Abstracts of the Current Literature

Anbar R.D. & Hall H.R. (2004). Childhood habit cough treated with self-hypnosis. *Journal of Pediatrics, 144*(2):213-7. To better understand factors associated with the development and persistence of habit cough and to report use of self-hypnosis for this condition, a retrospective chart review was performed for 56 children and adolescents with habit cough. Interested patients were instructed in self-hypnosis for relaxation and to help ignore the cough-triggering sensation. The patients’ mean age was 10.7 years. The cough was triggered by upper respiratory infections in 59%, asthma in 13%, exercise in 5%, and eating in 4%. Onset of the cough occurred as early as 2 years, and its average duration was 13 months (range, 2 weeks to 7 years). There was a high incidence of abdominal pain and irritable bowel syndrome in the 50% of the patients who missed more than 1 week of school because of their cough. Among the 51 patients who used hypnosis, the cough resolved during or immediately after the initial hypnosis instruction session in 78% and within 1 month in an additional 12%. Habit cough is triggered by various physiologic conditions, related frequently to other diagnoses, and it is associated with significant school absence. Self-hypnosis offers a safe and efficient treatment.

Bryant, R. A. & Mallard, D. (2004). Reality monitoring in hypnosis: A pilot investigation. *International Journal of Clinical & Experimental Hypnosis, 52*, 188-197. In a pilot investigation of reality monitoring in hypnosis, 10 high and 10 low hypnotizable participants were administered a hypnotic suggestion to hallucinate a visual shape on a wall. For half the participants, an image was subtly projected onto the wall at the commencement of the suggestion and then subsequently removed. For the remaining participants, the projected image was initially absent and subsequently projected. Participants completed ratings of belief in the suggestion during hypnosis and also provided subjective reports of the suggestion during a subsequent Experiential Analysis Technique session. High hypnotizable participants who had the projected image introduced at the end of the suggestion provided comparable belief ratings when the image was present and absent. In contrast, highs who had the projected image presented first reported less belief when the image was absent than when it was present. Low hypnotizable participants rated the hallucination more strongly when the image was projected than when it was not projected. These pilot data are discussed in terms
Faymonville, M., Roediger, L., Fiore, G. D., Delgueldre, C., Phillips, C., Lamy, M., Luxen, A., Maquet, P., & Laureys, S. (2003). Increased cerebral functional connectivity underlying the antinociceptive effects of hypnosis. *Cognitive Brain Research, 17*, 255-262. This study assessed changes in cerebral functional connectivity related to the hypnotic state, compared to simple distraction and the resting state. Nineteen highly hypnotizable right-handed volunteers were studied using positron emission tomography (PET). The experimental conditions were hot-noxious or warm-nonnoxious stimulation of the right hand during resting state, mental imagery, and hypnotic state. Using a psychophysiological interaction analysis, we identified brain areas that would respond to noxious stimulations under the modulatory action of the midcingulate cortex in, and only in, the hypnotic state. Hypnosis, compared to the resting state, reduced pain perception by 50%. Pain perception during rest and mental imagery was not significantly different. Analysis of PET data showed that the hypnotic state, compared to normal alertness (i.e., rest and mental imagery), significantly enhanced the functional modulation between midcingulate cortex and a large neural network encompassing bilateral insula, pregenual anterior cingulate cortex, presupplementary motor area, right prefrontal cortex and striatum, thalamus and brainstem.

Gravitz, M. A. (2004). The historical role of hypnosis in the theoretical origins of transference. *International Journal of Clinical & Experimental Hypnosis, 52*, 113-131. There has been a gradual evolution of the important construct of transference from ancient to modern times. Long before Franz Anton Mesmer, there were philosophers, theorists, and health professionals who emphasized the impact of interpersonal relationships on well-being and illness. While basically conceptualizing animal magnetism as a dynamic physical fluid, Mesmer was also aware of the impact of rapport and affect in the enhancement of magnetic treatment. Later neo-mesmerists, notably Puyssegur and Deleuze, built on such theories. That emphasis continued through the nineteenth century to the time of Freud, whose construct of transference was derived from his personal experience with hypnosis and which has since become an integral part of modern psychodynamic theory and treatment.

Harandi, A. A., Esfandani, A., & Shakibaei, F. (2004). The effect of hypnotherapy on procedural pain and state anxiety related to physiotherapy in women hospitalized in a burn unit. *Contemporary Hypnosis, 21*, 28-34. Due to severe pain and anxiety in burn patients, especially in procedures such as physiotherapy, and because of the adverse effects of pain on the outcome of physiotherapy, application of adjunctive methods are necessary for achieving pain relief. Right now, no certain method of pain reduction is available. This study evaluated the efficacy of hypnotherapy in reducing pain and anxiety in burn patients through a randomized clinical trial. From amongst women hospitalized in a burn unit, 44 patients were selected and divided into intervention and control groups. The intervention group underwent four hypnotherapy sessions and the control group remained without any hypnotherapy intervention. Procedural pain and anxiety related to physiotherapy were evaluated with Visual Analogue Scale (VAS) contemporaneously in both groups. The degree of pain and anxiety caused by physiotherapy decreased significantly in the intervention group, as compared to the...
control group \( (P < 0.001) \). Hypnosis is recommended as a complementary method in burns physiotherapy.

Hergovich, A. (2004). The effect of pseudo-psychic demonstrations as dependent on belief in paranormal phenomena and suggestibility. *Personality & Individual Differences, 36*, 365-380. This paper describes two experiments which investigate the effects of pseudo-psychic demonstrations (i.e., conjuring tricks which could be misinterpreted as genuine paranormal phenomena). In the first study, a demonstration of a supposed medium was presented to 91 subjects individually, in which the playing card selected by a subject was identified telepathically. It was found that hypnotic suggestibility and belief in paranormal phenomena had a large effect on how the demonstrations were assessed. Suggestible persons or believers in paranormal phenomena were more impressed by a phenomenon and were more likely to rule out the possibility of fraud than were persons who were less suggestible or believed less in paranormal phenomena. In the second study, two trick demonstrations were shown. In each case, half the subjects \( (n = 68) \) were given the information that this was a magic trick, and the other half were told that this was a paranormal demonstration by a medium. The results with respect to belief in paranormal phenomena confirm the results of Study 1. Believers in paranormal phenomena, as compared with sceptics, tended to view the demonstrations as examples of paranormal phenomena, regardless of the information they had received, they tended to rule out the possibility.

Meyerson J. & Gelkopf M. (2004). Therapeutic utilization of spontaneous out-of-body experiences in hypnotherapy. *American Journal of Psychotherapy, 58*(1), 90-102. An out-of-body experience (OBE) is a unique dissociative event in which the person feels separated from his/her body. Studies and anecdotal reports have observed that this experience tends to appear spontaneously in stressful and hypnagogic situations. It often contributes to the person’s later having a new perspective of himself and his conception of the world, and may influence his functioning and behavior. Despite its potential as a powerful therapeutic lever in hypnotherapy, little has been written about applying OBE in this milieu. The current article describes three individuals who were contending with different therapeutic issues (i.e., symbiotic involvement, somatization, and cessation of therapy) for whom spontaneous OBE was used therapeutically during hypnotherapy and proved to significantly advance the therapeutic processes. In accordance with the literature, and as observed in the presented cases, we have found that the OBE experience tends to appear in dissociative and highly suggestible subjects. Furthermore OBE may help those patients to cope with strongly anxiety-loaded issues that arise in therapy and may function, through the «body-self» detachment experience, as a therapeutic metaphor for promoting complex separational processes. In view of the cases described, a spontaneous OBE appearing in hypnotherapy is proposed as an effective therapeutic resource.

Nash, M. (2004). Salient findings: Pivotal reviews and research on hypnosis, soma, and cognition. *International Journal of Clinical & Experimental Hypnosis, 52*, 82-88. Recently, nine especially important critical reviews and research studies have appeared in the general scientific and medical literatures pertaining to four areas of applied and scientific hypnosis: management of pain, treatment of gastrointestinal
disorders, adjunctive hypnosis in outpatient surgery, and error in memory. Together, these articles examine matters of soma and cognition that are at once core to scientific hypnosis but also of keen interest to clinicians. The studies and reviews are conceptually ambitious and methodologically sophisticated. The findings enlighten medical and scientific readers about what hypnosis is and what it is not.

Raz, A., Marinoff, G. P., Zephrani, Z. R., Schweizer, H. R., & Posner, M. I. (2004). See clearly: Suggestion, hypnosis, attention, and visual acuity. *International Journal of Clinical & Experimental Hypnosis, 52*, 159-187. Some reports claim that positive suggestion (e.g., using hypnosis) can significantly improve visual acuity (e.g., in myopes). Based on behavioral, neurocognitive, and ophthalmological findings, the authors provide a critical account to review and challenge some of these data. While acknowledging the relative merits of hypnosis for investigating visual phenomena, an array of arguments converges to propose caveats to the apparent influence suggestion can exert on visual acuity. The authors argue that neither suggestion nor hypnotic phenomena are likely to significantly improve myopic vision and contend that a responsible scientific attitude should carefully outline what hypnosis and suggestion cannot do in addition to what they can. It seems likely that the small apparent influence of suggestion on visual acuity is mediated by changes in attention. The authors outline how attention can affect visual acuity.

Sadler, P. & Woody, E. Z. (2004). Four decades of group hypnosis scales: What does item-response theory tell us about what we’ve been measuring? *International Journal of Clinical & Experimental Hypnosis, 52*, 132-158. To overcome problems with previous psychometric approaches to hypnosis scales, the authors applied full-information factor analysis, based on multidimensional item-response theory (IRT), to a 39-year sample of 11,517 records of the Harvard Group Scale of Hypnotic Susceptibility, Form A (HGSHS:A). They also performed a comparable analysis on the standardization sample of the Waterloo-Stanford Group C Scale (WSGC). The HGSHS:A emerges as two-factored, whereas the WSGC more closely approaches unidimensionality. The HGSHS:A factor structure and means show very little change over 4 decades. However, IRT-based item analysis on the HGSHS:A indicates that problems such as “pseudoguessing” on 2 items limit the quality of the item set. The authors propose alternative substantive interpretations of the traits that may underlie the two-factor structure.

Santarcangelo, E. L. & Sebastiani, L. (2004). Hypnotizability as an adaptive trait. *Contemporary Hypnosis, 21*, 3-13. This paper reviews our studies on the hypnotizability/hypnosis-related modulation of the mind-body connection during relaxation and mental stress, considered as the extremes of the wakefulness cognitive-autonomic arousal. The concept of relaxation is discussed according to the observation that similar self-reports of relaxation and autonomic states may correspond to different EEG patterns in low (Lows) and highly hypnotizable subjects (Highs). Results obtained during mental stress are discussed in the light of a possible adaptive role of hypnotic susceptibility as a natural protection against cardiovascular hazard; in fact, only Highs can actively suppress the cardiovascular responses evoked by a moderate mental stress. All together, findings show that the body can differentially act to similarly experienced
relaxation and mental stress and suggest for hypnotizable individuals an evolutionary advantage.

Sebastiani, L., Simoni, A., Gemignani, A., Ghelarducci, B., & Santarcangelo, E. L. (2003). Autonomic and EEG correlates of emotional imagery in subjects with different hypnotic susceptibility. *Brain Research Bulletin, 60*, 151-160. The autonomic and electroencephalography (EEG) correlates of the response to a cognitive unpleasant stimulation verbally administered to awake hypnotizable and nonhypnotizable subjects were studied. They were compared with the values obtained during a resting condition immediately preceding the stimulus and with those produced by a cognitive neutral stimulation, also administered after a basal resting period. Results showed hypnotic trait effects on skin resistance, heart and respiratory rate as well as on EEG theta, alpha, beta and gamma relative power changes. The autonomic and EEG patterns observed indicated different strategies in the task execution for hypnotizable and nonhypnotizable subjects and a discrepancy between the autonomic and EEG changes associated to the unpleasant stimulation in susceptible subjects. Results support dissociation theories of hypnosis and suggest for hypnotizable persons an active mechanism of protection against cardiac hazard.

Simrén, M., Ringström, G., Björnsson, E. S., & Abrahamsson, H. (2004). Treatment with hypnotherapy reduces the sensory and motor component of the gastrocolonic response in irritable bowel syndrome. *Psychosomatic Medicine, 66*, 233-238. Postprandial symptoms in irritable bowel syndrome are common and relate to an exaggerated motor and sensory component of the gastrocolonic response. We investigated whether this response can be affected by hypnotherapy in 28 patients with irritable bowel syndrome refractory to other treatments. They were randomized to receive gut-directed hypnotherapy 1 hour per week for 12 weeks (N = 14) or were provided with supportive therapy (control group; N = 14). Before randomization and after 3 months, all patients underwent a colonic distension trial before and after a 1-hour duodenal lipid infusion. Colonic sensory thresholds and tonic and phasic motor activity were assessed. The results stated that before randomization, reduced thresholds after versus before lipid infusion were seen in both groups for all studied sensations. At 3 months, the colonic sensitivity before duodenal lipids did not differ between groups. Controls reduced their thresholds after duodenal lipids for gas, discomfort, and pain, whereas the hypnotherapy group reduced their thresholds after lipids only for pain. It was concluded that hypnotherapy reduces the sensory and motor component of the gastrocolonic response in patients with irritable bowel syndrome.

Wild, M.R. & Espie, C.A. (2004). The efficacy of hypnosis in the reduction of procedural pain and distress in pediatric oncology: A systematic review. *Journal of Developmental and Behavioral Pediatrics, 25*(3), 207-13. Children who suffer from cancer have to endure regular, painful medical procedures that are associated with a considerable degree of psychosocial distress. Hypnosis has been successfully employed in the management of pain and distress in the adult population, but is not well studied in pediatric populations. This review systematically evaluates the systematic research conducted in the field of procedure-related pain management in pediatric oncology within the context of a nationally agreed framework for the assessment of research.
evidence. It is concluded that there is not currently enough robust research evidence to recommend that hypnosis should form part of best practice guidelines for the management of procedure-related pain in pediatric oncology. However, there is sufficient evidence to justify larger-scale, appropriately controlled studies. A number of recommendations are made regarding future research.

Woodard F.J. (2004). An argument for a qualitative research approach to hypnotic experiencing and perceptually oriented hypnosis. Psychological Reports., 94(3 Pt 1), 955-66. An argument for the significance of a qualitative research approach to hypnotic experiencing and a perceptually oriented view of hypnosis is presented with hypnosis framed in phenomenological, humanistic, and perceptual terms. An outline of threads of thought in Popper’s writings are consistent with such a perspective. Qualitative approaches are noted and support for theoretical discussions leading to deeper understanding of issues of hypnotic experiencing, such as unconscious processes, nonlinear experiences, and researchers’ countertransference are examined. Some limitations of current quantitative approaches to examining hypnotic experiencing and myths about qualitative research are discussed.