être efficacement appliquées et adoptées dans la thérapie PRI, et la

rendre beaucoup plus efficace. Ainsi nous pensons qu'on peut avoir des suggestions hypnotiques spécifiques et caractérisées pour cette thérapie.

Afin d'évaluer et défendre notre idée, nous avons appliqué la méthode PRI tout en combinant de l'hypnose d'une façonne adapté a la PRI. Pendant deux années, nous avons travaillés sur plus de 200 personnes et à travers une étude randomisée, 30 volontaires ont étés évalués avant et après la thérapie.

Nous souhaitons donc argumenter notre idée à travers les résultats des études de cas qui confirment que l'hypnose peut être efficacement appliquée à la PRI pour obtenir des résultats favorables.

Submitter: Tahir Ozakkas

Number and title: 8069 - Phobias and Hypnotherapy

Phobia is a conscious fear of on object, situation or a condition in which fear develops as a result of avoiding situations.

SOCIAL ANXIETY DISORDERS (SOCIAL PHOBIA)

Social Anxiety (anxiety) Disorder, or commonly used Social Phobia, is an anxiety disorder in which the individual may be embarrassed or embarrassed in social settings where he or she may be judged by others.

The function of Hypnosis in Therapy:

Using hypnosis to aid patients overcome the fear of social situations by reinforcing the idea that it is actually safe by the application of hypnotic prompts by therapists have been put into practice before. In addition autohypnosis has been used to relax patients by changing their thoughts when feelings of hopelessness emerged due to phobic objects.

Exposure, a method used in behavioral therapy developed by Joseph Wolfe, is used in hypnotherapy in combination of hypnodrama by the therapist to desensitize the patient. In other words rehearsal takes place before confrontation.

This is used in stages in every session and helps patients confront their social phobic stimulants.

In the cognitive process of patients shame develops into catastrophe and the approval of others turns into a life necessity.

It is mandatory to give tasks that involve exposure to social environment in the treatment of social phobias.

In addition to lowering anxiety with hypnotic techniques it can be used to generate self value, self, and self appreciation.

A twenty year old male patient came with a complaint of severe nausea and regurgitation when near or inside an environment with young females. Sometimes this situation caused difficulty in going to school, traveling, going to any restaurant or café. Approximately 3 years ago he wanted to pass his letters on to a female friend in the class room. When his other female friends made fun of him by saying "your in love with A." he got so nauseated trying explain the misunderstanding he almost couldn't make it to the bathroom.

Conclusion: It might be necessary to apply fundamental hypnosis, behavioral, cognitive, and other psychotherapy methods by construct

Submitter: Tahir Ozakkas

Number and title: 8070 - Psychotherapy and hypnosis in Turkey

Psychotherapy in Turkey

Psychotherapy in Turkey was supportive and supressive untill the last decade, during which societies for psychotherapy have been established. There are societies focused on behavioral, cognitive, and dynamic psychotherapy. They pragramme courses in their fields. They have established links with international associations and join them; Society for Cognitive and Behavioral Therapy with Emotional Rational Therapy of Ellis, Societies for dynamic therapy in Ankara and Izmir with International Psychoanalysis Association through France. Societies for self psychology are accredited by Chicago USA, societies for object relations by Dusseldorf Germany, Psychotherapy Institute by Masterson Institute in New York.

None of them has integrated hypnosis in their psychotherapy education except Psychotherapy Institute Istanbul established in 2005. In this institute, we prepare hypnosis courses for hypnosis and psychotherapy, 120 and 300 hours. In our psychotherapy education, theoretical hypnosis course of 30 hours has been integrated into 900 hours psychotherapy education. Besides, several videotyped psychohypnotherapy cases are shown and are discussed later.

Hypnosis is used in certain stages in psychotherapy as in sympton suppression, symptom change, analysis, ego integration, endurance to trauma, dissolving traumaz, cognitive reframing, as ego strengthening.

In the last 15 years, hypnotherapies have been integrated into behavioral, cognitive, and dynamic psychotherapies, that we call psychohypnotherapy. The number of psychiatrist for the time being exceeds 100.

Societies for hypnosis programme training courses, workshops, seminars, congresses, translate books etc. Medical hypnosis courses, mostly, have programmed by 'Hypnosis Society' and different Universities, Istanbul together. During a few years, about one thousand medical doctors, dentists, and psychologists have been trained in the courses.

Hypnosis courses mostly programmed by experienced hypnotists and academicians for 3 levels totally 150 hours; beginner, inermediate, and advance. They contain physiology of hypnosis, psychological phenomena, applications to medicine, dentistry, and psychotherapy. They provide general information, ability to hypnotise.

In Psychotherapy Institute, a programme, more detailled and adjuncted to psychotherpy is presented. Hypnosis course is 120 hours and included 4 levels. Hypnosis course integrated into several psychotherapeutic schools.

Submitter: Giuseppe Regaldo

Number and title: 8072 - Hypnosis, maternal representations in pregnancy and prenatal attachment.

The purpose of this paper is to illustrate, through the presentation of a pilot study, the efficacy of hypnosis in increasing maternal imagination and representations of pregnant women and its emotional involvement with the fetus. Maternal representations are the images, the fantasies and related emotions that the woman develops in relation to herself as a mother and to her child during the gestation. The scientific literature highlights the influence of maternal representations during pregnancy on the subsequent mother-infant relationship and the infant's style of attachment at one year of age.

Our study involved eight women in the 36th week of pregnancy. They were interviewed with a semi-structured interview, pre and post- hypnotic treatment. Some of the results that emerged were then correlated with the results of two other instruments: PAI (Prenatal Attachment Inventory) and IRMAG (Interview for maternal representations in pregnancy), previously administered to women. The results showed that most women were able to enter the hypnotic state, experiencing feelings of relaxation and greater contact and emotional involvement with their child; the totality of the sample has succeeded in expanding its maternal imagery and its representations in terms of richness of perceptions, sharpness of the image, with respect to the quality of the representations obtained by the IRMAG, before the hypnosis treatment. The sample stated that it had established a better emotional involvement with the fetus after hypnotic induction. The group of pregnant women also reported high levels of satisfaction with the use of the technique and would recommend it to other women.

Despite these conclusions and the small sample size, it would be good to further investigate the use of hypnosis in the study of maternal representations, given the clinical implications and their relevance for the subsequent mother-infant relationship.

Keywords: Hypnosis, maternal representations in pregnancy, prenatal attachment.

Submitter: Stéphane Ottin Pecchio

Number and title: 8075 - États de conscience dans l'hypnose musicale et l'hypnose artistique.

L'état de conscience du thérapeute qui guide une séance est proche de celui de l'artiste jouant en auto-hypnose. Il associe intention, contrôle et dissociation. Le patient est davantage dans le lâcher prise. La situation est similaire dans l'Hypnose Musicale qui consiste à s'accompagner sur un instrument de musique tout en guidant une séance d'hypnose. Le musicien-thérapeute garde alors le contrôle tout en parlant et en étant inspiré. Cette auto-hypnose active est un état de pleine présence. La musique mène souvent en transe profonde avec amnésie de la séance. L'état dissociatif du musicien en concert peut aller jusqu'à l'expérience de sortie de corps. Sous hypnose, les musiciens peuvent être dépersonnalisés et improviser dans le style de Bach, Chopin... L'intention détermine l'inspiration. En thérapie l'intention donne un cadre à l'improvisation en imposant le respect du patient et de sa physiologie. Si l'hypnose améliore les performances artistiques, l'inverse est peut-être vrai.

Submitter: Orazio Marletta

Number and title: 8088 - Rehabilitation support with hypnosis therapy in cases of food poisoning from botulinus toxin

Abstract

Rehabilitation support with hypnosis therapy in cases of food poisoning from botulinus toxin

By Orazio Marletta

There are more and more cases that place clinical hypnosis in the sphere of therapeutic activity which is useful in the treatment of organic genesis illnesses, demonstrating its importance in the resolution of signs, symptoms and rehabilitation.

In August of 2019, the author was asked to carry out an intervention of hypnosis therapy in a case of food poisoning from botulinus toxin.

I particular, it concerned an aa34 patient with total peripheric paralysis with severe dysphagia and dysphonia, and severe respiratory problems. By that time, the patient needed two months of mechanical respiratory support (paralysis of respiratory muscles and total paralysis of the left hemidiaphragm), use of central venous access for therapy and parenteral hydration, use of PEG (percutaneous endoscopic gastronomy) for enteral feeding and permanent bladder catheter.

The state of the patient's vigilance and awareness regarding their grave condition was total.

The hypnologist was requested in order to improve the respiratory performance and, if possible, obtain autonomous breathing.

The therapeutic project was divided into four sequential phases:

1) Learning the hypnotic process;

2) Increasing the somatic proprioception of the respiratory mechanics;

3) Self-hypnosis training;

4) Weaning the patient off the respiratory therapist.

The therapeutic action proved effective almost immediately.

As early as the first session, the patient showed immediate signs of respiratory resumption; within fifteen days, near total recovery was reached without mechanical support for over fourteen hours non-stop, allowing for the resumption of physiotherapy, along with the improvement of the dysphagia and the near total elimination of dysphoria with recovery of phonatory capacity.

At this point, while this relation is being drafted, the patient moves about with support and is continuing with active physiotherapy.

The case here-mentioned fully fits in with the ever-more evident function of hypnotherapy in treating organic illnesses.

Submitter: Bruno Gomez

Number and title: 8091 - INCEPTION et METAPHORES IMBRIQUEES : (Comment faire du changement une évidence)

OBJECTIFS :

Stratégie thérapeutique : Faciliter le changement en installant d'abord les étapes de ce changement puis secondairement les métaphores imbriquées facilitatrices lors des différentes étapes d'une hypnose à « paliers » par inductions itératives (inception).

CONTENU :

Même quand il est rendu plus aisé à la suite d'une première action thérapeutique, le changement est parfois difficile, entravé par la peur et l'inconfort temporaire qu'il induit.

Il est alors possible de faciliter ce changement en recourant à des « hypnoses dans l'hypnose » qui permettront d'installer le changement comme une évidence avant même les métaphores imbriquées permettant de lever la peur et l'inconfort.

Réalisable en une seule séance reproductible par enregistrement.

MOTS CLES :

Facilitation du changement. Inception. Métaphores imbriquées.

Submitter: Betul Sezgin

Number and title: 8092 - Depression and Hypnotherapy

Depression emerges mostly as a reaction to a loss. This loss can be a situation that develops reactively to cases of losing a member of immediate family, a close friend, a job or failing to achieve something that was hoped. In addition, it also can emerge as a symptom of the personality disorder that was developed with the fixation at the developmental stages because of a trauma experienced at the early stages of life or because of unmet needs. A wide range of treatment methods are used depending on the factor, patient and the doctor who administers the treatment. Hypnosis is also a technique that can be used in this field. It can be attached to the chosen treatment as a relaxation technique, and can be combined with psychotherapy techniques as well. Technically, dynamic therapies attach importance to disclosing the unconscious processes by analyzing them. We cannot change our past but we can change our feelings about the past. We can also change the way of these traumatic memories cognitively processed. The psychodynamic-oriented therapy enables us to reorganize the past memories because of the fact that its memory is plastic. It changes the way we experience the memories. It shows us new solutions and helps us. It aims the restructuring of personality and requires a very long time. This case carries risk in terms of the client continuing the psychotherapy. That is why the attachment of hypnosis to dynamic therapy methods i.e. hypnoanalysis is a helping factor in shortening the duration of treatment, increasing its effectiveness and maintaining its continuity. However throughout history, the view that hypnotic suggestions are directive and they contradict with the dynamic approach has predominated, and that fact has caused that hypnotic methods in dynamic therapies have been neglected. Nevertheless, hypnotic studies that are structured based on cooperation with the client and that are implemented by abstaining from directly steering the client can be used as a much shorter and much more effective way of accessing the symbolic processes, memories and feelings. That eases the exploration and revealing jobs which are among the most important dimensions of dynamic psychotherapy.

Submitter: Isabelle Federspiel

Number and title: 8093 - La bulle enchâssée

Objectifs : La bulle enchâssée est une proposition d'outil hypnotique facile à mettre en œuvre et adapté aux particularités obstétricales de la césarienne programmée. C'est un outil qui permet d'accentuer la perception par la patiente de son l'enfant à naître et en même temps de la protéger du milieu chirurgical qui peut être angoissant.

Matériel et méthodes :

Pour la pose d'une rachianesthésie pour césarienne programmée, les patientes sont installées en tailleur. L'induction hypnotique a lieu par focalisation sur l'enfant à naître dans sa bulle aquatique à l'intérieur du ventre. Puis un second degré de dissociation permet d'approfondir la transe en invitant la patiente à imaginer une deuxième bulle qui l'entoure avec son enfant. Le VAKOG est utilisé pour accompagner chaque patiente dans la création de sa propre bulle. Une fois que la bulle est ressentie ou visualisée mentalement, on suggère la sécurité et le confort pour la maman et son bébé dans cette bulle. La ponction d'anesthésie peut alors être réalisée. Enfin, la patiente est réassociée à la fin de la rachianesthésie ou lors de la naissance.

Résultats et discussions :

Une vidéo de 5 minutes présentera un exemple clinique de cet outil et montrera que cette bulle de protection hypnotique est facilement acceptée par les patientes qui sont dans la majorité des cas très anxieuses et dans un état de transe spontanée. Le premier aspect de cette création est la focalisation sur la perception interne de l'enfant à naître. Elle permet l'ancrage dans le présent et répond à la demande d'être « ici et maintenant » pour la naissance. Dans la deuxième partie de cette création, les patientes décrivent la bulle qui les entoure en énonçant des matières, des couleurs ou d'autres perceptions sensorielles. Cette deuxième bulle leur permet de se protéger, de « s'extraire » du milieu chirurgical, tout en maintenant l'ancrage dans le présent. Cette bulle enchâssée permet de créer un espace de sécurité personnel qui prend en compte la présence de l'enfant et qui est particulièrement adapté au contexte singulier de la césarienne programmée.

Conclusion : L'outil hypnotique de la bulle enchâssée permet d'augmenter le sentiment de sécurité et le confort des patientes sans mettre de côté la naissance à venir lors d'une rachianesthésie pour césarienne programmée.

Submitter: Chantal Wood

Number and title: 8097 - Per-operative hypnosis in awake neurosurgery: dare using paediatric techniques!

Introduction: Hypno-sedation reduces the amount of sedatives and painkillers, and reduces also stress, anxiety, and pain. Some chronic pain conditions require the implantation of an epidural stimulation probe, in awake surgery, with per-operative tests to determine the correct positioning of the electrode. Hypnosis has been proposed to improve what the patient lives during the operation, while optimizing the positioning of the electrode.

Materials: Between May 2016 and August 2019, 60 patients (ages 26-76, 29 women and 31 men) were offered an accompaniment with hypnosis. Before surgery, the patient was seen to establish therapeutic alliance and data collection. Hypnosis was explained as a focus of attention, altering the perception of pain. In the operating room, interactive techniques were used. The patient was congratulated at the end of the surgery.

Results: all the patients experienced this accompaniment in a positive way. The positioning of the probe was optimal.

Discussion: These pediatric techniques (interactivity, active conversational hypnosis, congratulating the patient so that he strengthens his resources) have their place in adults.

Conclusion: Hypnosis has allowed our patients to live the surgical act in a optimal way and acquire positive memory and resources.

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Submitter: Chantal Wood

Number and title: 8098 - Per-operative hypnosis for awake neuro-surgery: dare using inter-active techniques!

Introduction: Hypnosis combined to sedation has been used since 1995 in operating theatres with a decrease in the amount of sedatives, painkillers, reduced stress, anxiety and pain. The management of certain chronic pain conditions requires the implantation of an epidural stimulation probe, set up in awake surgery with intraoperative tests to determine the correct positioning of the electrode. Hypnosis in conjunction with awake surgery, was proposed to improve the patient's experience, while optimizing the positioning of the electrode.

Materials: Between May 2016 and August 2019, 60 patients (aged 26-76, 29 women and 31 men) were offered hypnosis for the implantation of a spinal cord stimulation electrode. Patients were seen before the date of surgery, to establish a solid therapeutic alliance. Data was collected in order to know the interests of the patient, his hobbies, and sensorial channels. Hypnosis was explained as a focus of attention that can alter the perception of pain. Experiential and interactive techniques with conversational hypnosis were used for the preparation and for the surgery and the patients were congratulated at the end.

Results: all patients experienced this accompaniment in a positive way even though surgery could be painful and testing could last long. They kept a positive memory of the surgery and would advise it for other patients. Electrode implantation was improved because of the awake surgery and the participation of the patients.

Discussion: Using interactive techniques improved focusing and gave the patients confidence and security and reduced anxiety and pain while enhancing a positive memory.

In this workshop, together with the presentation and video clips, the participants will learn with exercices, to use interactive techniques, active conversational hypnosis, fundamental for acute pain. They will also work on how to enhance positive expectations which are fundamental in patients with chronic pain.

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Submitter: Dietrich Schauer

Number and title: 8099 - Hypnose und Mind Control – Geschichtliche Hintergründe des MK ULTRA-Programms

George Estabrooks hat bereits 1943 in seinem Buch „Hypnotism" im Kapitel „Hypnotism in Warfare" detailliert beschrieben, wie posthypnotische Suggestionen, Amnesie und andere Techniken strategisch eingesetzt werden können, auch zur "Programmierung" von Attentätern.

1975-77 führte der US-Senat eine Reihe von Untersuchungsausschüssen zu verfassungswidrigem Verhalten der Geheimdienste durch. Der wichtigste war das Church-Committee, benannt nach dem Vorsitzenden. Zwei ganze Untersuchungsausschüsse waren ausschließlich MK ULTRA gewidmet, dem CIA-Forschungsprogramm zu Mind Control, in dem es auch um den Einsatz von Hypnose ging. Hierbei wurden im Rahmen des Freedom of Information Act Original-CIA-Dokumente veröffentlicht, von denen einige der wichtigsten Estabrooks zugeschrieben werden.

Ein besonderes Ereignis war das Attentat auf Robert Kennedy 1968. Der Mann, der als Täter verurteilt wurde, sitzt seit damals im Gefängnis, ist jetzt 76 Jahre alt und kann sich bis heute nicht an die Tat erinnern. Es gibt den Verdacht, dass er mithilfe von Hypnose bzw. Hypnoprogramming dazu gebracht wurde, Schüsse abzufeuern um die Aufmerksamkeit auf sich zu ziehen, während die tödlichen Schüsse von einem zweiten Schützen unmittelbar hinter Kennedy abgegeben wurden. Für diese Version sprechen mehrere forensische Auffälligkeiten, insbesondere die Obduktion und eine Tonbandaufnahme mit mehr als acht Schüssen. Mehrere Hypnotiseure, v.a. Herbert Spiegel, haben sich angeboten mit dem Verurteilten zu arbeiten, um seine Erinnerung an die Tat, an die Zeit davor und daran, wer ihn gegebenenfalls hypnotisiert hat, wieder zu gewinnen, aber es wurde vom Gericht nicht erlaubt. Erst ab 2007 bekam Daniel Brown die Möglichkeit, mit dem Verurteilten in Anwesenheit seiner Anwältin zu arbeiten, allerdings ohne die Erlaubnis Videoaufzeichnungen zu machen. Über seine Arbeit mit dem Verurteilten hat Brown 2018, zum 50. Jahrestag des Attentats, ein Interview gegeben, das unter dem Titel „The Real Manchurian Candidate" auf YouTube zu finden ist.

Schließlich soll auf aktuelle Themen eingegangen werden, wie die Arbeit von Steven Hassan mit Aussteigern der NXIVM-Sekte. Hier wurden nicht nur Hypnose und NLP eingesetzt, sondern mit Technologien kombiniert, wie es bisher nur aus dem MK ULTRA-Programm bekannt war.

Grundsätzlich ist es das Anliegen dieses Workshops, keine wilden Spekulationen zu verbreiten, sondern historische Quellen und die Arbeit der genannten Autoren sachlich darzustellen und zu diskutieren.

Submitter: Michael Schekter

Number and title: 8100 - Stabilization: a key to comfortable hypnotherapy for the patient and for the therapist. Eng/Français

There exist many approaches and protocols using hypnosis to promote positive changes. During the therapy it seems appropriate to say that the therapist's job is to help the patient learn how to use his innate hypnotic abilities but also help the patient feel secure during the therapeutic moment. If the patient's security is endangered he might not be able or willing to continue with a hypnotic approach. Essentially the patient needs to feel in control in the therapeutic setting, but also if he is to use autohypnosis this control must persist outside the therapist's office.

During this workshop we will explore with you

1. a model to codify the quality and the intensity of the patient's presenting difficulty. This approach targets the patient's difficult situation. He is asked to imagine this situation in the therapist's office and to describe his actualized body feelings and emotions. This targeted situation will then be used to test the effectiveness of the stabilization methods proposed during this workshop.

2. several easy to learn methods of stabilization permitting the patient to regain control of himself when distress arises in therapy. The patient will be able to apply these methods throughout his whole life when confronted with stressful situations.

3. (if time permits) a simple method based on actualizing old resources and then anchoring them through easy to do positive age regression. This will permit the patient when he is confronted with a destabilizing situation, to instantly evoke the anchored resource and return to his/her stable state.

The methods will be presented in English and consecutively translated into French. The individual demonstrations and group proposals will also be done in both languages consecutively. The protocols will be available in English and in French for those who participate.

The goal of this workshop is to insure security and comfort for the patient and the therapist during a hypnotic approach to therapy.

Submitter: Miyuki Mizutani

Number and title: 8101 - How can hypnosis be successfully implemented in chronic pain treatment? A report from multidisciplinary pain center in Japan

Introduction

Before fast-acting chemical anesthesia and analgesia, hypnosis had been used as a treatment for pain. Additionally, recent researches have shown evidence of the effectiveness of hypnotic analgesia in pain treatment and the relevant alterations in the brain. Hypnosis and self-hypnosis are useful for alleviating pain.

However, we need to choose patients, situations, and methods to gain stable outcomes. The implementation procedures of hypnosis in our multidisciplinary pain center is versatile enough for a variety of chronic pain situations. Hypnosis is used as one of the adjuncts to standard treatment consisting of medication, nerve block, rehabilitation, and CBT.

Methods

Our pain centers is a tertiary medical institution for chronic pain treatment. Patients at the time of referrals had visited an average of 5 or 6 other facilities. Roughly about 60% of patients improve after 3-6 months of standard treatment. About 5% of patients exacerbate. The remaining 35% of patients neither improve nor exacerbate.

We introduced approximately five percent of patients, mostly among those who exacerbated or who did not respond to the standard treatment, to individualized hypnosis. This 5%-group seems small in number but put a strain on doctors because doctors had to recommend patients to live with severe refractory pain and to modify their attitude to pain merely, which poses a risk of jeopardizing patients-doctors relationships.

Results

The stable outcome is led by two phases of response to hypnosis; In-session analgesia (ISA) and out-of-session analgesia(OSA). Factors related to each phase were identified.

Conclusion & Outlook

For patients who have persistent refractory chronic pain of high intensity, hypnotic analgesia is an important treatment modality. Therefore we recommend each pain center have a clinician who uses hypnosis.

Submitter: Jini K Gopinath

Number and title: 8102 - Indianizing Hypnosis

Indianizing Hypnosis and Hypnotherapy: Indian Psyche and Cultural Interfaces. Do we need a paradigm shift?

Hypnosis and Hypnotherapy are different from all other forms of Psycho-therapeutic media in terms of their approach and process. They interact with the human psyche which is otherwise intangible and indefinable. It is influenced by the therapist and his/her expertise in the school of thought that he follows, whether it is psychoanalytically oriented or new age cognitive behavioural therapy oriented.

Indian psyche is different and at the same time unique in different ways as it is influenced by multiple factors starting from the influx of foreign invaders leading to a multicultural population and also by the trends in globalization and liberalization, that are making their impact globally. Hence the mental health issues presented in our clinics are also different from that of the western world. In this scenario how is it possible to fit our clients to psychotherapeutic modalities developed in the western setting? The role of family, society and the way in which an Indian copes with his problems are all factors that need to be addressed separately as the problems are unique to the setting. Indianization of hypnosis and hypno-therapeutic techniques can be a major step in overcoming this problem. We have parallels in our own scripts and culture. Adapting psychotherapeutic models, specifically hypno-techniques using these parallel, typically Indian models can go a long way in helping hypno-therapy to earn a foothold in the Indian setting.

Submitter: Myriam Birchmeier

Number and title: 8105 - Une danse à 3, La Cyno-hypnothérapie !

Le petit chien, qui était en pension dans ma salle de consultation, est devenu, à ma surprise, une présence hypnotique et thérapeutique riche et stimulante dans certaines situations, en fonction des réactions et du vécu du patient. Sa présence permet d'évoquer toutes sortes d'éléments thérapeutiques, par ex un animal magique, des animaux que le patient a eu dans le passé ou un animal favori.... Il stimule également des métaphores sur l'apprentissage, avec l'évocation de la maman qui apprend toutes sortes de choses à ses petits, ou de l'école des chiots ou des métaphores de la nature, de notre instinct animal... La chaleur qu'il diffuse, sa capacité à s'endormir profondément sur les genoux avec un total relâchement musculaire accompagne le patient avec une présence cénesthésique inductrice d'une transe par mimétisme, ponctuée parfois par des grands soupirs ou des ronflements. Parfois, au contraire, son besoin de bouger, de sauter des genoux est recadré dans la transe par un besoin de changer les choses et d'aller de l'avant... avec le chien qui accompagne, renifle, sent et aide le patient à avancer sur son chemin de vie.... Ou simplement j'utilise le chien comme une présence bienveillante et douce que le patient câline et intègre dans sa transe, dans l'exploration de sa famille intérieure par exemple... Il a également stimulé ma capacité à m'adapter, à la fois au patient et au chien, pour intégrer, en transe, ce qui se présente, dans une danse à 3.

Submitter: Nimet Kirişci

Number and title: 8106 - HYPNOTHERAPY IN POST-TRAUMATIC STRESS DISORDER

HYPNOTHERAPY IN POST-TRAUMATIC STRESS DISORDER

Zenginer Kirisci, Nimet

Abstract

Posttraumatic Stress Disorder (PTSD) is a post-traumatic mental disorder that causes fear, helplessness, or horror reactions in a person. This disease is characterized by relapse of the traumatic event, avoiding trauma-related stimuli, and signs of hyperarousal. Studies untill now have shown that hypnotherapy is an effective method in the treatment of PTSD. It has been reported that hypnotherapy is used for positive reconstruction of traumatic and dissociative memories in PTSD patients; and also self hypnosis is very useful in these people. In this study, hypnotherapy is described and a case of PTSD in which hypnotherapy is applied is presented.

Keywords: Trauma, stress disorder, hypnotherapy, dissociation

Submitter: Matteo Coen

Number and title: 8108 - Communication in medicine: placebo or nocebo?

Objective: Communication between caregivers and patients is a central element of the therapeutic relationship; it has been defined as the most important placebo in medicine. While a poor communication can have harmful effects (patients disempowerment and risk of burnout for caregivers), an effective communication have a plethora of positive effects (e.g. increased pain tolerance and faster recovery). Moreover, in stressful situations the patient is supposed to spontaneously shift to a state of modified consciousness (natural trance state), characterized by an increased susceptibility to suggestions and a reduced critical capacity.

Therapeutic communication, a set of strategies inspired by clinical hypnosis, can easily be integrated into daily clinical practice.

Aim: To quantify the occurrence of inappropriate communication (e.g. negative suggestions, minimizing and negating words) in the interactions between the physican-nurse team and the patient in situations occurring in the wards of the Service of Internal Medicine, of the University Hospitals of Geneva.

Methods: We will analyze the transcripts from high-fidelity simulation studies with a manikin (14 volunteer residents and 14 volunteer nurses randomly paired in 14 resident-nurse teams).

Results: At the end of this study, we will evaluate - the occurrence of inappropriate communication, - which type "communication errors" are the most frequent, - ascertain whether a relationship exist between inappropriate communication and more stressful situations.

Submitter: Maria Schnell

Number and title: 8109 - Nutzung von Metaphern in der Psychosomatik

Körperliches Erleben, auch symptomatisches, befindet sich auf einer anderen Ebene als die Sprache der Gedanken darüber. Das Nutzen individueller Metaphern ermöglicht hier gleichsam ein Übersetzen. Empfindungen, z.B. der Kloß im Hals, können damit auf einer bildhaften Ebene exploriert und bearbeitet werden.

Submitter: Randi Abrahamsen

Number and title: 8114 - European Society of Hypnosis Research Project

INTRODUCTION: Hypnosis has been proven effectively in the treatment of various symptoms and conditions, however must studies have been done in research groups. There is little knowledge of how hypnosis is used in daily clinical practice in outpatients settings. European Society is conducting an ongoing European study, where the effect of treatment with hypnosis in clinical practices (psychologist, medical doctors, dentists) is evaluated on various symptoms throughout cultures and countries.

METHODS: The study has a single subject design. Patients/ clients register their self-evaluated symptoms such as pain, anxiety, sleep depravation, depression, phobia ect. in dairy during one week before treatment, a few times throughout the treatment and again after treatment. With the use of the questionnaire MYMOP patients evaluate the effect of treatment. Hypnotizability is registered on a dissociability scale. Clinicians will register time used with hypnosis.

OUTCOME, CONCLUSION & OUTLOOK: The preliminary results so far will be presented and there will be an opportunity to get further information and join the project.

Submitter: Randi Abrahamsen

Number and title: 8115 - Help your clients/patients reduce sugar consumption with hypnosis

Many persons would like to reduce their sugar consumption to get better health and stronger teeth, but often they find it difficult to deal with the craving and change old habits such as using sugar for comfort and stress relieve. It is very important that the person do not develop an eating disorder. Through the years I have developed methods to help my patients to reduce the use of sugar with the help of hypnosis.

This workshop will focus on hypnotic methods to help develop the resources and empowerment to say no to sugar. Ego-state therapy and use of metaphors can help people overcome the craving for sugar in a balanced way. There will be a chance to practice the methods during the workshop.

Submitter: Mohammad Soukhtanlou

Number and title: 8127 - Persian Norm for the Stanford Hypnotic Susceptibility Scale, Form C (SHSS:C)

The Stanford Hypnotic Susceptibility Scale, Form C (SHSS:C), is the most commonly used measure of hypnotizability. In Persian there was a lack for a valid test for hypnotizability. The norms for different language versions of the SHSS:C are important for evaluating the cross-language validity of the measure and determining the ability to compare the research findings using the SHSS:C samples of different languages. In this study, a Persian translation of SHSS:C was administered to 321 Persian-speaking individuals from the cities Tehran and Mashhad. Then, different parameters of the measure including the distribution, normality, internal consistency, difficulty, and comparison with other SHSS:C norms have been evaluated and presented. The results indicated that the Persian SHSS:C has good reliability which is in line with the other language versions of the scale and the scores from the Persian SHSS:C are comparable to those of the other language versions.

Key words: Hypnosis, Hypnotic susceptibility, Hypnotizability

Submitter: Peter Hain

Number and title: 8129 - Wem das Wasser bis zum Hals steht, der sollte den Kopf nicht hängen lassen!

Die Nutzung metaphorischer Kommunikation und innerer Bilder in der Hypnotherapie.

«Ein Bild sagt mehr als tausend Worte!» Bilder, Metaphern und Geschichten sind seit jeher die wichtigste Möglichkeit menschlicher Kommunikation und Beeinflussung auf bewusster wie auch auf unbewusster Ebene. Religionen nutzen diese «Mehr - Ebenen - Kommunikation» ebenso gezielt wie Politik oder Werbung. Die professionelle Nutzung metaphorischer Kommunikation in der modernen Hypnotherapie ist eines der Verdienste Milton Ericksons. Therapeutisches Arbeiten auf einer metaphorischen Ebene wirkt gleichermassen dissoziativ zu «Symptomen» oder Schmerzen wie assoziativ: Metaphern, innere Bilder oder gemeinsam entwickelte „Lösungsgeschichten" können die innere Beweglichkeit fördern, einen genussvollen und vor allem würdevollen Zugang zu impliziten und neuen Ressourcen bieten und helfen, den als problematisch und beschämend erlebten Kontext umzudeuten.

Theorie: Metaphernmodell nach Lakoff & Johnson, Reframing, Inframing
Praxis: Geschichten, Fallbeispiele, Live-Demos

Submitter: Gunther Schmidt

Number and title: 8131 - Building bridges in couple therapy in a hypnosystemic way: the encounter of „multiple trance beings“ and how one can utilize that in a fulfilling way- or „Polygamous-monogamous“ relationships of „multiple personalities“

In couples relationships very quickly there are built up interactional rituals (the longer the partners are together the more that happens) which function as hypnosis-like priming and which lead to certain routines of consciousness processes with the same quality of what Milton Erickson callesd varieties odf „common every day trance“. This is connected with the activation of certain „partial ego´s“ (sometimes also calles in a rather reifying manner as „ego states“). The partners in the couple are often so associated with these „partial ego´s“ that they think they (and also the partner) would be „just so“. Described in a metaphorical way one can say that each partner is not together with one person but with many „partial persons“ in one partner. So metaphorically each partner lives in a „polygamous“ relationship in a officially monogamous one.

If these processes end up in fullfilling and as beautifully experienced encounters that is wonderful fort he partners. But when the partners experience probelms in the relationship. But when problems in the relationship are experienced usually those „partial egos“ are encountering each other which lead to frustrating and often discounting rituals in the relationship with escalating effects. This is associated with narrowed vision and more rigid rituals of encounter which can destroy the realtionship although one can find constructive potentials in the unconscious „experiential repertoire“ for fulfilling encounters.

In the workshop it will be showed (theoratically and practically)

a) how the emerging „partial egos“ (also those which are experienced up to now as destructive, discounting etc.) can be understood and utilized and communicated as competent „messengers“ of valuable needs;

b) how one can support couples by focussing interventions (e.g. with strategically constructed questions, imaginations, metaphorical and symbolic and also with embodiment- based interventions etc.) in a way that the mutual partners can be experienced as „helpful

reminders“ oft he own optimal experiences for fulfilling encounters. In this way both partners are enabled „to send the most appropriate and helpful ego“ fort he situation and for enriching encounters into the relationship.

Submitter: Gunther Schmidt

Number and title: 8132 - The client as the leading hypnotherapist: Building bridges between the competences of the conscious and the unconscious mind- transparent hypnotherapy which is dignifying the client in a holistic way

In the Ericksonian tradition on the one side it is asssumed that the knowledge and competences are already existent within the clients. But on the other side it is assumed that problems are developped because the conscious mind would be too rigid and to narrowed to be able to use the wonderful competences which are assumed to be stored in the more clever and more competent unconscious mind. Derived from those assumptions many hypnotherapeutic interventions are structured as rather indirect and intransparent for the conscious mind of the clients.

From a hypnosystemic perspective this implies a deficit construction of conscious processes and very often leads to communication processes between therapists and clients in which therapists try to confuse the conscious processes and to irritate and distract them. So the cooperation between conscious and unconscious processes become rather hindered instead of being supported. It can lead to processes as if the therapist builds up a coalition with one part oft he system against another part. The synergetic power oft he whole system can be weakended in this way. And the self-image of clients still can be influenced in a way as if something inside of them is not o.k. or incompetent. And also clients can experience the relationship between them and the therapists as if the therapist is more clever than they themselves. This can end up in one-up-one down-relationships which do not dignify the clients in an appropriate way.

In this contribution it will be shown how with strategies of transparent metacommunication the clients can be won for an effective cooperation between their competent conscious minds and their unconscious mind which is dignifying the whole person. So the clients can also be supported to develop more holistic self-appreciation and adequate context-related solutions which solve unconscious goal conflicts in a constructive way. Clients so can also learn how they create unconsciously (autopietically) their own experience- also their problems- and how they can transform them in constructive solution.

Also the distribution of roles and inputs both of clients and therapists can be developped into a co-creation of competent and equally ranked cooperation partners with at last the client as the autonomous authority oft he process. This could also be called as „democratic hypnotherapy“.

Submitter: Johannes Oehlmann

Number and title: 8134 - Die Klangreise

Ursprüngliche Instrumente wie Trommeln und Gongs werden seit alter Zeit und in vielen Kulturen zur Begleitung von inneren Reisen benutzt und sind besonders für Klangreisen geeignet.

Klangreisen sind eine moderne Verbindung von Hypnose, Hypnotherapie und Musiktherapie, die im Einzel- und Gruppensetting verwendet werden können. Besonders im Einzelsetting können Innenbildreisen prozesshaft begleitet werden.

Gleichzeitige verbale und nonverbale Aspekte der Tranceinduktion vertiefen den Zugang zu vorher unbewussten Bewusstseinsschichten. Tiefgehende organismische Entspannung sowie bildhafte Tranceprozesse können erlebt und therapeutisch utilisiert werden. Die Verbindung von Klang, Zeit und Stille öffnet den Zugang zu inneren Wirklichkeiten.

Wir laden ein zu einer entspannenden Reise mit den langklingenden Klängen von Gongs und mit den pulsativen Rhythmen der Rahmentrommel und geben Hinweise zu vielfältigen praxisbezogenen Einsatzmöglichkeiten.

Submitter: Norma P. Barretta

Number and title: 8143 - Creativity and hypnosis

If any therapeutic technique needs a touch of creative ingenuity, it is the use of hypnosis. There are literally thousands of hypnotic scripts beautifully crafted yet none can match up with a spontaneously delivered creative hypnotic induction/intervention meticulously created SPECIFICALLY for the person experiencing the hypnosis!

This workshop presents a series of unusual activities designed to elicit the participant's own creative abilities. While we ordinarily think in logical sequential patterns, moving from left brain to right brain invites the person to tap into CREATIVE ways of thinking and responding.

Challenging and enjoyable and even occasionally frustrating, the practice of these "mind-stretchers" will intrigue....maybe even"entrance" participants into their own altered states.

Submitter: Denis Mirlesse

Number and title: 8152 - Uncommon hypnotherapy: tips, tricks and pitfalls of single sessions, group work and recorded interventions

Today's practitioner has many opportunities to deliver hypnotherapeutic interventions outside the traditional one-on-one, multiple sessions, treatment framework.

Evidence-based research requires standardized protocols, which may be delivered through recorded scripts. Many psychotherapeutic interventions increasingly involve group work.

However, remarkably little references or trainings are available for these uncommon formats of interventions. This hands-on workshop is based on the presenter's personal experience of delivering group interventions, single sessions and recorded material over a number of years in a secondary healthcare setting (drug and alcohol services).

Participants will be invited to share their own experience, in order to assess the pros, cons, scope and limitations of such interventions, in order to develop blue-prints .

The following points will be addressed:

Traditional hypnotherapy vs Single sessions/group hypnosis/recordings: similarity, differences, challenges and benefits.

Favourable and unfavourable indications.

Scope and limits of the therapeutic content.

Global architecture of interventions.

Rapport, expectations and priming.

Induction strategies (beyond progressive relaxation).

Utilization of symptoms, patterns and environment.

Themes development: embedded metaphors, content-free alternatives.

Risk management: emergencies, abreactions, safe termination.

Technology: what to use and what to avoid.

Putting it all together: blueprints and checklists for uncommon hypnotherapy.

The presenter is bilingual and happy to interact in English and in French.

Submitter: Enayatollah Shahidi

Number and title: 8154 - Utilizing Utilization: Strategies to Increase Treatment Efficacy

This workshop will provide a description and demonstration of strategies for identifying client strengths and resources that be nurtured and incorporated into hypnotic treatment. Each of the two facilitators will present their own approach to utilization.

Dr. Jensen will begin with a brief presentation of research findings demonstrating the central role that client's "self-talk" (i.e., self-suggestions) plays in facilitating or suppressing goal attainment. The facilitator will then demonstrate the use of two strategies (open questions and reflective listening) to identify the helpful self-suggestions (to be nurtured) and less than helpful self-suggestions (to be gently altered).

Dr. Shahidi will then share his own way of utilization with the workshop participants. He will explain why therapists should avoid standard usual predetermined approaches to therapy and instead discover clients' current beliefs, attitudes, and feelings by careful observation of explicit and implicit cues. Although everything can be utilized, not everything needs to be utilized! The facilitator will discuss and demonstrate how to utilize the utilization techniques of acceptance, pacing, leading, selective attention, and seeding to catalyze the process of therapy.

Using a co-therapist approach, Drs. Shahidi and Jensen will then demonstrate how their approaches can be integrated in a live clinical session. Participants will then be encouraged to practice the strategies to increase their confidence in being able to use the technique in their practice. The workshop will end with a group discussion of the techniques and approaches presented that participants will find most useful in their clinical practice.

Learning Objectives:

1. Understand the role that automatic thoughts (also known as "self-suggestions") play in an individual's psychological function and behavior.

2. Be able to avoid predetermined approaches to therapy and instead actively look for and identify significant explicit and implicit symptoms.

3. Be able to use specific utilization techniques, including at least three of the following: (a) use of open questions, (b) reflective listening/selective attention, (c) acceptance, (d) pacing, (e) seeding, and (f) nurturing.

Submitter: Alistair Dobbin

Number and title: 8156 - Memory: The Bedrock of Distress and Recovery

Since the early observations of Freud on free association, memory has been in (sometimes) and out (mainly) of fashion as a source of distress and a force for recovery. After many years of working as a family doctor and hypnotherapist, I stumbled on a sports coaching programme which I found to have transformative effects on depression, anxiety, burnout and rehabilitation. The recovery elements were observed in a study in depression in Primary care, and this was supported by analysis by Kings College. Some of the patients described accessing and integrating trauma memories whilst using this programme, which shares a common state of autonomic physiology and consciousness with hypnotherapy. This led to a collaboration with McGill and UQAM, and using the programme in an experimental blinded trial we have validated their ground breaking work on the effects of episodic memories, which above all other factors appear to govern long term psychological functioning and wellbeing. Out of this we have created a new model of distress and recovery (NeMesIS) which also underpins our therapeutic programme, Positive Mental Training, found in our NHS accredited app. I am sure that anyone who is a hypnotherapist will recognise how well this model fits with their own work as hypnotherapists. We also feel that this research gives a strong endorsement for anyone looking to research in hypnotherapy outcomes in health services or in a wider experimental context.

At this conference I propose to describe the model in a brief presentation of the principles of our model to conference, and also to run a workshop along with my co-author Sheila Ross, on how this model can inform what we do now, and look for ways of improving our current practice. We will discuss the synergies we see with hypnotheraputic practice (age regression, affect bridge, collapsing anchors etc etc all of which we have used with success) and look at patient stories of their memories and the effect of mental training. We will hopefully learn from you also as to where you see this research informing your practice.

Submitter: Christiane Steffens-Dhaussy

Number and title: 8157 - Approche non verbale dans un contexte multilingue - Découvrir une nouvelle méthode : La psychologie énergétique du Dr. Gallo, atelier d´initiation

Cette nouvelle approche en psychologie associe l'hypnose, la médecine traditionnelle chinoise et les neurosciences. Son diagnostic et ses techniques non-verbales permettent un travail d'hypnose particulièrement adapté dans des contextes multilingues comme p.ex. en hôpital ou avec une clientèle multiculturelle en cabinet. La psychologie énergétique propose des traitements « sur mesure » d´une efficacité impressionnante. Elle a fait ses preuves dans des situations d'intervention de crises et en trauma-thérapie et peut être appliquée aussi bien dans la thérapie d'enfants que d'adultes. Diverses études internationales montrent que le traitement par la psychologie énergétique est rapide, et que les résultats sont stables.

Christiane Steffens-Dhaussy, psychologue, psychothérapeute avec ses racines en hypnose ericksonienne, a été formée par le Dr. Fred Gallo lui-même. Elle pratique la psychologie énergétique depuis plus de 12 ans dans un contexte multilingue au Luxembourg. Formatrice certifiée depuis 2016, elle a reçu l'autorisation du Dr. Gallo pour introduire cette méthode dans les pays francophones. Suite aux succès rencontrés lors des Forums de Clermont-Ferrand et Montpellier, elle a traduit le manuel en langue française et développera un concept pour les soignants. L'institut Milton Erickson du Luxembourg est le premier institut francophone à proposer la formation en psychologie énergétique en langue française.

Objectifs de l'atelier :

Introduction à cette nouvelle méthode d'intervention psychologique

Compréhension de la logique d'intervention et du champ d'application notamment dans un contexte multilingue

Premières expériences avec une technique de « premier secours » : Midline Energy Treatment

Contenu de l'atelier :

Introduction à la psychologie énergétique du Dr. Gallo. Présentation de cas cliniques et de résultats d'études. Démonstration de la méthode et possibilité pour les participants de faire leurs premières expériences personnelles. Introduction au Midline Energy Treatment qui est est une technique de « premier secours » non verbale facilement applicable dans un contexte multilingue.

Submitter: Marie-Jeanne Bremer

Number and title: 8161 - Tristesse et deuil : voies de guérison à travers l'empathie pour soi-même et pour l'autre

Mme A. arrive dans le bureau de consultation tout en pleurs ; les lamentations accompagnent sa description des derniers jours et des dernières heures passées avec son père. Ce dernier est décédé subitement quelques jours auparavant. Et puis, dans ce discours de transe spontanée où la personne est focalisée sur la souffrance, il y a une accalmie, un moment privilégié qui est comme une pierre angulaire permettant au thérapeute d'orienter le patient dans une voie de guérison.

L'objectif de la présente intervention est de pouvoir utiliser un moment privilégié du discours du patient pour initier la métamorphose du deuil en recadrant d'une part la tristesse comme un lien d'amour et « com-union » et de stimuler et nourrir des aspects comme l'empathie et la consolation. ; soit en conversationnel ou en hypnose formelle.

Contenu : Ce sera une intervention ponctuée « d'histoires de rencontres » qui mettent en lumière les différentes étapes de ce cheminement vers une intégration plus sereine de la situation de tristesse ou de deuil.

Et si le temps le permet, l'intervenante proposera cet exercice au groupe de participants pour pouvoir vivre cette expérience.

Mots clés : deuil, empathie, réconciliation, consolation

Submitter: Gunnar Rosén

Number and title: 8578 - Clinical use of hypnosis in the treatment of chronic pain

Uncovering underlying mechanisms and the personal experience of pain.

Then use recourses of the patient to create a functional treatment plan

with hypnosis.

Submitter: Yeganeh Farahzadi

Number and title: 8620 - Brain-to-brain Coupling during Hypnotic Induction

Introduction

Recent brain imaging studies on language reveal that a large part of the brain is coupled between speaker and listener, including regions that are specific and nonspecific to language processing. These common patterns of neural activities could indicate that activation in the listener's brain could be partly explained by the information in the speaker's brain. Studying simultaneous interaction of two brains, which is putatively referred to as brain-to-brain coupling, could give us new insights about hypnotic phenomena; hypnosis, after all, could be thought of as a verbal communication between two persons who are engaged in social interaction. Accordingly, the current study aims to investigate the underlying neural coupling of two brains during a hypnotic interaction.

Method

First, we pre-screen subjects for a pool of medium to highly susceptible individuals using an online tool which is based on the Brief Susceptibility Scale. Each participant will then complete all the following four experimental conditions: 1) A hetero-hypnosis session, in which, after induction, participant is given an olfactory hallucination suggestion, 2) same olfactory hallucination is suggested but without induction, 3) hypnotist tells a story about the history of medical hypnosis, and 4) participants listen to a hypnosis induction but are instructed to not follow the instructions, that is, not to go into hypnosis.

Outcome and Conclusion

Electrophysiological activities of both hypnotist and subject will be recorded using EEG. The dyadic EEG datasets will then be analyzed using CCorr method to study brain-to-brain coupling at the level of functional connectivities. This method is less prone to spurious correlations caused by common sources. The outcome of this exploratory analysis will provide a measure

of brain-to-brain coupling between the hypnotist and a hypnotized subject, which could, in turn, provide an improved neural model of hypnosis that incorporates social interaction, and in particular verbal communication.

Submitter: Marta Nowak-Kulpa

Number and title: 8780 - Ericksonian Hypnosis in a Surgery Clinic

This presentation will teach participants skills in using metaphors, stories and hypnotic conversation to help patients experience a deep contact with themselves so that they can survive and even thrive following life-changing surgery. The material will focus on Ericksonian approaches that help patients heal, experience comfort, and restore body homeostasis. Clinical examples from patients undergoing transplantation – including face transplantation – will be presented. For some patients, the therapeutic goal is to help them return to a state before the disease - as in the case in breast reconstruction after mastectomy. For other patients, such as those undergoing amputations or transplantations, healing is associated with developing a new and positive image of themselves. An Ericksonian perspective will guide the practice opportunities. The focus will be on how to best adapting the psychotherapy to the individual patient's needs, abilities, and healthy possibilities. Just as surgeons precisely reconstruct the patient's body that is impacted by disease, so Ericksonian psychotherapists tailor-make treatment for each patient.