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Use of Neurofeedback to Enhance Response to Hypnotic Analgesia in Individuals With Multiple Sclerosis
Mark P. Jensen , Ann Gianas , Holly R. George , Leslie H. Sherlin , George H. Kraft , Dawn M. Ehde

This proof of principle study examined the potential benefits of EEG neurofeedback for increasing responsiveness to self-hypnosis training for chronic pain management. The study comprised 20 individuals with multiple sclerosis (MS) who received 5 sessions of self-hypnosis training—1 face-to-face session and 4 prerecorded sessions. Participants were randomly assigned to have the prerecorded sessions preceded by either (a) EEG biofeedback (neurofeedback) training to increase left anterior theta power (NF-HYP) or (b) a relaxation control condition (RLX-HYP). Eighteen participants completed all treatment sessions and assessments. NF-HYP participants reported greater reductions in pain than RLX-HYP participants. The findings provide support for the potential treatment-enhancing effects of neurofeedback on hypnotic analgesia and also suggest that effective hypnosis treatment can be provided very efficiently.

Hypnotic Olfactory Hallucinations
Rochelle E. Cox , Robyn A. Langdon

Olfactory hallucinations (smelling odors that are not present) are intrusive and disruptive yet challenging to investigate because they cannot be produced on demand. In this study, the authors attempted to model olfactory hallucinations using hypnotic suggestions. We gave some subjects a suggestion to smell an odor in the absence of a real odor (positive hallucination) and gave others a suggestion to smell nothing in the presence of a real odor (negative hallucination). High hypnotizable individuals who received the positive hallucination reported intense smells whereas those who received the negative hallucination reported a reduction in intensity. These suggestions also influenced later recall about frequency of odor presentation. Findings are discussed in terms of reality monitoring and differences between positive and negative hallucinations.

Attachment-Focused Hypnosis in Psychotherapy for Complex Trauma: Attunement, Representation, and Mentalization
Eric B. Spiegel

The relational and psychological functions of attunement, representation, and mentalization are essential components of a secure attachment experience. Psychotherapeutic approaches informed by attachment theory have gained significant empirical and clinical support, particularly in the area of complex trauma. Despite these advances, attachment-informed trauma treatment could benefit greatly from the experiential wealth that clinical hypnosis has to offer. In its utilization of shared attention, tone of voice, pacing, representational imagery, and hypnotic language, clinical hypnosis as a state, relationship, and technique offers psychotherapists a way of introducing a healthy attachment experience and renewing appropriate developmental functioning in patients who are survivors of complex trauma. In this article, attunement, representation, and mentalization are reviewed from a hypnotherapeutic perspective.

Hypnosis for Acute Procedural Pain: A Critical Review
Cassie Kendrick , Jim Sliwinski , Yimin Yu , Aimee Johnson , William Fisher , Zoltán Kekecs , Gary Elkins

Clinical evidence for the effectiveness of hypnosis in the treatment of acute procedural pain was critically evaluated based on reports from randomized controlled clinical trials (RCTs). Results from the 29 RCTs meeting inclusion criteria suggest that hypnosis decreases pain compared to standard care and attention control groups and that it is at least as effective as comparable adjunct psychological or behavioral therapies. In addition, applying hypnosis in multiple sessions prior to the day of the procedure produced the highest percentage of significant results. Hypnosis was most effective in minor surgical procedures. However, interpretations are limited by considerable risk of bias. Further studies using minimally effective control conditions and systematic control of intervention dose and timing are required to strengthen conclusions.

A Meta-Analysis for the Efficacy of Hypnotherapy in Alleviating PTSD Symptoms
Tudor- tefan Rotaru , Andrei Rusu

A systematic review and meta-analysis of the efficacy of hypnotherapy in the treatment of PTSD used literature searches to obtain 47 articles. However, only 6 were experiments testing the efficacy of hypnosis-based treatments. A fixed-effects

meta-analysis was applied to postintervention assessment results and 4-week follow-ups. A large effect in favor of hypnosis-based (especially manualized abreactive hypnosis) treatment was found for the studies that reported the posttest results ($d = 1.17$). The temporal stability of the effect remains strong, as reflected by the 4-week follow-up assessments ($d = 1.58$) and also by long-term evaluations (e.g., 12 months). Hypnosis appears to be effective in alleviating PTSD symptoms.

Brain Oscillations and Diurnal Variations in Hypnotic Responsiveness—A Commentary on “Diurnal Variations in Hypnotic Responsiveness: Is There an Optimal Time to be Hypnotized?”

Mark P. Jensen

A recent study published in the International Journal of Clinical and Experimental Hypnosis reported an interesting diurnal pattern of hypnotic responsivity; specifically, the authors found higher hypnotic responsiveness in a large sample of undergraduates in the morning and early evening. However, they did not have an explanation for this pattern of findings. This pattern is consistent, however, with the theta hypothesis of hypnotic responsivity. Further examination of the associations between brain oscillations and response to hypnosis is needed to determine if specific oscillations such as theta (α) actually facilitate response to some hypnotic suggestions, (b) merely reflect hypnotic responding, or (c) reflect another factor that itself plays a causal role in response to hypnosis.