Hypnosis: a useful tool in the medical care of older people

Since the British Dental and Medical Society accepted the study of hypnosis into its curriculum, its usefulness in treating and facilitating treatment has become firmly established and is now implemented by psychiatrists, psychologists and many general practitioners. Dr Iain McIntosh explores the benefits hypnosis can hold for phobic problems in the elderly and how its use can limit the need for medication.

The ethical use of hypnotherapy in modern medicine was accepted by the British Medical Association in 1954. The British Dental and Medical Society for the Study of Hypnosis was established in 1955 and through its courses many health professionals have been introduced to hypnotherapy.

The use of hypnosis to treat and facilitate treatment, or as an adjunct to therapy, is now firmly established and utilised by psychiatrists, psychologists and many general practitioners (GPs). More recently, nurses and health visitors in primary care have been acquiring and using similar skills. Hypnotherapy is considered by some to be a form of alternative medicine, but its devotees consider it merely another tool for curing and alleviating a patient’s psychological and physical problems. The uses of hypnosis in treatment include:

- pain and stress reduction;
- relieving asthma;
- curing insomnia;
- enhancement of performance and learning;
- behaviour modification – altering habits and addictions; and
- overcoming phobias.

Hypnotherapy has gained respectability, with several universities awarding a degree in the subject and post-graduate medical education courses on hypnotism are popular.

**What is hypnosis?**

There is general agreement that hypnosis is an altered conscious state involving mechanisms of attention and behavioural habits. Attention is the *sine qua non* of hypnosis, differentiating it from other altered conscious states. It facilitates rapid learning, enhances memory and helps to condition and alter behaviour more quickly than with an unhypnotised patient. The importance of hypnosis in treatment lies in its ability to bypass critical faculties of the conscious mind.

**What is hypnotic induction?**

Hypnotic induction is the process of preparing the subject, facilitating the patient to loosen their critical grasp on familiar reality and to accept uncritically other evidence or suggestions. The person’s imagination is used to create the desired state. There has been much literature written about induction techniques, but the function of the induction procedure is merely to achieve this state of acceptance. The means of its accomplishment requires that the therapist be
skillful but which technique is actually used is not of primary consideration. In many people induction can be achieved very quickly – and time is a major consideration for those using hypnosis in the primary or institutional care setting.

Much research has been committed to the psychological elements of hypnotic states – with controversial findings – but a deep understanding of exactly how the process actually works is not needed to use it to cure and help patients. Many professionals consider hypnosis and induction as mere therapeutic tools and employ them as they do a computer as a work aid. And like a computer their understanding of the inner workings of the machine are limited, but they know the mechanism does work – and that its outcome is satisfactory. Initial apprehension about the hazards of hypnotherapy in clinical use has not been justified.

Who can benefit from hypnotherapy?
Almost anyone can benefit from hypnotherapy. Children are particularly responsive to hypnosis and are ideal subjects for the novice practitioner. Concern over the attention spans of elderly people – as well as their concentration skills – have dissuaded some hypnotherapists from using the therapy on them. But the majority of older people can be hypnotised successfully. The depressed, those with dementia and those with long-term chronic problems should not be considered, but many others can benefit from hypnosis in primary and adjunctive treatment, often avoiding the use of drugs in removing unwanted psychological symptoms and relieving aches and pains.

Professional time is a concern in clinical management since GPs and hospital practitioners undertake procedures that involve brief patient encounters. With carefully selected older patients affected by clearly defined conditions, the use of hypnosis is practical and can effectively influence their physical and physiological status. It can prevent an acute case from becoming chronic while enhancing general well being. Dependence upon anxiolytics and analgesics can be avoided by recourse to the hypnotherapeutic tool.

Elderly people often admit to loss of self confidence as their faculties and powers appear to fade. These apparent failings and mild memory impairment are stressful, fanning fear in situations that would not have been threatening in their youth. These behavioural responses can easily deteriorate into panic and phobic states which, if unrecognised and untreated, can become chronic and intractable. Hypnosis can be used with simple cognitive behavioural techniques to bring quick cure for mild to moderate anxieties, panic states and simple phobias (e.g., fear of flying, animals, insects and enclosed spaces) which can become disabling. These anxiety states can often be easily reversed in one or two short hypnotherapy sessions. All therapeutic sessions involve relaxation, stress reduction and confidence building mechanisms that benefit those crippled with anxiety and fear.

What is a phobia?
A phobia exhibits a degree of anxiety and fear out of all proportion to the situation. It cannot be explained or reasoned away and is beyond voluntary control. The person is subjectively afraid, avoids the feared situation and, if exposed to it, suffers tachycardia, hyperventilation and exhibits a state of anxiety or panic. This leads to avoidance behaviour. Most patients respond well to simple hypnotic techniques, which need not be time consuming. Disturbed conditioned responses and frantic avoidance behaviour can be quickly replaced by rational activity with hypnotherapy.

Surveys suggest the majority of phobics are women and that travel-related fears represent 2.81 per cent of phobias. In my own general practice 16 per cent of my patients admitted to having a phobia and 13 per cent of this sub group reported fear of flying. Elderly people were equally represented in the survey.

Treatment by hypnosis
Hypnotherapy to treat phobias involves behaviour modification and desensitisation techniques. The therapy is facilitated by trance state induction. The patient is exposed to the situation – in their imagination – which causes distress until he/she gets used to it and attempts are then made to extinguish the fear by relating it to a pattern of response that provokes no anxiety. Common induction techniques are eye fixation, progressive relaxation, arm levitation and cognitive imagery.

Desensitisation consists of muscle relaxation, reduction of anxiety and construction of a graded hierarchy of aversive stimuli. For example, a hierarchy for a flying phobia could involve:
arrival at the airport;
> proceeding to the departure lounge;
> walking on to the plane;
> experiencing take-off;
> landing.

The hierarchy is presented in imagery in hypnotherapy. Desensitisation with hypnosis can be achieved in one or two patient encounters and with minimal therapist contact. Use can be made of tape recordings and book instruction on relaxation and desensitisation procedures. Modified flooding techniques of psychotherapy can also be used when time constraints prevail where, instead of gradual desensitisation by states, the patient is subjected to intensive exposure to the feared objects of state while relaxed in a trance.

Teaching the patient autohypnosis, whereby at a coded signal he/she can recreate the relaxed state acquired at earlier sessions, decreases the risk of dependence on a therapist and diminishes the time required for therapy.

Scenario
To demonstrate the technique, let us take the example of an elderly lady with grown children living in the Far East. Unfortunately, she had long had a phobia for air travel and could not visit them. Widowed and lonely – and worried about her offspring – the children bought her air tickets for Australia one Christmas. With great doubt and concern, she accepted the gift but as the flight approached she became ever more anxious and fearful. The day before departure she succumbed to panic at the thought of many hours incarcerated in an aircraft.

Presenting at her doctor’s surgery, she was very agitated and wanted to cancel the flights, but accepted an offer of hypnotherapy. She relaxed visibly under hypnosis and was guided into a visual image of herself boarding and sitting in the aeroplane. With continued suggestions of calmness, muscle and mind relaxation, and freedom from tension, she was able to fantasiise herself through prolonged exposure to the feared situation. Given post hypnotic suggestions about calmness throughout the flights, to her and the family’s delight, she made a successful journey. Five years and many air trips later she remains undisturbed by the once disabling phobia.

References

‘Gentle words, quiet words are, after all, the most powerful words. They are more convincing, more compelling, more prevailing and very successful.’

These were lines a patient quoted after hypnotic treatment for an anxiety state. The same general principles of hypnotherapy apply to the treatment of simple anxiety states and panic attacks. Careful selection of patients, strict adhesion to short-term treatment, as well as the use of instruction leaflets and taped procedures, can make for successful and clinically rewarding interventions.

Hypnosis can prove a valuable therapeutic weapon used as an adjunct or an alternative to conventional patient care. GPs should acquire appropriate skills at educational courses offered by societies and universities to use in their day-to-day practice.

Conflict of interest: none declared.

Key points
> Hypnosis is an altered conscious state involving mechanisms of attention and behavioural habits.
> Hypnosis facilitates rapid learning, enhances memory and helps to condition and alter behaviour quickly.
> Hypnotic techniques can be useful in treating panic states and phobias in the elderly.
> Hypnotherapy should not be used on patients suffering from dementia or those having long-term chronic illness.