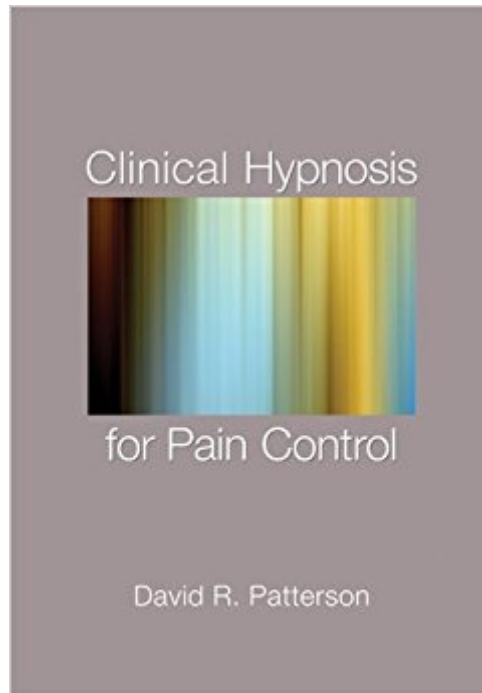




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Clinical Hypnosis For Pain Control



Synopsis

Clinical Hypnosis for Pain Control is a compelling argument for the use of hypnotic analgesia as a viable alternative to psychopharmacological interventions for controlling acute, chronic, and perioperative pain, as well as pain from nonsurgical procedures.

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Customer Reviews

For those interested in the use of hypnosis to manage pain, this is an outstanding resource. It is solid in its research and thoroughly examines the efficacy of hypnosis in pain alleviation. There are some technical terms and many references used throughout the text, but even a non-medical reader quickly picks up the terms. I've seen courses on hypnotic pain control that made no distinction between approaches for acute and chronic pain, which this text covers in detail. If you're interested in the use of hypnosis to relieve suffering this is a must have for your library.

Whilst I cannot say that the book failed to deliver as promised (there were no promises) I had great expectations from the title. It failed to provide specifics on procedures, techniques, or successful practitioners or instances in the field at present. The book seemed to gloss over the handful of well known exponents from the 19th century in a general way and then provided a lot of references to books and papers published by everyone and their cat...but again practically no specific info. There are pages and pages covering the difference between acute and chronic pain. It pops up in every chapter. However, it is repetative and was covered adequately in the first chapter. I didn't find

anything that I could take away and actually apply that couldn't be found in any Ericksonian text book. As a book directing me towards other books and papers that I might buy or study it was excellent...but that wasn't what I thought I was buying.

Highly scientific approach, clinically relevant, very helpful for new insight in the field of clinical hypnosis. I suggest this book to every physician working in the field of pain management or chronic illness. MD, PhD Bruno Cirillo

This is an excellent book on the theory of pain and the management of pain with hypnosis. Although the author tends to think that only "Licensed Health Care Providers" can practice hypnosis with any success, the book in general is very good. I have attended several seminars and trainings on pain management with hypnosis and they have not covered the theory and practice as well as is outlined in this book and they were at a very high cost. This is an excellent book for anyone using hypnosis that desires a better foundation and more information on using hypnosis for pain management. I would recommend this book to anyone in the helping professions using hypnosis. One point, I would suggest the author find a much better proof reader for his next book.

In my early study of hypnosis, as a nurse practitioner in Washington state, I've looked at videos of Dr. Patterson's work with burn patients at Harborview Medical Center, in amazement. I am glad that he has taken time out of his busy schedule to write this well written book. I wish more of my healthcare colleagues could open their minds to the value that hypnosis has in healthcare. This book is written primarily for the clinician, but lay people could also enjoy it. Given the struggles we face in treating pain, hypnosis is another tool we should consider.

When I first stumbled upon this book, I was intrigued because the word "clinical" gave me the idea that it was going to be "evidence-based"... so I decided to buy it and give it a try. I was expecting another book full of induction examples and the author's point of view on how to cope with pain by using hypnosis. Let me just say this now- I was wrong.... I was wrong....I was wrong! It turned out that this book is extraordinary in its nature due to the fact that the author has provided us with many references in terms of evidence-based practice with rich induction examples where other authors have fallen short. For someone like me who tends to support his practice on evidence-based outcomes, this book was a clear proof that even in the field of clinical hypnosis we can refer to scientific-based outcomes by supporting our outcomes with precise and reliable clinical trials. I

would like to share with you my impressions by describing briefly each of its chapters.

CHAPTER 1: UNDERSTANDING PAIN AND ITS PSYCHOLOGICAL APPROACHES

The first part of this chapter illustrates the nature of pain by emphasizing the importance of being familiar with the physiological underpinnings of pain. In this regard the figure 1.1. on page 15 ("The Onion Model" by John Loeser's) gives a clear understanding of the concept of pain. This picture will help you in terms of accuracy for the assessment as well as the treatment. I greatly appreciate the description of the relationship between pain and suffering (pg.17). The author states that they can become imprinted into the brain. This is the concept of "neuroplasticity."

The second part of this chapter was quite shocking for me when I realized that the author was presenting several psychological approaches to pain control such as educational approaches, cognitive behavioral approaches, acceptance therapy etc. It was clear from the first chapter that the author not only possessed a great understanding of the issue of "pain control" but was also very knowledgeable and open to approaches far from the orthodox application of other hypnosis approaches.

CHAPTER 2: THE SCIENTIFIC BASIS OF HYPNOTIC ANALGESIA AND PAIN CONTROL

This chapter is dedicated to the description of clinical trials in order to underline even further the significant body of scientific research to support the application of clinical hypnosis to the issue of pain control. One of the most interesting points made in this chapter is the presentation of the concept of "hypnotizability" and how it relates to the concept of pain control. The author presents this concept by stressing the relationship between hypnotizability and the prediction of the hypnotic responding outcomes. The second part of this chapter is centered on the presentation of hypnotic analgesia created in the laboratory.

CHAPTER 3: CLINICAL RESEARCH AND HYPNOSIS AS AN EVIDENCE-BASED PRACTICE

This is the chapter that I liked the most because it is mainly focused on showing empirical support for the clinical applications of hypnosis for pain control. The author makes an excellent observation here that I would like to report in its entirety (pg. 57): "However, as impressive as that support is, it is not sufficient for hypnosis to be accepted as an actual clinical treatment." The rest of the chapter is dedicated to the illustration and description of data taken from controlled studies in acute pain hypnotic treatment. (See TABLE 3.1 on page 60 for an exhaustive description) The author presents the controlled clinical studies by analyzing cases of "Acute Pain" and cases of "Chronic Pain." This distinction has been one of the cornerstones of the book and without any doubts represents one of the fundamental points to consider in developing an induction script for our clients.

CHAPTER 4: ERICKSONIAN HYPNOSIS

On one hand, the author clearly states at the end of page 97 that one of the advantages of using Ericksonian hypnosis is its endless array of alternatives if one induction fails. On the other hand on page 98, the author underlines that Ericksonian hypnosis has been

criticized for the lack of empirical rigor. I personally think that on page 103 the author does an excellent job in describing one of the central concepts of the Ericksonian approach: "The use of Utilization." The author clearly states: "Utilization involves taking what the patient offers in therapy and following that lead to engender therapeutic change." The rest of the chapter is dedicated to the description of the applications of the main points underlined by Dr. Erickson such as indirect suggestions, multiple choices, truism, double binds and metaphors. In addition, starting on page 114 there are examples of an Erickson style that was developed by Steven Gilligan.

CHAPTER 5: ERICKSONIAN APPROACHES TO PAIN CONTROL This chapter describes the specific utilization of the Ericksonian approach to pain control. On page 119 the author underlines right away the two keys that characterized this approach: to be cooperative and to be individualized to the patient. The author clearly states (page 119): "Hypnosis is seen as an interactive approach between the therapist and the patient, and certainly not something that is "done" to the patient. In terms of individualization, the therapist is often following the patient and capitalizing on the strengths that she or he may have." One point that I would like to stress is the importance of conceptualizing the applications of Ericksonian hypnosis not in terms of "total cure from pain" but in terms of "pain reduction." The rest of the chapter is based on the description of several hypnotic procedures for reducing pain such as hypnotic reinterpretation of a pain experience, hypnotic time distortion, metaphors etc...

CHAPTER 6: ACUTE PAIN, CRISIS, AND THE HOSPITAL SETTING Part of this chapter focuses on the nature of acute pain in the presence of tissue damage. The author analyzes the cycle between anxiety and pain by stating: "Acute pain elicit anxiety. Thus, acute pain and anxiety can cyclically interact so that they both are exacerbated." This is an important point because it reminds the clinician that by treating pain successfully also improves the psychological well being of the clients. The rest of the chapter focuses on the description of another type of acute pain "Procedural pain" such as dentistry, surgery, burn wound care, or cancer treatment. In addition, this chapter illustrates the application of hypnosis for medical procedures by stressing the importance of deep relaxation and comfortable imagery from the client. Finally starting on page 143 there are several examples of hypnotic inductions.

CHAPTER 7: CHRONIC PAIN After the analysis of acute pain, the author analyzes the efficacy of hypnosis with chronic pain. The author defines chronic pain as "the pain that remains or continues after healing (page 152.)" Furthermore, the author continues describing the characteristics of chronic pain as having two main underlying causes: neuropathic pain and nociceptive pain. One of the main points made by the author in dealing with chronic pain as opposed to acute pain is the necessity of clearly assessing the main source of the client's problem. Only if the clinician is able to understand the main source, will he or she be able to have a

clear and effective case conceptualization. In this regards, the author analyzes several areas that are able to help the clinician offer an effective treatment; these areas are: biological factors, psychological factors and social factors. The purpose of this chapter is to convey the message that in order to have a positive impact on the issue of chronic pain, the clinician needs to apply hypnosis within the context of a bio-psychosocial model for understanding pain. CHAPTER 8:

MOTIVATIONAL INTERVIEWING The author stresses the value of the Motivational Interviewing (MI) in relation with the use of hypnosis in terms of "lifestyle behavioral change" mostly identified in reducing the use of pain medication, reverse a sedentary lifestyle, and engage in challenging physical therapy exercise (pg. 185.) At the beginning of the chapter, the author provides a background of the MI in order to increase the reader's understanding of this brief therapy approach and then he presents the commonalities between MI and Ericksonian hypnosis. Several areas are underlined and examined to corroborate his commonalities. On page 217 there are examples of inductions for specific pain problems, which I found extremely valuable. CONCLUSION It has been a pleasure and an honor reviewing this amazing book. There were two main reasons that inspired my writing of this review; the first is represented by the clinical value of this book and in this regard I do recommend this book to any clinician who is involved in any kind of interventions-treatment with someone who is looking for a way to control his/her pain. The second motivation is represented by the fact that I have had the honor of meeting Dr. Patterson in Seattle in his office and it is rare to see a successful researcher like him talking in such enthusiastic way about his research and about my interest in his research. Dr. Patterson is one the few clinicians that genuinely and unconditionally put his patients' needs before any material interests, instead he gets the job done because he is concerned and passionate about their well-being.

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