



The Healing Power of Hypnosis

The latest research shows that it eases pain, speeds healing, increases fertility, even fights cancer.

by Alexis Jetter

Wendy W.* couldn't believe it: Her cycles had always been very regular, but the minute she decided to try to get pregnant, she stopped menstruating. After 4 months without a period, the 24-year-old nurse at Dartmouth-Hitchcock Medical Center in Lebanon, NH, consulted an OB/GYN who was a fertility specialist. He couldn't find the slightest thing wrong with her or her husband. Okay, she concluded, I guess my mind has stopped my period. She called the hospital's psychiatry department. "I want someone good," she said.

Da-shih Hu, MD, a psychiatrist and an assistant professor at Dartmouth Medical School, invited Wendy into his office. They talked about her life, marriage, and work but found no obvious reasons why her reproductive system had shut down. When Hu suggested that hypnosis might help, Wendy bristled. "I thought he was literally nuts," she says. "I knew nothing about hypnosis, except that it's a bad Vegas act. And I hate magicians."

But two sessions later, with nothing to lose, she decided to give it a try. Hu asked her to close her eyes, take a deep breath, and imagine a wave of relaxation spreading slowly from her toes to the top of her head. "It was the feeling you get right before you go to sleep," she recalls. At the doctor's instruction, she took several more deep breaths, until she felt herself drifting off. Soon, her head slumped toward her chest, and the straight-back chair seemed to morph into a comfortable recliner. Hu asked Wendy to imagine a safe, restful place to visit, and at her suggestion, they "walked" to a waterfall. "Do you hear the sounds of water?" Hu asked. "Do you feel a breeze?" A quiet fluidity entered her soul, instilling a sense of peace she'd never known.

"I was in the room, but I wasn't there," she says. "I was above myself, looking down, like a mom looking down at a child. And I had this amazingly powerful feeling: I felt like I could fix myself." Hu later asked Wendy to think of a day when she should start menstruating. On that very day, her period started. Soon afterward, she became pregnant, and 9 months later, her son was born.

A funny thing is happening to hypnosis, long a feature of vaudevillian routines: It's becoming respectable, working its way into premier research hospitals, medical journals, and doctors' offices throughout the US. An increasing number of physicians are using hypnosis to ease patients through childbirth, angioplasty, chemotherapy, breast biopsy—even full-on surgery.

*She asked that her last name not be used.

Hypnosis is helping people get over fractures, burns, migraines, asthma, fibroids, peptic ulcers, and skin disorders. The same techniques practiced by ancient Egyptians 2,000 years ago and "discovered" by Austrian physician Franz Anton Mesmer in the late 1700s are now scoring impressive results in medical experiments across the United States, Europe, and beyond. Mind, it seems, really can overcome matter.

"If somebody told you there was a medication that could treat 100 different conditions, didn't require a prescription, was free, and had no bad side effects, you wouldn't believe them," says Harvard Medical School psychologist Carol Ginandes, PhD. "I don't want to sound like a snake oil salesman, because hypnosis is not a magic wand. But it should be made available as a supplementary treatment for all patients who could benefit. Right now."

Helping the Body Heal Itself

Hypnosis appears to speed recovery from many types of trauma. In a 2003 pilot study, published in the *American Journal of Clinical Hypnosis*, Ginandes and colleague Patricia Brooks, PhD, evaluated 18 women who'd just undergone reconstructive breast surgery. The patients were assigned randomly to one of three groups for 8 weeks. All groups received conventional follow-up care; the second also met weekly with a therapist for emotional support; while the third met individually with Brooks, who used hypnotic suggestion in a 30-minute session each week to reduce pain and inflammation and speed soft-tissue repair. An audiotape was made for each woman in the hypnosis group so she could practice self-hypnosis daily at home.

One week after surgery and again after 7 more weeks, a surgical team, which was "blinded" to the therapy

assignments, assessed the incision sites. Their conclusion: The hypnosis patients healed much faster. The women also reported that they experienced less pain and quicker recovery.

An earlier Ginandes pilot study on hypnosis and bone fractures, funded by the National Institutes of Health, found similar results: faster healing, greater mobility, less discomfort, and reduced use of pain medication among orthopedic patients who used hypnosis.

Physicians have long been frustrated in their attempts to treat patients with irritable bowel syndrome (IBS), whose symptoms--sharp abdominal pain, diarrhea or constipation, bloating, gas, and backache--are compounded by stress, anxiety, and depression.

In 2003, doctors in Manchester, England, released a study that had tracked 204 IBS patients for 5 years. Patients at South Manchester University Hospital attended up to 12 hypnosis sessions over 3 months and were encouraged to visualize soothing yet empowering scenes inside their colons.

One woman imagined her gut as a flowing, colorful scarf. Another saw her colon as a runaway train whose driver had gone to sleep. She took over the controls and slowed down the train to a comfortable speed.

The results exceeded the researchers' expectations: More than 70% of the patients rated themselves "very much better" or "moderately better" after hypnotherapy. Five years later, 81% of patients who'd initially benefited from the treatment reported that the improvements had lasted. Their anxiety and depression were reduced by at least half, as were their reliance on pain pills and the number of doctor visits they made.

In another study, Olafur Palsson, PsyD, a clinical psychologist at the University of North Carolina at Chapel Hill School of Medicine, reported an 80% success rate among 18 IBS patients who were treated with hypnosis after conventional care failed. Those results, coupled with several other recent studies on IBS and hypnosis, are remarkable, says psychologist Arreed Barabasz, PhD, director of the Hypnosis Laboratory at Washington State University and editor of the *International Journal of Clinical and Experimental Hypnosis*. "These findings show that benefits of hypnotherapy for IBS are long lasting and that continued improvement after hypnosis treatment ends is the norm."

Warts are uniquely vulnerable to hypnosis--it beats the usual treatment, salicylic acid, hands down. In a Tulane University study of 41 patients whose warts would not respond to other treatments, 80% were cured with hypnosis. Studies suggest that other skin conditions may also respond: In a trial of 18 patients, hypnotherapy cleared up eczema symptoms--itching, sleep disturbance, and stress--for up to 2 years.

Few examples of hypnotic healing are as dramatic as those that come from treating burns. Dabney Ewin, MD, a clinical professor of surgery and psychiatry at Tulane University School of Medicine, hypnotizes burn victims in the emergency room. Ewin's published case studies include a restaurant worker who burned his arm up to his elbow in a 370°F deep-fat fryer. The doctor induced a deep trance within 4 hours of the accident and provided hypnotic suggestion--"all your injured areas are cool and comfortable"--to the victim.

Ewin and others have shown that such care can slow or even stop the inflammation and blistering that can cause permanent damage. In the worker's case, the injury healed in 17 days with relatively little scarring. Ewin uses a series of slides to show examples of burns in which early intervention prevented serious, lifelong injuries.

Easing Pain

Work with burn victims demonstrates another benefit of hypnosis: It's an astoundingly powerful pain reliever, says David Patterson, PhD, chief psychologist at the University of Washington's Department of Rehabilitation Medicine, who copublished an extensive review of the topic in the American Psychological Association's *Psychological Bulletin* in 2003. "Hypnosis seems to be useful for virtually every clinical pain problem imaginable," he says.

One of the biggest risks after a severe burn is infection, which can lead to scarring, amputation, or even death. To prevent that, nurses at burn units have to remove patients' dead skin every day for several weeks, even months, in a process called debridement. The pain is so severe, it can cause more anguish than the original burn. To ease it, patients are given morphine and other powerful pain relievers, but those drugs can be habit-forming and can cause confusion, gastrointestinal upset, and breathing trouble.

At Seattle's Harborview Medical Center, Patterson has been using hypnosis for 20 years to make that pain bearable. His team of 10 psychologists teaches the most severely burned patients, who appear to benefit most from hypnosis, how to induce a state of relaxation and comfort. The session includes an instruction--called a posthypnotic suggestion--that cues the patient to feel the same level of comfort days, weeks, or even months later. A simple touch on the shoulder by a nurse, for example, if suggested in the original session, can trigger a trance, enabling a patient to undergo wound care without pain.

"Hypnosis is very well suited for burn pain treatment," says Patterson, "because the pain is intense but short-

lived, and you know when it's going to happen."

Pregnant women, too, have a pretty good sense of when the pain is going to start--and hypnosis has proven helpful in easing labor. Several studies, including a new one out of the University of Adelaide in Australia that surveyed 77 women who'd been hypnotized during delivery, have shown it can shorten labor time, reduce pain and the use of pain medication, decrease the risk of complications, and speed recovery.

In the Australian study, hypnotized mothers were less likely than others to need an epidural or labor-inducing drugs. Some other reasons you might want to try it: Children born to hypnotized mothers scored higher on Apgar tests (a measure of health)--and the mothers were less prone to postpartum depression. What's more, those who have previously given birth without hypnosis tell doctors that it makes labor a more pleasant experience.

People with peptic ulcers may not know when pain will strike, but they can still use posthypnotic suggestion. Patients in a British study were able to regulate their secretion of gastric acid, so that only 53% experienced further pain, compared with 100% relapse in a control group.

One in four Americans doesn't get regular dental care, or avoids dentists altogether, simply because of anxiety. Some dentists and oral surgeons assume that hypnosis takes too much time to be useful in their busy offices, but most patients can benefit with just 5 minutes of hypnosis-related relaxation training, says Al Forgiione, PhD, a psychology professor at the Craniofacial Pain Center of the Tufts University School of Dental Medicine. The technique won't eliminate the need for novocaine, but it takes enough of the edge off to allow fearful dental patients to get the care they need.

Finally, there have been more studies on the effect of hypnosis on headaches than on any other form of chronic pain. It helps reduce the frequency, duration, and intensity of migraines and other headaches by as much as 30%.

Making Surgery Safer

Robert Scott, 64, was hit by a truck when he was 4 years old, leaving him with a crushed bladder. Now, with a good-natured smile, the retired school custodian relies on hypnosis to cope with the minor but painful surgery he must routinely undergo. Scott comes to Beth Israel Deaconess Medical Center in Boston every 8 to 10 weeks to have a urinary catheter--which is attached to his kidney through a hole in his back--pulled out and replaced.

While a team of doctors and nurses in green scrubs gathers surgical equipment and readies the massive, whirring, x-ray-guided scope overhead, Scott lies on his stomach, listening to the softly delivered instructions of Gloria Salazar, MD, a radiologist and hypnotherapist. She sits by Scott's head, encouraging him to relax and imagine a place he'd rather be. "Your body needs to be here," she says gently. "But you do not." She reads to him from a script used on all hypnosis patients at the hospital. Scott closes his eyes, takes a series of deep breaths, and seems to drift off to sleep. As doctors insert a long guide wire into his back, Scott doesn't flinch. When they fish the 12-inch catheter out of his kidney and guide a new one down in its place, he doesn't seem to even notice.

"With other patients, we use intravenous pain medication," says attending radiologist Salomao Faintuch, MD, as he pulls the tube out. "But we know Mr. Scott responds well to hypnosis, so we use only local anesthesia." Sedatives such as Valium and morphine prolong operations and can cause complications, Faintuch adds, so it's better to do without if the patient can handle it.

Scott can handle it because he's whisked his mind far away from the doctors probing deep inside his body. "I have a meadow that I go to, and there's a pond, which I put ducks on," he says after Salazar guides him back to full consciousness with a reawakening cue. "I take my granddaughter fishing. We talk and play." Five years ago, when he got intravenous sedation instead of hypnosis, Scott says, "it felt like someone took a piece of steel and stuck it right into my kidney." Now, he says: "I feel a lot of pressure, but no pain." Does the meadow really exist? "No." Does the granddaughter? "Oh, yes," he says with a smile. "But she's only 2 months old."

This is no ordinary hospital ward, but then its director, Elvira Lang, MD, is not your average administrator. Lang, a radiologist and Harvard Medical School professor, has transformed the interventional radiology department at Beth Israel Deaconess--where MRIs, x-rays, and ultrasounds are used in unclogging arteries and shrinking tumors--into a 24-hour, hypnosis-on-request unit. Virtually any patient, undergoing nearly any procedure, can receive hypnosis-induced pain relief within minutes. ("We don't always use the 'H' word when we talk to patients," Faintuch confesses, "because they think of people on TV who do silly things. So we say relaxation exercises.")

In 2000, Lang published a groundbreaking study on surgical hypnosis that many physicians credit with helping to legitimize the technique's role in the operating room. The study traced the outcomes of 241 patients randomly assigned to receive hypnosis, standard anesthesia, or sympathetic (but nonhypnotic) care while undergoing minor surgery. Lang and her colleagues found that patients who were guided through hypnotic relaxation during surgery used 50% less pain and antianxiety medication, suffered 75% fewer complications, and left the operating room 17 minutes sooner than the other groups. In a follow-up study, Lang found that hypnosis is a cost saver,

too--halving the \$638 sedation costs of minor surgery.

Lang suspects that hypnosis helps patients tolerate operations by stabilizing heart rate and blood pressure. She's looking to see if it can substitute for sedation in women undergoing needle biopsies for suspected breast cancer, women having uterine fibroid surgery, and patients receiving chemotherapy for malignant liver tumors. The studies, funded by the federal government, are not yet complete, but Lang says the preliminary results are encouraging.

Elsewhere, doctors have recorded great success using hypnosis on patients undergoing complicated, high-risk surgery. At Dartmouth-Hitchcock Medical Center, doctors use hypnosis to reduce pain and nausea among epilepsy patients who have electrodes placed inside their skulls to detect the source of their seizures. At the University of California Davis Medical Center, doctors didn't even need to formally hypnotize spinal surgery patients in order to limit their blood loss during the operation. They simply told 41 patients that blood would flow away from their backs during spine surgery. These patients lost roughly 650 cc of blood on the operating table; others on standard sedation lost nearly twice that.

Relieving Cancer Symptoms

David Spiegel, MD, a psychiatry professor at Stanford University and a leading researcher on medical hypnosis, has found that the approach can help some patients with terminal cancer live longer and more comfortably. Spiegel studied 125 women with metastatic breast cancer. Those who learned self-hypnosis techniques had 50% less pain than women receiving standard care--and lived, on average, 1 1/2 years longer.

Part of the reason may be that the nausea, anxiety, and all-around lousy feelings induced by chemotherapy can be alleviated by hypnosis, several studies have shown. Boris Lavanovich, 51, a real estate consultant in Ludlow, VT, used hypnosis to cope with an experimental chemotherapy regimen he took to treat chronic lymphocytic leukemia, a lethal blood cancer. "They told me I was stage 4, out the door," Lavanovich says with a dry chuckle. The mountain biker and skier needed medication to counteract nausea, convulsive shakes, and rapid temperature swings brought on by chemotherapy. Without the self-hypnosis training, Lavanovich doubts he could've tolerated the treatment or that he would have benefited.

Lavanovich's experience is one hypnotherapists see time and again: A patient has only to try the technique to become a believer. That's what happened with Wendy, the skeptical nurse who used the therapy to conceive her first son. She had a second without incident, but when she and her husband decided to try for number three, once again her periods vanished. This time she didn't hesitate: She turned to hypnosis, imagining the waterfall and soft breeze that got her body back on track the first time around. It worked--she's now the mother of four sons.