

The International Journal of Clinical and Experimental Hypnosis

Volume 46, Number 2 - April 1998 - English Posthypnotic responding: Knowing when to stop helps to keep it going. Barnier,-Amanda-J.; McConkey,-Kevin-M. The authors examined the effect of specifying (cue) or not specifying (no cue) the cancellation cue for posthypnotic suggestion. Responding was indexed on formal, embedded, informal, and postexperimental tests. Thirty-six real, hypnotized participants and 20 simulating participants took part in an application of the real-simulating paradigm. Responding declined across the four tests. Real participants in the cue condition maintained responding longer than simulators in the cue condition, and they also maintained responding longer than reals and simulators in the no cue condition. The findings highlight the interactional influence of individual, interpersonal, and situational factors in posthypnotic responding and underscore the active involvement of individuals in hypnotically initiated events. Surreptitious observation of responses to hypnotically suggested hallucinations: A test of the compliance hypothesis.

Perugini,-Eve-Marie; Kirsch,-Irving; Allen,-Sarah-T.; Coldwell,-Eleanor; Meredith,-Janelle-M.; Montgomery,-Guy-H.; Sheehan,-Julia Suggestions for arm levitation and for visual, auditory, tactile, and taste hallucinations were administered twice via audiotape to a group of high suggestible students and low suggestible simulators. During one of the administrations, participants were led to believe they were alone, but their behavior was surreptitiously recorded on videotape and observed on a video monitor. During the other administration, they were observed openly by an experimenter who had not been informed about group assignment. When unaware that they were being observed, simulators were significantly less responsive to suggestion and engaged in substantially more role-inappropriate behavior. In contrast, the responsiveness of nonsimulating students was not affected by the presence of an experimenter, and they exhibited little role-inappropriate behavior even when alone. These data indicate that the responses of suggestible individuals reflect internally generated changes in experience and are not due to simple intentional compliance (i.e., faking). The inpatient treatment of patients suffering from (motor) conversion symptoms: A description of eight cases.

Moene,-Franny-C.; Hoogduin,-Kees-A.-L.; Van-Dyck,-Richard This article presents a preliminary study that used two controlled randomized trials to study the effect of hypnosis in the treatment of eight patients with (motor) conversion symptoms. Controlled research into the treatment of conversion symptoms is scarce and can often be criticized on methodological grounds. It would appear, however, that both the use of suggestive and behavioral therapeutic techniques and eclectic treatment programs yield good results in the treatment of conversion symptoms. The results of the study suggest that comprehensive clinical treatment including hypnosis has enough promise to be studied in clinical trials. In the interpretation of the results, special attention is given to primary diagnosis, duration of complaints, traumatic experiences in childhood, dissociative capacity, and hypnotizability. When hypnosis causes trouble.

Barber,-Joseph Like any other effective intervention, hypnotic treatment can occasionally cause harmful effects as well as beneficial ones. The first step in avoiding clinical complications is recognizing that they can occur. A review of the literature, however, suggests a long-standing inattention to the potential harmfulness of hypnotic interventions, including patients' unexpected reactions, leading to clinical complications, including amnesia, catharsis, paralysis, disorientation, literalness of response, accelerated transference, and memory contamination. In addition to these unexpected reactions by patients, complications can also arise from a practitioner's need for power and by the inappropriately narrow focus on the hypnotic process itself, leading to distraction from the more fundamental clinical process. Case examples are presented. Scope of hypnosis education in academia: Results of a national survey.

Walling,-David-P.; Baker,-Jeffrey-M.; Dott,-Sharon-G. The present article examines the current status of hypnosis training and the attitudes of program chairs toward inclusion of such training in doctoral education. A brief survey on hypnosis training was sent to all psychology doctoral programs accredited by the American Psychological Association (n = 218) as well as 24 nonaccredited doctoral programs. Twenty-six percent of responding programs (n = 44/170) report offering either required or elective coursework in hypnosis. Of those programs offering a course in hypnosis, the mean semester credit hours earned was 3. Although many program directors support opportunities for hypnosis education in doctoral education, other constraints (e.g., available faculty, required coursework) limit its availability.