

MEDICAL USE OF HYPNOSIS*

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HISTORY

Hypnosis is one of the oldest of the medical arts, and was practised by the ancients in one form or other, usually associated with the various religious rites. With the development of Christianity, trance states were considered forms of witchcraft, and it was not until the end of the 18th century that the phenomena of hypnosis were recognised openly as a therapeutic agent.

Round about 1770 Mesmer produced marvellous cures by means of magnets. To explain his famous cures which created a sensation in Europe, he formulated his theory of animal magnetism, and in 1776 he wrote his doctorate thesis on *The Influence of the Planets on the Human Body*. Thus was born the concept of animal magnetism or mesmerism (1).

James Braid, Manchester Surgeon (1795-1860), experimenting on the phenomena of hypnosis, found that the results were not due to animal magnetism, and he renamed mesmerism hypnotism. In 1842, Braid offered to read a paper on the subject before the British Medical Association which was to meet in Manchester. The offer was rejected. In the same year Squire Ward presented before the Royal Medico-Chirurgical Society of London a paper on amputations performed painlessly on a hypnotised patient. The paper was branded as ridiculous as were the reports of Braid to the effect that he had cured cases of contractures and disorders of sensibility such as deafness (2).

John Elliotson, the first to introduce the stethoscope to England, was the first Professor of Medicine at the newly established University of London, and he was the leader of the Mesmeric Movement in London. He began to treat patients with mesmerism and gave lectures and demonstrations which attracted large and distinguished audiences. He was severely criticized by his colleagues and urged to desist by the Dean of the School. Being a man of firm convictions, he stood his ground and was forced to resign his position in 1836. Undaunted, Elliotson carried on his work in mesmerism, started a journal called

the *Zoist* for the express purpose of propagating mesmerism, and on June 27, 1848, he delivered the Harveian Oration before the Royal College of Physicians in London, mesmerism was the subject of his address (5).

Liebeault, who was considered the real father of modern hypnotism, was one of the first physicians who experimented with the therapeutic value of hypnosis on a large scale. He treated thousands of patients suffering from a great assortment of physical symptoms. Berheim a professor at the Nancy Medical School, incensed by the claims of Liebeault, decided to visit his clinic to expose him as a quack. He was instead so amazed at Liebeault's work that he undertook a study of hypnotism, and he soon became one of its most ardent devotees. In 1886 he published his book, *De La Suggestion* (translation in English — *Suggestive Therapeutics* — copy in Library) in which he claimed cures for hysterical hemiplegia and aphonia, hysteroid crises, gastric difficulties, loss of appetite, depressions of the spirit, pains, tremors, and a number of other complaints associated with functional diseases. About the same time Charcot, the famous neurologist, and his followers at the Paris Hospital of Salpêtrier, tried diligently to devise scientific tests for hypnosis. Charcot, trained in neurology and thinking in terms of objective structure and physical effect maintained that hypnosis was a pathological phenomenon akin to hysteria, the product of an abnormal nervous constitution. These views were opposed by the Nancy School headed by Bernheim, who maintained it was a normal psychological manifestation. The controversy now settled in favour of the Nancy School (1) (2).

In 1891, the British Medical Association appointed a committee to investigate the therapeutic value of hypnosis. The published report contained the opinion that "as a therapeutic agent, hypnosis is frequently effective in relieving pain, procuring sleep and alleviating many functional ailments (3).

Esdaile performed a series of mesmeric operations in India from 1845-1851. He had performed several thousand painless minor operations and about 300 major operations

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including cataracts, amputations, hydroceles and scrotal tumours. Scrotal tumours were very common in India, but few surgeons cared to attempt the operation because of an average mortality of 50%. Esdaile performed 161 consecutive scrotal operations under mesmeric anesthesia with a mortality of only 5%. (5).

Sampimon and Woodruff described 29 surgical and dental operations successfully performed under hypnosis while in a prisoner-of-war camp in Singapore during the Japanese occupation (7).

In 1955 a specialist subcommittee of the British Medical Association under the Chairmanship of Professor Ferguson Rodger, with Professor Alexander Kennedy and others looked into the therapeutic value of hypnosis again, and finally cleared off the cobwebs of magic which had clung to it for so long. It was then officially admitted as a useful aid to the practice of medicine, minor surgery and dentistry (6).

In 1957, the American Medical Association Council on Mental Health undertook an exhaustive study on the subject of hypnosis. In June 1958 its unanimous report on "Medical Use of Hypnosis" was officially approved by the American Medical Association (5).

The need for rapid treatment of war neurosis during World Wars I & II led to a tremendous interest in hypnotherapy. Scientific journals devoted exclusively to hypnosis have appeared all over the world, indicating the increased interest in this age old science. Clinical and experimental investigations into the scientific applications and the limitations of hypnosis, are being conducted by well-trained investigators in nearly all the medical, psychological and ancillary disciplines. Many thousands of physicians, dentists, and psychologists in the United States have received training in the introductory workshops on hypnosis conducted by leaders in the field. In 1962, training in hypnosis was included in the psychiatric residencies at Johns Hopkins University, University of Cincinnati, University of California at Los Angeles, University of Oklahoma, Louisiana State University, University of Arkansas, Columbia University, Emory University, and University of Michigan. Graduate courses in hypnosis were given at the Graduate School of Medicine, University of Pennsylvania, and at Mount Sinai Hospital in New York City. Undergraduate lectures were made part of the psychiatric curriculum at Temple University, University of Maryland,

University of Virginia and University of Colorado (8).

ASTHMA

There is extensive literature in the psychogenic aspects of asthma (9, 10, 11). Hippocrates, over two thousand years ago, shrewdly remarked that the asthmatic, if he were to master his condition, must "guard against his own anger" (12). Salter (13) himself a martyr to this condition, expressed the prevailing view that "its cause lies within the nervous system". A pioneer contribution from the psychoanalytic viewpoint was made by French and Alexander (10) of Chicago, who regarded asthma as a substitute for crying. Abundant clinical evidence points to a close association between feeling states and bronchial asthma. Many asthmatic patients are aware that an emotional disturbance, e.g. feelings of intense anxiety or unexpressed resentment, may provoke or aggravate an attack. The classic story (MacKenzie, 1886) of the asthmatic lady, reputed to be allergic to roses, who had an attack of asthma on smelling an artificial rose, supports the hypothesis that emotions or ideas, *inter alia*, may act as causal agents (14). Magonet (15) mentioned the case of a patient who was sensitive to ragweed pollen, but who, interestingly enough, did not have these attacks when his mother-in-law was out of town. A boy working in his father's flour mill was allergic to flour. He was told to move to a different town and to avoid working in a flour mill. He moved, but as things worked out, the new job offered was in a flour mill, yet he was no longer allergic to flour. When he returned, however, and worked for a brief period in his father's mill the asthma returned (15). Recent observations (16) showed that typical attacks of asthma could be hypnotically produced, and the attacks thus provoked could be immediately terminated by appropriate hypnotic suggestions. Numerous authors (3, 4, 15, 17) have treated asthma by hypnotherapy, and often the results were dramatic.

Case 1. Mrs. C. K. F., age 42, housewife, husband a mechanic, gave birth to 6 children, 2nd and 4th died soon after birth, now 4 living — eldest 16 years, youngest 7 years. She was a tense woman, worried about her children, about their poverty. She had asthma for the past 16 years. During the past few years her asthma was so bad that she had to pay daily visit to the Hospital past midnight and early hours for adrenalin injections. Finding no improvement in her condition she went in despair from G.P. to G.P. and was finally

put on steroid therapy. Hypnotherapy was used on her. She showed dramatic relief after the first session. Four sessions cured her completely.

Case 2. Miss S. S. P., age 18, a tailor, had asthma since menarche at 14. One month she had several attacks, more during rainy days and usually at night. She was regressed to her menarche and it was discovered that one afternoon she was playing when to her great shock, she found she was bleeding from her vagina. Her mother was working, and she cried till her mother's return in the evening. The same night she had a severe cough and developed asthma. She had no more asthma after three sessions. Asthma could be hypnotically induced and terminated in her.

OBSTETRICS

The use of hypnosis in childbirth is a most gratifying and rewarding experience for both the patient and her obstetrician. Josephine A. Davidson (18) in an Assessment of the Value of Hypnosis in Pregnancy and Labour, a thesis accepted for the M.D. by the University of Edinburgh in 1961., concluded that the duration of the first stage of labour was reduced in the hypnosis group, that hypnoanesthesia was an effective analgesic in labour, that the episiotomy or tear rate was less and that the subjective impression of labour was much more pleasant in the hypnosis group. Abramson and Heron (19) in an Objective evaluation of hypnosis in obstetrics found that the length of the first stage of labour could be decreased by an average of about two hours for all classes of patients. For primigravidae the duration of labour may be shortened by as much as 3½ hours.

For those patients that are able to attain deep hypnosis, labour can be rendered entirely painless. Episiotomy, forceps delivery and repair can be performed without analgesia or anesthesia in this group. Even for those who do not go deep in hypnosis the dose of chemoanalgesia required is very much less. This marked diminution in the need for chemoanalgesia has been observed by many workers (18). This is one of the most important benefits which can be obtained from using hypnosis in childbirth. It gives greater safety to mother and child as chemical anoxia is eliminated. J. B. DeLee, the father of obstetrics, stated that "the only anesthetic that is without danger is hypnotism" (20). Third stage blood loss is decreased. Decreased blood loss during the

hypnotic state has been observed by many workers not only in obstetrics but also in dentistry and surgical operations. Kroger (21) believes that this is probably due to a vasospastic condition of the capillaries or an effect on the blood coagulation. One of the things which patients usually notice most after a hypnotic confinement is that they feel perfectly fit and well as soon as the labour is over. The patients are able to move about easily soon after labour is over. Thus the risk of venous thrombosis and pulmonary emboli is very much reduced. Patients in hypnosis remain much more co-operative with their medical attendants; this co-operation cannot be obtained from heavily sedated patients.

Case 1. Mrs. P. P., age 31, Gravida 4, Para 3, was conditioned for delivery under hypnosis at K.K. Hospital. She first felt the labour contractions at 2.30 a.m. She went to Hospital at 3.30 a.m. At 4.15 a.m. vaginal examination found that the cervix was fully dilated. The patient had been taught auto-hypnosis, and was able to go into deep trance whenever the contractions became too strong for her to bear. The consultant obstetrician who was supposed to deliver the baby arrived just in time to deliver the baby which was born at 5.05 a.m. No drugs were given during the labour, not even ergometrine. The placenta soon separated and was expelled. Blood loss during the third stage was carefully measured and found to be only one fluid ounce. There was no perineal tear; she had had tears in all her previous deliveries. This was the largest of all her babies.

Case 2. Mrs. S. H., age 24, Gravida 1, para 0, was conditioned for delivery under hypnosis. She had a total of seven sessions and was able to attain medium hypnosis. When she came in, her cervix was 2½ fingers dilated, almost effaced, with contractions of moderate intensity of 15 minutes intervals. She was hypnotised. As labour progressed, and when the contractions were one minute apart, she showed some discomfort at the height of each contraction. The cervix was then found to be almost fully dilated. 50 mgm. of pethedine was given. The membrane was ruptured, episiotomy was done when the head was crowning, and a 7 lbs baby was delivered without much trouble. The baby cried spontaneously immediately it was born. After the little pethedine injection the patient showed no further discomfort at the delivery and perineorrhaphy. Neither was she delirious or drowsy which was constantly seen with patients given full doses of pethedine,

NAUSEA AND VOMITING IN PREGNANCY

Nausea and vomiting in pregnancy are astonishingly susceptible to hypnosis. Kroger, formerly Associate Professor of Obstetrics and Gynecology, Chicago Medical School, who had practised hypnosis for 30 years, claimed that the incidence of cure by hypnosis is over 85% (4). Platonov treated 583 grave cases of hyperemesis gravidarum in Russia and cured over 84% with an average of 7 hypnotic sessions (22).

Case 1. Mrs. M. A. Gravida 2, para 1, age 30, office clerk, began to have nausea and vomiting when her period was overdue for one week. At first she was treated with B-complex injection, collubard and navicum. When taking the tablets she had no symptoms, though could not take much. Three sessions of hypnosis stopped all her symptoms.

Case 2. Mrs. J. P., Gravida 3, para 2, had symptoms when her period was overdue for 2 weeks. She had nausea and vomiting during all her previous pregnancies. After four sessions she was completely well.

DERMATOLOGY

Both the central nervous system and the skin are of ectoderm origin. The skin often mirrors the mind and acts as a defensive weapon in times of stress. The existence of psychological factors in the etiology of many skin conditions has been recognised for over a century.

Ullman described the production of a herpetic lesion and a second degree burn by hypnotic suggestion (23). Mason (24) has demonstrated the clinical inhibition of Mantoux reactions in Mantoux-positive patients on one arm and the normal reaction on the other. Experimental inhibition of immediate-type hypersensitivity responses by direct suggestion under hypnosis has been reported by Black (25). Mason and Black have shown "allergic skin responses abolished under treatment of asthma and hay fever by hypnosis (26). Sinclair-Gieben and Chalmers have shown that warts respond remarkably well to hypnosis (27). Ikemi and Nakagawa (28) demonstrated that skin pathology could be produced by a conditioning suggestion procedure and the histological findings of such induced skin pathology proved similar to the pathological skin changes caused by actual contact with the noxious trees. McDowell, Clinical Associate in the Psychiatry department of the University of Southern California from a critical review

of literature has listed the following skin conditions treated effectively by hypnosis:— Alopecia areata, Arspnenamine dermatitis, dermatitis artefacta, eczema, erythrodermia, herpes simplex, hyperidrosis, lichen planus, neurodermatitis pemphigus vulgaris, pruritis, psoriasis, rosacea, spontaneous haemorrhage, urticaria, verrucae (29).

Case 1. Miss A. H. K., aged 23, had a wart, size of a peanut, on the medial aspect at the base of the left big toe. It was excised under L.A. Three months later a similar growth reappeared at the same spot. Hypnosis was used. She went into deep trance. Four sessions at intervals of two sessions a week caused the growth to disappear completely.

Case 2. Miss K. B., age 7, had skin eruptions on her fingers and toes. These eruptions appeared mostly on the sides of the fingers and between the toes. They first appeared as small macular eruptions, then vesicular, and when ruptured became septic. They were itchy, and when severe spread up the hands and legs. They cleared with Achromycin and Chlor-Trimeton, but they recurred again and again. She was thus treated for nearly 20 times. At last she was hypnotised. Five sessions cured the condition completely and never recurred again.

ALLERGIC RHINITIS (VASOMOTOR RHINITIS)

Emotional states affect the nasal membrane; the cold that follows a family dispute, some grief or stress is well known.

Medical treatment for this condition is usually disappointing. The following is quoted from the S.M.J., Vol 3, No. 1 "Dragons in the Nose".

(There is a common belief among certain sections of the Chinese in Singapore that it is better to consult a Chinese traditional doctor rather than a qualified medical practitioner when one is suffering from nasal obstruction or discharge from the nose because relief for this condition from the qualified practitioner is usually poor. The Chinese sinseh would diagnose the condition as "dragons in the nose" and to cure this condition, he would pretentiously remove small oval whitish blood-stained pieces of tissue from each nostril. The patient presented with these tissues to take home, invariably experiences dramatic relief of his symptoms. Many patients got cured in this way. Some of these patients, ranging from University graduate to merchant, and

salesman, marvelled at the ability of the sinseh presented the tissues to the pathologist. Histological examination and precipitin test discover that the tissues were pig's lymph nodes.)

However, whatever method of treatment used, the Chinese sinseh gets better results. These are fine examples of waking suggestions.

Some of the cases of allergic rhinitis respond remarkably to hypnotherapy, and many of them can be greatly improved by hypnotherapy.

Case 1. Mr. C. T. C., age 35, has been suffering from vasomotor rhinitis for 5-6 years. The symptoms usually occurred in the morning, during cold weather, and after sweating after hard work. First the nose became itchy, then sneezing came and they watered. After one hypnotic session, he experienced a very dramatic relief. Now very seldom has he had these symptoms again.

Case 2. Miss T. G. L., age 15, has been having nose trouble for quite a number of years — so long that she can not remember. In 1957 Sinuses X-ray showed hypertrophy of the inferior turbinates; Maxillary sinuses clear; ethmoid cells rather hazy and the frontal cells also slightly opaque; appearances indicate an infection involving mainly the ethmoids and frontal sinuses. Nose first became itchy, then sneezing and running nose. Sneezing usually in the morning; and at night nostrils blocked. After two sessions she was completely free from trouble.

PEPTIC ULCER

Digestive malfunctions are common disorders and most of them have a psychogenic basis. Hypnotherapy is thus effective in many cases. Hamilton Moody (30) in a Ph.D. dissertation on "An Evaluation of hypnotically induced relaxation for reduction of peptic ulcer symptoms", described the investigation and comparison of peptic ulcer cases treated by hypnosis and by medical treatment. Twenty patients between the ages of 25-45 participated. All patients had a moderately severe duodenal ulcer of not less than six years' duration. Progress was checked and assessed by pre- and post-therapy X-rays. The results show that the treatment of duodenal ulcer patients by hypnotically induced relaxation therapy reduces their medically diagnosed symptoms, and that the clinical improvement in terms of symptom reduction was greater than had been indicated by the radiographic ratings. The author intends to follow up these 20 patients

and X-ray films will be taken after several years.

Case 1. Mrs. C. Y. C., age 72, had been suffering from peptic ulcer since the age of 46. Barium meal in 1955 showed Chronic duodenal ulcer. Her symptoms were relieved by antacids. Surprisingly by 1959 when all her sons graduated (four from the Universities), and got secure positions, she was totally free from any symptoms for the past 4 years till early 1963 when some domestic emotional stress caused all her symptoms to relapse. Hypnosis was used; she was able to attain medium trance. She had been symptom free for the past many months.

Case 2. Mrs. P. A. C. age 46, had epigastric pain for the past 20 years. She was a tense, highly irritable type of woman, and a worrier. Antacids relieved the pains. She showed marked relief of her symptoms after two sessions, and was given a total of six sessions. Now she has only occasional discomfort.

FUNCTIONAL DYSMENORRHEA

This is a disease of theories. Recent researches place the etiology in the realm of disorders of the autonomic nervous system, much like the manifestations of bronchial asthma. In a large number of women the belief exists that as soon as their periods begin they are "unwell". In many cultures menstruating women are regarded as "unclean", and society has surrounded them with a series of rigid taboos. In western civilisation, generations of school girls have learned to refer to their menses as "the curse". With such a background, therefore, it need not surprise us to find that numerous women suffer from dysmenorrhea.

Hypnotherapy often provides remarkable cures.

Case 1. Miss T. G. L., age 15, has been suffering from menstrual pains for the past three years. The pain occurred during the first two days. She was so bad that she had to be confined in bed. Three sessions cured her completely. She was regressed to her first period and made to realise that menstruation was a normal physiological process in women free from any discomfort.

Case 2. Miss S. S. P., aged 18, had asthma and dysmenorrhea since menarche at 14. Hypnotherapy was used, and she is now free from asthma and dysmenorrhea.

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