

Chapter 1 : Hypnosis in the Treatment of Depression: Considerations in Research Design and Methods

Hypnosis and Treating Depression diversifies the range of topics to consider and increases the number of knowledgeable contributors on the subject of treating depression with hypnosis. The book features chapter contributions by highly experienced and well-known experts on using hypnosis to treat specific forms of depression, with assessment and.

Fast, effective change using modern, evidence based, treatments. Hypnosis has a long history of helping people with mood disorders, so find out if hypnotherapy can work for you. Anxiety and Hypnosis Anxiety or excessive stress can make life miserable and prevent a person from following their dreams. Hypnosis can help by changing the way your brain evaluates your environment. Through Hypnotherapy or similar treatments, you can go back to enjoying more of your life and regain your peace of mind. A car accident, an illness or a death can cause seemingly endless misery for some. Cognitive Hypnotherapy is a fast, and effective way of dealing with emotional problems, habits and performance issues. It is the go-to treatment for anybody suffering from stress or trauma related issues, addictions, temper, phobias, health issues and a whole host of related conditions. Cognitive Hypnotherapy recognises that many mental functions are unconscious processes which can be difficult to address directly through logic and will-power. These functions include habits, emotional responses, immune functions, strategies, focus and attention, memory access and attitude. Hypnosis has a long history of effectively managing these issues. Cognitive Hypnotherapy is a modern style of hypnosis, developed by Trevor Silvester of the Quest Institute which takes the guess-work out of a lot of hypnosis work. All Cognitive Hypnotherapy treatments are entirely bespoke, built around the very specific needs of the client, which makes it more effective in reducing the problems being experienced. The hallmark of this therapy tends to be much longer initial interviews spent gathering very specific information so we can design the best treatment. The actual treatment is typically of a shorter duration often using very light trance work. Inductions are shorter allowing the therapist to conduct several interventions in a session, test the work, and move to the next stage of the process. This means that, even for more persistent issues, a client may not need the repeated listening to a hypnotic track. If a problem is more stubborn, then we typically provide a track to be taken away. Listening to the track between sessions, typically gives a better outcome for these cases. The improvement within each session should be both noticeable and measurable so clients should never be left wondering if the session has been effective. Rather than relying on an open-ended weekly session that might span many years e. We understand that this can be distressing and in many cases, positively harmful. Treatments are often delivered using very light trances. In many cases a bespoke recording is made for you to listen to in-between sessions to embed the work more powerfully. The next session will assess progress and treat remaining issues until a successful outcome is achieved “ at which point we usually give you something extra to take away to start accelerating your health and growth in other areas, perhaps something to help you refocus and refresh your life. Some people have one simple issue that needs addressing and this may be addressed in as little as a single session. For others there may be a difficulty or complexity which might lead to small batches of sessions over an agreed period. In addition to helping with the problematic conditions such as depression, anxiety conditions, addictions, guilt, shame and anger, etc. Book a session today.

Chapter 2 : How Hypnosis Helped Lift My Depression | Everyday Health

Hypnosis for anxiety and depression treatment Hypnosis, or hypnotherapy, can be an effective way to relax and focus the mind. It can be used to relieve pain, reduce anxiety, improve your mood and help with depression. 1 Hypnosis can also help people learn new skills, relax or adopt new perspectives.

Types There are a number of different types of depression. They tend to be categorised by the severity of symptoms, their prevalent features and duration. It describes the criteria for mental health disorders. According to the DSM, medication or drugs cannot cause the symptoms of depression. Clinical depression This is also known as major depression or major depressive disorder. Clinical depression is the most severe type of depression. This is because more of the symptoms are present at any one time compared with other types. Clinical depression is usually diagnosed when at least five of the symptoms are present at the same time for two weeks or more. However it can reoccur after the initial episode. To be diagnosed with clinical depression you must exhibit a depressed mood or a decreased sense of enjoyment in activities especially ones you used to enjoy. Typically a medical professional will look for at least four or more of the following symptoms to make a diagnosis of clinical depression: However it occurs on a daily basis for a number of years. Dysthymia can develop at an early stage in your life and if this is the case, it is common that you might believe it is a normal way of feeling. To have dysthymic disorder, you will have been in a constantly depressed mood for at least two years and exhibit at least two of the following symptoms: Typically this is described as having less severe symptoms of depression on a persistent basis. These contrasting periods are known as episodes of mania and depression. A manic episode or depressive episode is diagnosed if three or more of the mood symptoms below occur nearly every day for at least a week: Manic episode increase in energy and activity intensely high mood racing thoughts, fast talking jumping from idea to idea finds it hard to concentrate little sleep needed unrealistic thoughts about their abilities or powers a lasting period of behaviour that is different from usual intrusive or aggressive behaviour denial of anything being wrong. Postnatal depression Postnatal depression is a treatable disorder. Other symptoms may include frequently crying for no apparent reason and feelings of rejection from a partner, family, friends or even the baby. In some cases a stressful life event such as an illness, bereavement or divorce could be the cause. In the majority of cases, different causes can combine to trigger depression. For example, you might be going through a divorce, and then suffer the loss of a close family member. According to research, as you get older, your chances of developing depression increases. This risk also rises if you have lived through tough economical and social circumstances. Here are a number of circumstances that can cause depression: Stressful events Stressful events, such as a relationship breakdown, can take a while to come to terms with. When you go through such an event, you run a higher risk of becoming depressed, especially if you try to combat the feelings on your own. Illness If you have a long-term or life threatening illness, you may have a higher risk of developing a depressive disorder. Head injuries can also be a cause - severe trauma can trigger emotional problems and mood swings. Personality traits Some personality traits leave you at greater risk. If you have low-self esteem or are overly critical about your actions, you might be more vulnerable. These traits could have been inherited from your parents or they could have been caused by early life experiences. Post-pregnancy After giving birth, some women are vulnerable to the mental health condition. The physical and hormonal changes, paired with the increased responsibility of your new baby can lead to postnatal depression. Loneliness If you are cut off from your friends and family for an extended period of time, you might be at a higher risk of developing a depressive condition. Drugs and alcohol Taking drugs and drinking too much alcohol may be a last resort for some people when life is getting them down. This always makes things worse. Drugs such as cannabis can relax you, but it can cause depression. This is especially prevalent in teenagers. Depression treatment For any mental health problem, you should contact your GP as your first port of call. Below is what your doctor may recommend for treatment depending on the severity of your condition. Mild Wait a while â€” In some cases, mild depression may improve on its own. If your GP suggests this, you will have to go back every few weeks for them to monitor your progress. Exercise â€” Some evidence suggests that exercising can help battle mental

health issues. You may be referred to a qualified trainer to set up an exercise routine. Self-help groups are helpful. Speaking to others that are going through the same thing can be helpful. Moderate to severe Mental health teams are helpful. A mental health team is made up of psychiatrists, psychologists, occupational therapists and specialist nurses. These provide support for people with severe depression. Antidepressants are prescribed to treat the symptoms of depression. Combination therapy is helpful. If your depression is quite severe, your GP may recommend antidepressants coupled with talking therapy. Hypnotherapy is gaining wider recognition as a depression treatment. Hypnoanalysis psychotherapy using hypnosis seeks to uncover the root cause of the negative feelings and emotion, thus removing the symptoms of depression. Hypnotherapy for depression The aim of hypnotherapy as a type of depression treatment is to target the root cause of the issue and to develop better coping behaviours. In most circumstances you will usually forget or suppress the cause of your depression because of the association with negative feelings. Hypnotherapy connects directly with the subconscious mind. Your hypnotherapist will address your perception of the event that has caused you to become depressed with the aim to improve your self-esteem, mood and help you gain your independence back.

Chapter 3 : 3 Ways to Help Treat Depression with Hypnosis - wikiHow

Hypnosis has become recognized as a potentially effective treatment for many individuals with depression. Some recent studies have shown that it is more effective than cognitive-behavioral therapy, which is the most common therapy approach in treating clinical depression.

Calm, relaxed speaking voice Rapid eye movement REM Because the hypnosis takes place in a relaxed atmosphere, many patients enjoy hypnosis almost as a form of relaxation self-treatment. It is also essentially safe, which makes it preferable to medications and other possible treatment option. How Does Hypnotherapy Work? Hypnotherapy is exactly what the name implies. It is a form of hypnosis that takes place in a bit more of a therapeutic setting. No one holds a watch in your face and tells you that you are getting sleepy. Instead, the hypnotherapist starts by simply talking to you, instructing you on how to relax using a series of techniques that are designed to make the mind and body more comfortable. Once the person is relaxed, the hypnotherapist then may try to get you to open up about what is causing your anxiety in a way that is difficult without hypnotherapy, or they may use suggestions to relax your subconscious so that you do not experience anxiety in the future. They may also try to reinvigorate your mind and body to help you cope with stress in the future. Different anxiety hypnotherapists have different strategies, but the idea is the same: Put the person in a very relaxed state of mind. Wake them up with a plan to address their anxiety. It often takes more than one session to complete anxiety hypnotherapy. Also, it is not a treatment that is usually completed alone. While some people do opt to receive hypnosis for anxiety as a standalone treatment, many others combine it with other techniques, like cognitive behavioral therapy. In addition, it can ease feelings of discomfort and strain by implanting the suggestion that you feel more physically comfortable than you actually do. In addressing this symptom, a hypnotist may focus on implanting the belief that you feel happy, content, and confident in your ability to address and resolve the causes of your anxiety. Sleeping Problems Many people with anxiety also have difficulty sleeping well. Getting to sleep in an anxious state and sleeping deeply when nightmares and muscle tension are keeping you awake can be nearly impossible. Hypnotists assist with sleep deprivation by implanting the suggestion that you have gotten plenty of restful sleep recently. Alternatively, or in addition, they can help you to alter your anxious thought patterns so that they do not spiral out of control and keep you awake as well as causing the panic attacks that can result in muscle tension. Phobic Reactions Going to a hypnotist for help in conquering a phobia for example, a fear of social situations or crowded rooms can be far preferable to regularly taking medication in order to remain calm during everyday activities if, of course, you find that hypnotism works for you. A hypnotist will attempt to replace your unhealthy or illogical beliefs about the object of your phobia with more logically sound and useful beliefs. Both mild cases of anxiety and clinically diagnosed disorders may result in these effects with hypnotherapy. If you have experienced any of the above, finding out whether hypnotism works for you may help you to conquer these difficulties and hopefully eliminate them altogether. Hypnosis Cognitive behavioral therapy or CBT is closely related to hypnosis in that it is based on the idea that some problems are not easily addressed through rational thought, and should instead be addressed through training the person to practice healthier thought patterns and to let go of harmful beliefs. Cognitive behavioral therapy is used by most therapists who work with patients experiencing anxiety and depression. Unlike hypnosis, it does not require a trance state, but like hypnosis, it openly addresses your emotional and mental patterns and beliefs in order to influence your behavior. If you have been diagnosed with anxiety and feel that therapy has improved your condition, hypnotism is more likely to work for you simply because it operates on similar and therefore familiar principles that your mind is already open to. Hypnosis for Anxiety – Does It Work? Some specialists believe that hypnotherapy can be used for almost any condition or behavior. But there are only a few conditions where hypnosis is commonly accepted.

Chapter 4 : How Hypnosis Is Used For Anxiety And Depression

Hypnosis in the Treatment of Depression. There are several compelling arguments for the use of hypnosis in the treatment of depression. For example, the editor of this special issue, Michael Yapko, has proposed that hypnosis has relevance to the treatment of depression because hypnosis can help build positive expectancy regarding treatment, address numerous depressive symptoms (including.

Depression is an illness that affects the daily lives of millions of Americans. While depression is most often considered a mental illness, its progression can produce physical symptoms that weaken the body and make the individual more susceptible to other illnesses and can sometimes manifest into physical pain. People suffering from depression find it difficult to function in their routine tasks. Depression manifests itself differently in each patient, and the severity and duration depend on many contributing factors [http: Depression is caused by a variety of factors, ranging from biochemical and genetic factors to psychological and environmental factors](#) [http: For years now, physicians have turned to medication for the treatment of depression in their patients, readjusting the biochemical functions of the individual. A segment of the population, however, is beginning to view cognitive behavioral and therapeutic approaches as more effective for the treatment of depression. Hypnosis as treatment for depression has been brought to the forefront of discussion by many clinicians. There is a great deal of information online that suggests that hypnosis is a preferable and efficient treatment for depression. Online resources give a variety of different reasons for their opinion. One resource states that hypnosis results in greater outcomes than drug therapy. David Kato, a hypnotherapist, suggests on his website that prescription antidepressants can often mask underlying issues, and once the patient stops drug therapy, the depression is still evident. The author, David Kato, suggests that drug treatment lacks the long-lasting effectiveness against recurrences of hypnosis and fails to teach the skills of resolution and problem solving that are necessary to conquer the illness. Kato also believes that people falsely attribute depression symptoms to being purely biological and brings up the idea that the way people think is actually the more probable cause](#) [http: Pharmacotherapy has side effects and complications such the potential for dependency and tolerance, while proponents of hypnosis for the treatment of depression maintain that hypnosis counters depression by helping the patient build a foundation that creates constructive ways of dealing with the feelings associated with the illness, a sense of control over their condition, and decreased rates of relapse](#) [http: What is hypnosis – how does it work? During a hypnotherapy session, the depressed individual experiences a variety of relaxation stages. The hypnotherapist combines these states with imagery, and as the person moves into deeper, trance-like states of relaxation, the hypnotherapist is able to access the emotions and memories of the depressed individual that may have been repressed or forgotten. Once these memories are unveiled and learned behaviors are separated from the memories, the hypnotherapist reveals coping strategies and healthier, more productive thought processes directly to the subconscious mind of the depressed individual. While in this hypnotic state, the individual tends to accept the suggestions of the therapist. According to online resources, hypnosis helps patients identify the intrinsic causes of their depression and allows them to modify and refute their negative memories, feelings, and thoughts that contribute to the illness](#) [http: The resources that tend to be proponents of hypnotherapy for the treatment of depression are authors of hypnosis books, people who have been trained in hypnotherapy not necessarily people with degrees in clinical psychology , and some clinicians that use hypnotherapy in their therapeutic sessions and have found success. Is Hypnotherapy Effective – What are the Risks? Online resources claim that hypnotherapy brings results decrease in depression symptoms, better sleep, etc. Proponents of hypnotherapy for the treatment of depression believe that children are easier to hypnotize and may improve after one to two sessions](#) [http: One online resource cites a study in which hypnosis was found to be more effective than cognitive-behavioral therapy](#) [http: While these people believe that hypnotherapy is more effective than some other treatments of depression, they do not ignore the risks and potential harmful effects of hypnotherapy. Much like dependency on antidepressants is a risk with drug therapy, hypnotherapy can cause the depressed individual to become dependent on the therapist and therefore affect the long-term](#)

personal growth of the depressed individual [http: Science says](http://Science.says) Alladin and Alibhai evaluated cognitive hypnotherapy as an effective treatment for depression. The effects of hypnosis and cognitive-behavioral therapy combined were of interest in this study. Eighty-four participants who were considered depressive individuals were randomly assigned to either a cognitive-behavioral therapy CBT group in which they were only treated using CBT, or a group in which both hypnotherapy and CBT were used as treatment. This was maintained over a 6-month and month period. This study was very important; it was the first controlled analysis of hypnotherapy against an established psychotherapy technique for the treatment of depression. The results suggest that hypnotherapy does in fact provide effective treatment, compared to other psychotherapy techniques, for depression. Suzuki examined the effectiveness of hypnosis on lowering aggression and depression in depressed college undergraduates. Participants 13 depressed individuals, 13 non-depressed individuals in the study were shown six frustrating situations. Participants were evaluated in both their waking states and in their hypnotic state after undergoing hypnosis. The method of measuring emotions involved open-ended questions and rating scales. The results of the study showed that depressed individuals reported being less depressed while in the hypnotized state. An interesting finding of the study related to the aggression of depressed and non-depressed individuals while in the trance state. Based on the open-ended questions, depressed individuals were indicated by two raters as being less aggressive while in the trance state. However, non-depressed individuals were indicated as being more aggressive in the trance state than their waking state. This seems to explain the repressive side of depression, suggesting that hypnotherapy may be able to help eliminate unwanted behaviors and thoughts of the individuals. The results of this study cannot be generalized, however, to the entire population of depressed individuals because of the small sample size with college undergraduates being the only participants. Dobbin, Maxwell, and Elton assessed whether a self-hypnosis treatment would be effective in the primary care setting. Patients were given the choice of being randomized to a treatment group or be assigned to the treatment group of their preference. These treatment groups were either self-help self-hypnosis or a drug therapy treatment consisting of antidepressant medications. There were 58 patients recruited for the study: Cognitive-behavioral therapy and counseling were benchmarked, and the preference groups were close to similarity with the benchmarked trials on baseline scores, demographic information, and outcome effects. The outcome of the study shed favorable light on the possibility of using self-hypnosis in primary care for the treatment of depression. Gonsalkorale, Miller, Afzal and Whorwell studied the role of hypnotherapy in long-term relief of irritable bowel syndrome, a common co-occurrence in depressed patients. The irritable bowel syndrome benefits in this study are, however, not as important in this discussion as the relief of depression symptoms also seen in the study. Therefore, discussion will be on the pre-hypnotherapy anxiety and depression evaluation scores and the post-hypnotherapy improvement in these evaluation scores. Our measurement of interest is the Hospital Anxiety and Depression Scale. Scores post-hypnotherapy improved in both the responder and non-responder groups. The responder group had more improved scores overall immediately after hypnotherapy, but at follow-up this improvement was less evident. This suggests that the non-responder and responder groups became more similar as the time since hypnotherapy was performed increased. These results do not seem to strengthen the hypothesis that hypnotherapy is an effective long-term treatment for depression. What is the answer? There are few experimental studies focusing solely on hypnotherapy for the treatment of depression. Aside from cognitive-behavioral therapy, psychotherapy seems to be a novel and shallowly explored idea in the clinical field of psychology. While the results of the studies previously mentioned are mostly favorable of hypnosis as a therapy for depression, the lack of evidence makes it impossible to confidently conclude that hypnotherapy is an appropriate, or effective, treatment for depressed individuals. Hypnotherapy does have therapeutic benefits, however, that may serve to improve the condition of the depressed individual, but permanent curing effects are not known. As for all illnesses, the appropriate therapy depends on the needs and desires of the individual, and it is critical that each person consult with his or her physician or therapist regarding treatment options. Cognitive hypnotherapy for depression: The International journal of clinical and experimental hypnosis, 55 2: International handbook of clinical hypnosis, A benchmarked feasibility study of a self-hypnosis treatment for depression in primary care. The International journal of clinical and experimental

hypnosis, 57 3: Long term benefits of hypnotherapy for irritable bowel syndrome. The effects of hypnosis on emotional responses of depressed students in frustrating situations. The Japanese journal of psychology, 73 6:

Chapter 5 : Hypnotherapy as a Treatment for Depression

With emerging proof that medication is remarkably less effective than we had previously been led to believe, self hypnosis and hypnotherapy is more than merely an option - it is an excellent choice for treating depression.

See other articles in PMC that cite the published article. Abstract Depressive disorders constitute a serious problem in the United States. The appearance of practice guidelines and lists of evidenced based therapies suggests that adequate treatments for depression exist. However, a careful consideration of what we do and do not know about the treatment of depression leaves plenty of room for improved approaches to addressing this condition. Although there has been a dearth of research on the treatment of depression using hypnosis, there are several compelling arguments for the inclusion of hypnotic approaches in the array of strategies for dealing with depression. Types of research support deemed appropriate for determining whether a particular form of psychotherapy has solid footing as evidence-based have been delineated by a task force of the American Psychological Association APA Presidential Task Force on Evidence-Based Practice, One such caveat is we may still find ourselves in the situation in which of all forms of psychotherapy appear to be roughly equivalent - - the Dodo conclusion Jerome D. In spite of the conclusions from early meta-analyses in which CBT emerged as superior in the treatment of depression e. For example, authors of a recent meta-analysis of various forms of psychotherapy for depression cognitive-behavior therapy, nondirective supportive therapy, behavioral activation therapy, psychodynamic therapy, problem-solving therapy, interpersonal psychotherapy, and social skills training concluded that no one particular form of psychotherapy was clearly better than another. Another concern is, not all of the quantitative reviews of the data on depression treatment have supported the conclusion that antidepressants or CBT are particularly effective in treating depression, when considering outcomes beyond initial treatment effects. Rates of sustained remission from major depressive episodes are disappointing, even in the best randomized controlled trials in which more severely impaired individuals are excluded from consideration. Rates of relapse for depression are problematic. In the short term, psychotherapies for depression may reduce depressive symptomatology. Treatment dropout rates mitigate the overall effectiveness of therapy e. The number of people in the U. Given these concerns, it is important for clinicians and clinician-researchers to continue to develop methods of addressing depression. Against this rather confusing backdrop, we now turn to a consideration of the role hypnosis may play in the treatment of depression. Hypnosis in the Treatment of Depression There are several compelling arguments for the use of hypnosis in the treatment of depression. For example, the editor of this special issue, Michael Yapko, has proposed that hypnosis has relevance to the treatment of depression because hypnosis can help build positive expectancy regarding treatment, address numerous depressive symptoms including insomnia and rumination , and modify patterns of self-organization such as cognitive, response, attentional, and perceptual styles that contribute to depressed thinking and mood Yapko, The most extensively explicated approach to date is that described by Michael Yapko in which strategic, cognitive-behavioral, and hypnotic approaches are integrated Yapko, ; , An oft-cited meta-analysis examined whether hypnosis has an additive effect to CBT for a range of conditions. While this is at first glance encouraging, the value of this meta-analysis for appreciating the potential of hypnosis to improve psychotherapeutic outcomes in emotional disorders is limited. Only 5 of the 18 studies included in the meta-analysis addressed what could be considered psychiatric concerns: There has been relatively little research on the use of hypnosis in the treatment of depression. There may be several reasons for this state of affairs. There is a perception that we already have effective treatments for depression, using existing pharmacological or psychotherapeutic approaches, and that all that is really needed is to get more clinicians to use these highly effective approaches e. Clinicians skilled in the use of hypnosis may be reluctant to treat depression based on earlier, albeit unsubstantiated concerns that hypnosis may be harmful to depressed individuals. We now turn to a description of several research methodologies and their suitability for exploring the treatment of depression using hypnotic methods. Two additional methods, single-case design and benchmarking, are methods that can be more readily implemented within a clinical practice setting, and may address some of the shortcomings of RCT approaches. Randomized Controlled Trials and Empirically

Supported Treatments Meta-analyses have become a commonplace means of drawing broad conclusions from research data. Implicit in the use of meta-analysis is the assumption that the methodologies used in the studies selected are appropriate approaches to the questions being addressed, and an acceptance of the widely held view that psychotherapy either does, or does not, have empirical support. Indeed, several authors have suggested that randomized controlled trial methodology, on which the validity of meta-analyses often rests, may not be the most appropriate type of study design for providing empirical support for the use of hypnosis in treating various psychiatric problems, given that hypnosis is an adjunct to psychotherapy e. For the past 15 years, RCTs have been the dominant paradigm in research on psychotherapy. RCTs lend themselves to meta-analysis, and following the influential paper by Smith and Glass , in which all forms of psychotherapy were found to be effective with no clear superiority for one approach , subsequent meta-analyses began to parse the psychotherapy outcome literature according to type of therapy and, following publication of DSM-III, according to diagnostic category. Although RCTs have dominated the research on psychotherapeutic efficacy, they have several limitations that are particularly relevant to the question of whether hypnosis is a useful therapeutic strategy in treating depression. Several of the shortcomings identified by Westen et al a and others e. One particularly important concern is whether results from RCTs can be generalized to actual clinical practice. Generalizability to clinical practice The psychotherapeutic interventions tested in RCTs are usually designed to address a single, specific Axis I disorder. This limits the extent to which the findings will generalize to practice. In addition to generalizability concerns, several issues have particular bearing on whether hypnosis can be deemed useful based on RCT methodology. These issues include the requirements of treatment manuals, practical considerations in evaluating specific therapeutic components e. Reliance on treatment manuals Randomized clinical trials require treatment manuals so that the independent variable in such studies can be clearly specified. Treatment manuals in RCTs serve several functions: How readily can hypnosis be manualized? Clearly, if one is following standardized scripts or using taped sessions to conduct hypnosis, this is not problematic. Some researchers have taken this approach. For example, in a meta-analysis of 26 RCTs examining the impact of hypnosis in reducing distress from medical procedures, a large. Many of the studies included in this meta-analysis delivered hypnotic interventions via audiotape. Most of the remaining studies used scripted hypnotic sessions, although in some cases, therapists delivering the interventions did make use of the unique histories and interests of study participants in crafting and delivering hypnosis e. Westen et al a made an interesting point regarding treatment manuals and clinician judgment: This places a premium on development of treatment packages that minimize clinical judgment because such treatments are the only ones that allow researchers to draw firm causal conclusions p. Some aspects of hypnosis may lend themselves to manualization. The cognitive-behavioral and strategic approach to treating depression using hypnosis outlined by Michael Yapko Yapko, , is outlined in considerable detail. These publications could constitute treatment manuals, but would require a high level of therapist training and supervision to be appropriate for use in an RCT. Hypnosis is an adjunct to various forms of psychotherapy, not a stand-alone psychotherapy Another challenge in examining hypnosis with RCT methodology stems from its generally accepted position as an adjunct to existing forms of therapy, rather than a therapy in and of itself. The use of hypnosis in psychotherapy has been described within a psychodynamic framework e. The effect size associated with adding one additional, useful psychotherapeutic component to an existing efficacious treatment is likely to be small, thereby requiring a very large sample size in order to achieve statistical significance. In terms of clinical significance, however, the differences between the two groups were small. Expectation that progress in psychotherapy is linear RCT methodology is predicated on the assumption, largely derived from the medical model, which may be summarized and elaborated upon, as: Once the cure is complete, the drug can be discontinued. Early drug discontinuation leads to incomplete cure and the condition remains. Some have argued, rather convincingly, that the medical model is a poor fit for how psychotherapy truly proceeds Elkins, Psychotherapy rarely, if ever, proceeds in this linear fashion. Research on sudden gains in psychotherapy for depression nicely illustrates this point. Case Studies and Single Subject Design Most published reports regarding the use of hypnosis in the treatment of depression consist of narrative reports of treatment of a single individual “the case study” e. Case studies are useful for hypothesis generation, and in a

limited sense can test hypotheses, but have drawbacks in terms of the extent to which inferences can be derived from them. Kazdin, Single subject design is a methodology that can be useful as a means of building the case for the use of hypnosis for depression. Single subject design is referred to by many terms, including single case experimental design, case-based time series design, single participant research design, time series analysis, and interrupted time series design. Single subject design is different than a case study, where one writes an in-depth qualitative description of a case. Single subject design improves over writing a case study or report because it allows for experimental control and demonstrates a functional relationship between the independent and dependent variables. A number of authors have encouraged clinicians and researchers to utilize this often overlooked methodology.

Single subject design has been used to examine new treatments and existing treatments applied to different populations or problems. The basic elements of single subject design are most easily illustrated with an AB design, where A denotes the baseline phase and B denotes the treatment or intervention phase. A brief primer on this methodology has been well articulated by Rizvi and Nock. The first step in using this methodology is determining what target will be monitored. Targets should be specific behaviors that an individual can measure reliably over time. Behaviors can be measured in terms of frequency, duration, or intensity. For example, a clinician using hypnosis to target depression would work with the client to assess behaviors associated with depression that they would like to change. Targets could include frequency of behaviors related to being active.

Monitoring of targets should occur on a regular basis. Once targets have been defined, monitoring should occur to establish a baseline. Before implementing the intervention, the baseline should be stable so that changes in the target behavior can be more clearly attributed to the intervention and not other factors, such as passage of time. In instances where stability does not occur, it is also acceptable to implement the intervention if the target is moving in the opposite of the desired direction. In addition to needing a stable baseline to attribute change to the intervention, the intervention must be applied only after the baseline phase. Traditional analysis of change in single subject design is visual inspection of graphed data, per guidelines outlined by Bailey and Burch and Barlow and Hersen. If the intervention had the intended effect, change in the data should be in the desired direction, immediate, discernible, and maintained over time. In single subject design, confirmation of a finding.

In a clinic setting, replication can be demonstrated across clients. Conducting this methodology with consecutive cases is preferred over selective choice of cases as the latter leads to greater bias. Barlow and colleagues have updated one of the best references for single subject design in which they clearly describe the procedures for conducting such research. Benchmarking has been used to test the effectiveness of treatment in clinical settings. Although this method has been used primarily to address whether empirically supported therapies from RCTs can be successfully implemented in clinical practice settings, there is no reason, in principle, why this method cannot be used to determine whether the treatment of depression using hypnosis can produce effects comparable to those seen in RCTs of depression in which other forms of psychotherapy are used. Procedurally, benchmarking is relatively straightforward. Outcome data from a clinical setting are compared to data from one or more clinical trials, using effect size estimates derived from measures comparable across settings. Minami and colleagues recently provided benchmarks of psychotherapy efficacy for adult depression. Their benchmarks were based on 35 published clinical trials that met stringent inclusion criteria: Fifty of 58 recruited patients from a primary-care setting chose self-hypnosis for the treatment of their depressive symptoms. Hypnosis was delivered via CDs taken home by the patients. Nurses made regular phone calls to check for problems and monitor for suicidal thoughts.

Chapter 6 : Hypnotherapy for Depression - Hypnotherapy Directory

Hypnosis and Treating Depression has 1 rating and 0 reviews. Michael Yapko's seminal book, Hypnosis and the Treatment of Depressions, was the first.

Reason being, while a lot of hypnotists know that hypnosis can help with anxiety and depression, they might not always be able to clearly articulate the ins and outs of how hypnosis helps treat mental illnesses such as anxiety and depression. So this article will equip you with the knowledge to do just that. Any idea what this is? Everything and anything that makes up who you are resides in your unconscious. Well hypnosis engages and schmoozes this gatekeeper. And once the gatekeeper is occupied, a hypnotist is able to really examine the underpinnings of your unconscious. So hypnosis and trance simply open up the doorway. They allow you to fully imagine often in vivid technicolor detail how much better life can be. What it would be like to take on completely new behaviors, beliefs and identities. Given this, the one thing hypnosis has that most modern day therapies lack is the ability to quiet your negative internal conversations. Hypnosis does an incredible job of sidestepping this. Another thing that sets hypnosis apart is the ability to restructure cognitive distortions. Hypnosis allows for the accessing and restructuring changing the pattern of conscious, automatic and unconscious cognitive distortions and negative self-schema. And it just so happens that hypnosis is naturally adept at altering the self-schema. Your job as the hypnotist is to identify the thought patterns that have been causing your clients harm and then help them re-write these mental stories. Hypnosis is almost always their last line of defense. But why is this? Science has made leaps and bounds when it comes to treating depression with medicine. And that quality therapy can help tremendously too. Sometimes this might be enough. But other times, a person might benefit from a mixture of medicine and therapy. And when in doubt, always refer out to someone more qualified, such as a psychologist or a psychiatrist. This is because severe mental disorders are usually outside of the realm for most hypnotists unless they have had specific and intensive training to deal with such disorders. Aside from not being able to give them the treatment they desperately need, you could severely damage your reputation. So always keep your ethics and best practice procedures at the forefront of your mind. The first rule of thumb is to stay within your scope of practice and use your best judgement, especially when it comes to calling people who are more qualified such as if you suspect someone is suicidal.

Help Your Subject To Discover Their Inner Strength

An all too common struggle for people suffering with depression and anxiety is how they view themselves. They often have a poor and distorted view of themselves. Their self image can be one of despair and disgust. Or, they feel overwhelmed and unable to cope with tasks in their life. One of the most powerful things you can do for your subjects is to help them find resources within themselves that can then be applied to the problem. After all, a problem can no longer exist in a resourceful state.

Parts Therapy

Often people who are depressed will have internal struggles. This can often materialize in their language. It helps to resolve and bring opposing ideas or beliefs into harmony and wholeness. It becomes a team player! One of the first people to employ parts therapy was Virginia Satir. Below is an example of how parts therapy can be used with depression. There is often an inner conflict happening. You could help them explore and make contact with the part of them that is causing them to feel worthless and hopeless. Parts never have a harmful or evil intent. There is always a higher purpose for each part. You will discover that the highest purpose is identical for the parts, which is the reason they can be integrated. You need to walk a fine line when doing parts work. If someone has a history of severe mental illness DID, psychosis, schizophrenia, etc parts work might push them over the edge. As mentioned before, when in doubt always refer out.

Reframing Depression and anxiety sufferers

are often plagued with very negative thoughts. The negative and warped thinking that accompanies depression and anxiety disorders can hijack what would be an otherwise amazing day for most people. Reframing allows a person to get a new perspective aka put a new frame around something in particular. A frame is a context in which a belief or idea exists. Reframing is taking a step back and getting a different perspective. Reframing allows people to see the silver lining in seemingly bleak situations. The meaning you attach to a situation depends on the assumptions that are formed by beliefs, values, etc you hold about it. What reframing does is open up new personal choices

of seeing and experiencing the world. The way they did this was by testing multiple groups with hypnotic interventions which were delivered either by a therapist, or via tapes self-hypnosis. Hypnosis in the Treatment of Depression: Anxiety and depression affect upwards of 55 million people in the U. Hypnosis has been proven as a powerful ally in the emotional struggles that haunt depression and anxiety sufferers.

Chapter 7 : Hypnotherapy Treatments for Depression and Anxiety in London - Freedom Hypnosis

The symptoms of depression and characteristics of a hypnotized subject share some similarities. This causes hypnosis to resonate strongly with depressed patients, and it can be an effective healing tool if used in the right way.

You might also like these other newsletters: Please enter a valid email address Sign up Oops! Please enter a valid email address Oops! Please select a newsletter Hypnosis involves invoking a trance-like state in which the patient has a heightened focus. Key Takeaways Far from a cabaret act to amuse a crowd, hypnosis therapy can help the mind get past the pain of depression. Hypnosis works in part by showing you how to focus on the future through a type of guided therapy. It was just after Sept. He was severely depressed after a breakup, and one of his closest friends came "this close" to getting on a flight on that fateful day. At the time, Billing worked for an extremely progressive company that supported the use of alternative therapies, including hypnotherapy, for depression. In hypnotherapy, there is no clock on a chain that waves back and forth as a person grows sleepy. In medicine, hypnosis involves invoking a trance-like state in which the patient has a heightened focus, says William Dubin, PhD, a member of the American Psychological Association and a psychologist specializing in hypnotherapy at Psychological ARTS in Austin, Texas. A healthcare professional often guides the process, according to the American Psychological Association. Besides depression, hypnosis may help with issues such as hot flashes, smoking cessation, and pain management, according to the National Center for Complementary and Alternative Medicine. The number of sessions needed to see an effect varies. Some people are able to self-hypnotize by following a CD or DVD, but others may need more guidance, at least in the beginning, Dr. His therapist played relaxing music and asked Billing to close his eyes. The experience allowed Billing to see himself and his choices more clearly, especially in terms of how he approaches dating and relationships. Before hypnotherapy, he was jealous, clingy, and insecure. In, after being moved by a documentary about elephants in danger of extinction, he wrote a musical called Tusk that played off Broadway. We ask the person to go back to a time when they felt the same emotions while in a trance. In this future moment or future memory, the brain creates expectations on a subconscious level and creates new emotions and beliefs about what the future holds. Good candidates for hypnotherapy are individuals who get easily absorbed in books or movies, those who are adept at visualization, and those who are open to hypnosis.

Chapter 8 : NY Health Hypnosis - Hypnotherapy for Depression

Hypnosis, hypnotherapy, and hypnotic suggestion are all names for a type of therapy that involves putting people into a trance-like state. Achieving this state is intended to promote focus in an.

Chapter 9 : Hypnosis and Treating Depression: Applications in Clinical Practice by Michael D. Yapko

There are many ways to use hypnosis in treating depression including building positive expectations to counter hopelessness, reframing emotion-laden memories, enhancing perceptual flexibility.