

ABSTRACTS OF CURRENT LITERATURE

AMERICAN JOURNAL OF CLINICAL HYPNOSIS, 40(1), JULY 1997

Articles

Kirsch I, Lynn SJ. Hypnotic involuntariness and the automaticity of everyday life. pp. 329–348.

A new theory of hypnotic involuntariness based on an integration and extension of recent social and cognitive theories on the automaticity of mundane, intentional behaviour is presented. It is argued that experiences of volition/non-volition are interpretations, derived from contextual cues and prior beliefs, made possible by the high degree of automaticity that is characteristic of all behaviour. By this view, suggested non-volitional behaviours are intentional acts, triggered automatically by situational cues and cue-related sensations, enabled by the formation of generalized response expectancies.

Address for reprints: Irving Kirsch, PhD, Department of Psychology, U-20, University of Connecticut, 406 Babbidge Road, Storrs, CT 06269-1020, USA.

Walsh BJ. Goldfinger: A framework for resolving affect using ideomotor questioning. pp. 349–359.

The author presents a structured protocol for resolving repressed, suppressed or otherwise dated affect using ideomotor questioning. Central to the model is a progressive ratification series addressing affect, cognition and behaviour. A questioning tree illustrates the method of affect inquiry and case examples demonstrate its application. It is proposed that the method is a useful adjunct to other treatment modalities and instrumental in clarifying the focus of treatment.

Address for reprints: Bart Walsh, MSW 5719 SW Corbett, Portland, Oregon 97201, USA.

Hammond CD. Advantages and safeguards in using the ideomotor signaling technique: A commentary of Walsh and clinical practice. pp. 360–367.

Research applications of ideomotor signaling are discussed. In a commentary on the uses and misuses of ideomotor signaling and on Walsh's (1997) variant of this technique, safeguards are discussed, particularly concerning asking questions regarding the exploration of events from the past.

Address for reprints: D. Corydon Hammond, PhD, ABPH, University of Utah School of Medicine, PM&R, 50 N. Medical Drive, Salt Lake City, UT 84132, USA.

Casiglia E, Mazza A, Ginocchio G, Onesto C, Pessina AC, Rossi A, Cavatton G, Marotti A. Hemodynamics following real and hypnosis-simulated phlebotomy. pp. 368–375.

Describes a study comparing blood pressure, arterial flow and forearm peripheral resistance in 22 subjects during a 300 ml blood letting and subsequent recovery, and 22 highly hypnotizable subjects simulating blood donation by means of verbal hypnotic suggestions. BP, flow and resistance curves were similar in both groups, without any between-subject difference or group-time interaction. Hypnosis alone and simple

bed resting did not produce comparable effects. Results are interpreted as indicating that the hemodynamic changes observed during and after blood loss are partly due to mental involvement.

Address for reprints: Edoardo Casigilia, MD, Department of Clinical and Experimental Medicine, University of Padova, Via Giustiniani, 2 - 35128 Padova, Italy.

Stanton HE. Gurdjieff and ego-enhancement: A powerful alliance. pp. 376–384.

Twenty-four housewives wishing to take more control over their lives were matched for Control of Life Thermometer scores and randomly allocated to experimental and control groups. Control subjects read material on how they might achieve the desired control, while experimental subjects had two 50-minute sessions teaching them to embed suggestions derived from the work of Gurdjieff into a framework designed to maximize their acceptance. Result suggest that control of life, as measured by the Thermometer, was significantly greater both immediately after treatment and at six-month follow-up.

Address for reprints: Dr. Harry E. Stanton, CULT, University of Tasmania, Box 252 C, GPO, Hobart, Tasmania 7001, Australia.

Book reviews

Sheehan PW, McConkey KM. (1996). *Hypnosis and Experience: The Exploration of Phenomena and Process*. New York: Brunner/Mazel. Reviewed by VK. Kumar and Michael McCloskey.

Matthews WJ, Edgette J. (1997). *Current Research and Thinking in Brief Therapy: Solutions, Strategies, Narratives. Vol. 1*. New York: Brunner/Mazel. Reviewed by Sharon B. Spiegel.

Pezdek K, Banks WP. (Eds) (1996). *The Recovered Memory/False Memory Debate*. San Diego: Academic Press. Reviewed by David H. Gleaves.

AMERICAN JOURNAL OF CLINICAL HYPNOSIS, 40(2), OCTOBER 1997

Articles

Golan HP. The use of hypnosis in the treatment of psychogenic oral pain. pp. 89–96.

The lack of published research reporting psychogenic pain of dental origin is noted. This paper reports two such cases. The first describes a situation which resulted in five operations being performed before an adequate diagnosis was made and treatment started with hypnosis. The second involves an inability to work, sleep, and lead a normal existence because of pain which had no organic origin. Hypnosis treatment allowed the patient to have a proper diagnosis before any operative treatment was given and resume normal activity.

Address for reprints: Harold P. Golan, DMD, 23 Ridge Avenue, Natick, MA 01760-2533, USA.

Boyd JD. Clinical hypnosis for rapid recovery from dissociative identity disorder. pp. 97–110.

This paper describes a case involving the treatment of Dissociative Identity Disorder (DID) using psychotherapy with hypnosis. Based on multiple pre- and post- intervention measures, plus treatment trajectory monitoring and explication, the study offers

support for the instrumental effects of clinical hypnosis in rapid recovery from DID in highly hypnotizable patients.

Address for reprints: John D. Boyd, PhD, 1023 Millmont Street, Charlottesville, VA 22903, USA.

Schafer DW. Hypnosis and the treatment of ulcerative colitis and Crohn's disease. pp. 111–117.

It is hypothesized that all autoimmune diseases – specifically Crohn's disease and ulcerative colitis – are characterized by a high normal amount of aggressive instinctual drives and ambivalence about their realization. Specific autoimmune responses are regarded as reflecting the somaticization of these personality characteristics. It is argued that hypnosis is useful in the treatment of these conditions, being helpful for gaining insight, reinforcing interpretations, handling stress, visualization, and autoimmune control.

Address for reprints: Donald W. Schafer, MD, 50 Emerald Bay, Laguna Beach, CA 92651, USA.

Phillips M. Spinning straw into gold: Utilization of transferential resources to strengthen the hypnotic relationship. pp. 118–129.

This paper examines the therapeutic utilization of various transference reactions to strengthen the interpersonal relationship between therapist and patient. Idealizations, fear actions, exaggerated dependency needs, and wishes for a magical cure are explored, with case examples being provided to demonstrate specific techniques that can be used with or without formal hypnosis.

Address for reprints: Maggie Phillips, PhD, 4171 Piedmont Avenue, Suite 205, Oakland, CA 94611, USA.

Maurer Sr RL, Kumar VK, Woodside L, Pekala RJ. Phenomenological experience in response to monotonous drumming and hypnotizability. pp. 130–145.

A total of 206 participants experienced 15 minutes of monotonous drumming either before or after hypnosis (Harvard scale), and then completed the Phenomenology of Consciousness Inventory (PCI) with reference to the last four minutes of drumming. Subjective trance level as measured by hypnoidal scores (predicted Harvard scores from the PCI) was significantly higher when drumming preceded hypnosis. Participants' estimated trance levels achieved during drumming fell in the medium range of susceptibility (5–8). Using a subjective narrative method, participants who achieved higher hypnoidal and Harvard scores were more likely to report relaxed feelings and shamanic-type experiences during drumming.

Address for reprints: V.K. Kumar, PhD, Department of Psychology, West Chester University, West Chester, PA 19383, USA.

Bayot A, Capafons A, Cardeña E. Emotional self-regulation therapy: A new and efficacious treatment for smoking. pp. 146–156.

We describe emotional self-regulation therapy, a recently-developed suggestion technique for the treatment of smoking, and present data attesting to its efficacy. Of the 38 subjects who completed treatment, 82% stopped smoking altogether and 13% reduced their smoking. Of those who had completed treatment, 66% remained abstinent and reported minimal withdrawal symptoms or weight gain. Only 8% of a no-treatment control group reduced their smoking or remained abstinent.

Address for reprints: Etzel Cardeña, PhD, Department of Psychiatry, USUHS, 4301

Jones Bridge Rd., Bethesda, MD 20814, USA. E-mail: ecardena@mx3.usuhs.mil or Agust'n Bayot, PhD, Department de Personalitat, Facultat de Psicologia, Universitat de València, Avenida Blasco Ibñez, 21, 46010-Valencia, SPAIN. E-mail: bayot@correo.cop.es

Book Reviews

- Zeig JK. (Ed.) (1997). *The Evolution of Psychotherapy: The Third Conference*. New York: Brunner/Mazel. Reviewed by Peter M. Barach.
- Wegner DM, Pennebaker JW. (Eds) (1993). *The Handbook of Mental Control*. Englewood Cliffs, NJ: Prentice Hall. Reviewed by Marianne Barabasz.
- Barker P. (1996). *Psychotherapeutic Metaphors: A Guide to Theory and Practice*. New York: Brunner/Mazel. Reviewed by Akira Otani.

AMERICAN JOURNAL OF CLINICAL HYPNOSIS, 40(3), JANUARY 1998

This is a special issue in honour of Kenneth S. Bowers and includes a brief biographical sketch of his life by his wife Patricia Bowers.

Articles

Kihlstrom JF. Attribution, awareness, and dissociation: In memorium Kenneth S. Bowers, 1937–1996. pp. 194–205.

Research by Kenneth S. Bowers on posthypnotic suggestion, positive hallucinations, hypnotic analgesia, and posthypnotic amnesia is reviewed, along with his non-hypnotic research on the person-by-situation interaction and on intuition in problem solving. Bowers's intellectual style, serious curiosity, is offered as a model for hypnosis research. (Original abstract).

Address for reprints: John F. Kihlstrom, PhD, Department of Psychology, MC 1650, University of California, Berkeley, Tolman Hall, 3210, Berkeley, CA 94720-1650. E-mail: kihlstrm@cogsci.berkeley.edu

Woody EZ, Farvolden P. Dissociation in hypnosis and frontal executive function. pp. 206–216.

K.S. Bowers' distinction between dissociated experience and dissociated control theories of hypnosis is described. The two views are contrasted and a discussion of how dissociated control theory can be integrated with current conceptions of frontal executive function is presented. This elaboration is then used to outline a provisional understanding of memory function associated with hypnosis and hypnotic suggestibility, with particular emphasis on suggested effects.

Address for reprints: Erik Woody, PhD, University of Waterloo, Faculty of Arts, Department of Psychology, Waterloo, Ontario, Canada N2L 3G1.

Dywan, J. Toward a neuropsychophysiological model of hypnotic memory effects. pp. 217–230.

Evidence suggesting that hypnosis increases confabulation in the context of eyewitness memory has been interpreted as being due to the effect of hypnosis on response criteria; on the basis of experiential data, however, Dywan and Bowers developed an

alternative hypothesis: the 'illusion of familiarity'. Research investigating the factors involved in the fallibility of recollection is consistent with the view that the experience of remembering can be altered in ways far more complex than can be captured by a simple report criterion perspective, supporting Bowers' and Dywan's position.

Address for reprints: Jane Dywan, Psychology Department, Brock University, St Catharines, Ontario, Canada L2S 3A1. E-mail: jdywan@spartan.ac.brocku.ca

Spiegel D. Hypnosis and implicit memory: Automatic processing of explicit content. pp. 231–240.

This paper is an attempt to build upon Bowers' work on dissociated control in hypnosis to better understand hypnotic amnesia and hypermnnesia. In particular, the question is raised as to whether it is illuminating to reconceptualize hypnosis in light of what is known about implicit memory.

Address for reprints: David Spiegel, MD, Department of Psychiatry and Behavioral Sciences, Stanford University School of Medicine, Stanford CA 94305-5718, USA.

Council JR, Frischholz EJ. Kenneth S. Bowers, interactionism and hypnosis. pp. 241–246.

This paper focuses on his major contribution to personality theory, Situationism in Psychology: An analysis and critique, published in 1973 in the *Psychological Review*.

Address for reprints: James R. Council, PhD, Department of Psychology, 115 Minard, North Dakota State University, Fargo, ND 58105-5075, USA. E-mail: council@badlands.nodak.edu

Book Reviews

McConkey KM, Sheehan PW. (1995). *Hypnosis, Memory, and Behaviour in Criminal Investigation*. New York: Guilford. Reviewed by Alan W. Schefflin.

Freyd JJ. (1996). *Betrayal Trauma: The Logic of Forgetting Child Abuse*. Cambridge: Harvard University Press. Reviewed by David Spiegel.

Lewis DO, Putnam FW. (Ed.) (1996). *Child and Adolescent Clinics of North America. Dissociative Identity/Multiple Personality Disorder*. Philadelphia, PA: WB Saunders. Reviewed by Joyanna L. Silberg.

Harré R, Gillett G. (1994). *The Discursive Mind*. London: Sage. Reviewed by Theodore R. Sarbin.

AUSTRALIAN JOURNAL OF CLINICAL AND EXPERIMENTAL HYPNOSIS, 25(2), NOVEMBER 1997

Articles

Dyer G, Hawkins R. Hypnosis: The elusive rapprochement between theory and practice. pp. 95–107.

Argues that our current theoretical understandings of hypnosis are not developed well enough to offer sufficiently clear guidelines about clinical practice. Despite data showing the clinical efficacy of hypnosis, our capacity to explain what hypnosis is or why it works remains unsatisfactory.

Address for reprints: Russell Hawkins, School of Psychology, University of South Australia, Lorne Avenue, Magill, SA 5072, Australia.

Oakley D, Alden P, Degun Mather M. The use of hypnosis in therapy with adults. pp. 108–117.

Provides an overview of the range of applications for hypnosis in the provision of therapeutic regimes for adults. The paper also discusses the nature of hypnosis and its effectiveness in the light of hypnotic suggestibility. Although written for readers not necessarily well-versed in hypnosis theory and practice, the paper offers a potentially useful overview of hypnosis and its utility in the treatment of adults.

Address for reprints: Dr David Oakley, Director, Hypnosis Unit, Department of Psychology, University College London, Gower Street, London, WC1E 6BT, UK.

Hart C, Hart BB. The use of hypnosis with children and adolescents. pp. 118–126.

This paper discusses the many applications of hypnosis with children and adolescents. The authors review the relationships between age, imaginative involvement and hypnosis, then discuss general principles in the application of hypnosis with children and adolescents. An introduction to induction techniques and the range of hypnoanalytic processes which may follow is provided, followed by a case history.

Address for reprints: Drs Chrissi and Barry Hart, Queensway Business Centre, Dunlop Way, Scunthorpe DN16 3RN, UK.

Gravitz MA. Forensic hypnosis with children. pp. 127–134.

The paucity of reports documenting the use of hypnosis with children as an investigative technique for the retrieval of memories of child victims and witnesses is noted. Three investigative cases in which forensic hypnosis was instrumental in aiding their solution are described. A discussion of the unique factors to be considered when working with children is provided, and guidelines are offered for effective practical use.

Address for reprints: Melvin A. Gravitz, Psychiatry and Behavioural Sciences, George Washington University Medical Center, 1325 18th Street NW, Washington, DC 20036-6511, USA.

Campbell A. Hypnotic control of epileptic seizures. pp. 135–146.

The paucity of published material on the use of hypnotic procedures in the treatment of epilepsy is noted, despite clear evidence that psychological and social factors are important in the initiation and inhibition of seizures. A clinical case describing the use of hypnosis in the control of epilepsy is provided, followed by a review of the research in this area. It is argued that the area is worthy of further study.

Address for reprints: Alistair Campbell, Senior Clinical Psychologist, Oakrise Child and Adolescent Mental Health Services, 3 Kelham Street, Launceston, Tasmania 7520, Australia.

Lipsett L. Hypnosis in preparation for postgraduate examinations. pp. 147–154.

This case report illustrates the use of hypnosis in the preparation of a candidate for a postgraduate medical examination. (Original abstract.)

Address for reprints: Lachlan Lipsett, Clover House, 67 Hunter Street, Lismore, NSW 2480, Australia.

Farnill D, Gordon J, Sansom D. The role of effective feedback in clinical supervision. pp. 155–161.

The importance of constructive feedback in clinical supervision to enhance the acquisition of professional knowledge and skills and the development of valid self-evaluation

is emphasised. This paper summarizes reasons why feedback is not always provided optimally, and discusses the key components of effective and constructive feedback. A four-stage sequence which can be used to structure feedback is described.

Address for reprints: Douglas Farnill, Behavioural Sciences in Medicine, Blackburn Building D06 University of Sydney, NSW 2006, Australia.

Case notes

Wicks G. A case of persistent cough successfully treated using hypnosis and ego state therapy.

Describes a case of a 12-year-old boy with a persistent cough of no apparent organic origin successfully treated after two sessions of therapy using hypnosis.

Address for correspondence: Graham Wicks, Department of Paediatric Medicine, Women's and Children's Hospital, Adelaide, South Australia 5006, Australia.

Book reviews

Rossi EL. (1996). *The Symptom Path to Enlightenment: The New Dynamics of Self-organisation in Hypnotherapy: An Advanced Manual for Beginners*. Pacific Palisades, CA: Palisades Gateway Publishing. Reviewed by Robert R. Brueschke.

Winnington GP. (Ed.) (1994). *NLP World: The Intercultural Journal on the Theory and Practice of Neuro-linguistic Programming*. Vol. 1 no. 3. Switzerland. Reviewed by Les Langmead.

Edgette JH, Edgette JS. (1995) *The Handbook of Hypnotic Phenomena in Psychotherapy*. New York: Brunner/Mazel. Reviewed by Vicky Powlett.

Spira JL. (Ed.) (1996). *Treating Dissociative Identity Disorders*. San Francisco: Jossey-Bass. Reviewed by John Redman.

Morghen D. (1996). *The Principles of Hypnotherapy*. West Yorkshire: Eildon Press. Reviewed by Les Langmead.

Schumaker JF. (1995). *The Corruption of Reality: A Unified Theory of Religion, Hypnosis and Psychopathology*. Amherst, NY: Prometheus Books. Reviewed by Alistair Campbell.

HYPNOS, 24(3), SEPTEMBER 1997

Articles

Casula C. A guided imagery: The seven rooms. pp. 116–121.

A guided imagery technique that can be utilized to enhance the will and energy of the patient is presented. The technique involves imagining a journey through different rooms, in each of which the patient finds something useful for their problem. During or at the end of the imagery the therapist and patient utilise what has been discovered. The imagery is powerful in giving the permission to transform the dream in plan and action.

Address for correspondence: Dr Consuelo Casula (AMISI), Via Ariberto 3, 20123, Milano, Italy. E-mail: casula@planet.it

LePage KE, Schafer DW. Additional studies in unilateral lacrimation. pp. 122–128.

Presents a clinical approach to the condition of Unilateral Lacrimation, detailing the emotional, organic and mixed types of pathologies plus the hypnotherapeutic approaches to each of the four cases presented. The neuroanatomy and neurophysiology of the condition is reviewed and an understanding of the psychosomatic aspects

presented. It is argued that, in the absence of injury, the condition is almost always psychosomatic and is especially appropriate for investigation and treatment with regressive hypnosis.

Address for correspondence: Donald W. Schafer, MD, Clinical Professor, Department of Psychiatry and human behaviour, University of California, Irvine College of Medicine, 50 Emerald Bay, Laguna Beach, CA 92651, USA or Dr Keith E. LePage, Private Practice, Nurses Memorial Centre, 1st floor, 18 Dequetteville Terrace, Kent Town, SA 5067 Australia.

Walchek A. Practicing dentistry hypnotically – The art of mental flossing. pp. 129–136. Describes the utilization of multiple trance states to create a hypnotic setting for the range of clinical dental practice, including patient education and behavioural change. Its goal is to provide the dentist with the verbal skills to (1) build positive expectancy; (2) create a 'corrective emotional experience' to reverse bias relating to dental treatment; (3) help the patient change maladaptive habits; (4) reframe the dental experience to overcome resistance and self-neglect; and (5) enhance patient management and reduce stress for the dentist.

Address for correspondence: Alexander Walchek, DDS, PhD, 6070 Mazuela Drive, Oakland, CA 94611-2208, USA. E-mail: fixate@earthlink.net

Linden JH. On the art of hypnotherapy with women: Journeys to the birthplace of belief and other recipes for life. pp. 138–147.

Presents the use of hypnotic principles and techniques at a variety of developmental stages which can be integrated into the psychotherapy of women in the context of cultural differences. Case material is presented and the timing and nature of the hypnotic interventions described.

Address for correspondence: Julie H. Linden, PhD, 227 East Gowen Avenue, Philadelphia, PA 19119, USA.

Olsson H. Application of new hypnotherapeutic techniques to conversion disorder. A case report. pp. 148–155.

Clenched fist syndrome is a conversion disorder involving a tightly clenched fist and often a flexed elbow. This article describes a case where new hypnotherapeutic techniques such as mental training, neuro-linguistic programming and Ericksonian hypnotherapy are applied together with cognitive methods. After five months the symptoms were resolved, and both the patient and a psychiatrist noticed personality development with strengthened self-confidence.

Address for correspondence: Hans Olsson, MSc, Orthopedic Clinic, Central Hospital, SE-251 87 Helsingborg, Sweden.

Gravitz MA. Memory reconstruction by hypnosis as a therapeutic technique. pp. 156–162.

A treatment method is described and illustrated with three cases in which previous memories of traumatic experiences were retrieved and restructured during hypnotic regression and revivification. During hypnosis, suggestions aimed at modifying the patients' recollection of prior traumatic events are presented, in order to change their meaning and impact for the subject. Follow-up inquiries indicated that the alterations and improvements of the presenting problems were maintained. Caution is noted regarding the responsible application of the technique, and its differentiation from inappropriate hypnosis use. (Originally published in *Psychotherapy*, 31(4), 1994)

Address for correspondence: Melvin A. Gravitz, PhD, Clinical Professor of Psychiatry and Behavioural Sciences, George Washington University Medical Center, 1325 Eighteenth Street, NW, Washington DC 20036-6511, USA.

Case notes

Barnes G. A coincidental 13-year follow-up of an experimental demonstration. pp. 163–164.

Describes a case of memory improvement using hypnosis, confirmed by a meeting between hypnotist and subject 13 years later.

Address for correspondence: Graham Barnes, MA, STB, lic psych therapist, Råsundavägen 152, SE-169 36 Solna, Sweden.

Walker W-L. Hay fever in hypnosis: A caution. p. 165.

Describes how a violent attack of hay fever, the first in many years, was triggered in a patient undergoing an imagined walk in the countryside during hypnosis, underlining the care required when planning the content of therapy sessions.

Address for correspondence: Wendy-Lousie Walker, PhD, 14 Hammond Avenue, Croydon, NSW 2132, Australia.

HYPNOS, 24(4), DECEMBER 1997

Articles

Torem MS, Ranjan R, Gilbertson AD. Multiple personality disorder without history of childhood trauma. pp. 173–180.

Childhood trauma has been regarded as an important etiological factor in the development of multiple personality disorder (MPD). This paper presents data that question whether having a history of trauma is necessary for the diagnosis of MPD, and examines current etiological, theoretical models of the disorder.

Address for correspondence: Moshe S. Torem, Northeastern Ohio Universities, College of Medicine, Department of Psychiatry, 400 Wabash Avenue, Akron, Ohio 44307-2463, USA.

Kessler R. The consequences of individual differences in preparation for surgery and invasive medical procedures. pp. 181–192.

Argues that critical attention is often not paid to why hypnosis is used in clinical work, and what patient data – particularly individual difference data – is important in determining patients responses to hypnosis. Based on a review of the field of hypnotic and psychological preparation for surgery, a position is presented arguing that individual differences in predominant coping style and history of negative prior medical/surgical events (1) have predictable consequences that interact with preparation strategy, and (2) such consequences provide the data to tailor interventions to optimize patient response, and thus affect surgical outcomes.

Address for correspondence: Rodger Kessler, PhD, Department of Anesthesiology and Surgery, Central Vermont Hospital, Montpelier, Vermont 05602, USA.

Enqvist B. Pre-surgical hypnosis and suggestions in anesthesia. pp. 193–194.

Presurgical hypnosis by means of audiotape was used before different kinds of

surgery. Therapeutic suggestions during general anaesthesia were also combined with presurgical hypnosis or used separately. Beneficial effects from presurgical hypnosis were found. Blood loss during surgery, swelling, fever, the consumption of analgesics and anxiolytics, vomiting and nausea were some of the factors which were significantly reduced compared to the control groups. (Original abstract.)

Address for correspondence: Björn Enqvist, Pålsundsgatan 1 A, SE-117 31, Stockholm, Sweden.

Douglas DP. Patient and close person – relationship and hypnosis in pain management. pp. 196–199.

Presents a simple method for pain management with hypnosis, involving the use of a friend or relative as a co-worker. The powerful relationship that typically forms spontaneously greatly enhances induction and utilization processes, and in turn is often enhanced itself. Autohypnosis is strengthened and mutual participation diminishes misunderstanding and resistance. The transition into self-care is aided by on-going follow-up with one or more involved and knowledgeable close persons.

Address for correspondence: Donald P. Douglas, MD, 133 East 73rd Street, New York, NY 10021, USA.

Barnes G. The case of Jane. pp. 200–205.

This is a story about Jane. She was one of the most interesting and seriously disturbed patients with whom I have been able to work. My purpose in presenting this case as a study of diagnostic observations is to reflect on how our work with our patients may become a context for turning points in how knowing and understanding may be done in psychotherapy. (Original abstract.)

Address for correspondence: Graham Barnes, MA, STB, lic psych therapist, Råsundavägen 152, SE-169 36 Solna, Sweden. E-mail: graham.barnes@inform.se

Hartman W. Ericksonian Utilization: The use of guiding ego state associations. pp. 206–212.

In this paper, the concept of utilization is defined and presented within the context of Ego State therapy. How techniques of utilization (symptom words, figures of speech and sequences) can be used in guiding the associational processes of ego states is described. A case study is presented showing how this utilization may be used as a positive resource for creating and strengthening therapeutic alliances as well as for successful and rapid change within the patient.

Address for correspondence: Woltemade Hartman, PhD, PO Box 38270 Faerie Glen, 0043 Pretoria, South Africa.

Wenzel T, Semler B, Stompe T, Meszaros K. Trance in a transcultural context. pp. 213–218.

Argues that setting an artificial border between trance inductions in ‘civilized’ and ‘primitive’ cultures is not justified. A transcultural comparison based on a comprehensive understanding of the development of research in cultural anthropology yields a number of ways to induce a multitude of trance states with different contents, function and evaluation by the community, arguing against a ‘one state of trance’ approach.

Address for correspondence: Dr Thomas Wenzel, University Hospital, Department of Psychiatry, Waehringer Guertel 18-20, AT-1090 Vienna, Austria. E-mail: 100410.2766@compuserve.com

Case notes

Thakur KS. Ideomotor activities – New Therapeutic uses in eating disorders. pp. 219–221.

Describes three cases where modified ideomotor activities were successfully used to treat resistant cases of eating disorders (obesity, anorexia nervosa and bulimia nervosa).

Address for correspondence: Thakur Kripa S. MBBS, 222 Ave P South, Saskatoon, SK S7M 2W2, Canada.

INTERNATIONAL JOURNAL OF CLINICAL AND EXPERIMENTAL HYPNOSIS, 45(3), JULY 1997

Special issue: The Niagara-on-the-lake hypnosis conference, August, 1996. In memory of Kenneth S. Bowers, PhD (1937–1996).

Articles

Council JR. Context and consistency: The Canadian connection. pp. 204–211.

Issues related to context effects in hypnosis research are briefly reviewed. The contributions of Canadian hypnosis researchers, notably K.S. Bowers and Nick Spanos, to context effect research and theory are acknowledged. The implications of findings on Bowers's notion of consistency motivation for hypnosis research are then discussed in terms of person-by-situation interactions.

Address for reprints: James R. Council, PhD, Department of Psychology, 115 Minard, North Dakota State University, Fargo, ND 58105-5075. E-mail: council@badlands.nodak.edu

Kirsch I. Suggestibility or hypnosis: What do our scales really measure? pp. 212–225.

The difference between conceptual and practical approaches to hypnotizability are described, with current data indicating that these are different constructs. Kirsch argues that hypnotic susceptibility scales are better measures of waking suggestibility than they are of hypnotizability. It is argued that the discordance between conceptual and operational definitions of hypnotizability can be resolved either by changing the conceptual definitions of hypnosis and hypnotizability or by reinterpreting hypnotizability scores as indexes of non-hypnotic, imaginative suggestibility.

Address for reprints: Irving Kirsch, PhD, Department of Psychology, U-20, University of Connecticut, 406 Babbidge Road, Storrs, CT 06269-1020, USA.

Woody EZ. Have the hypnotic susceptibility scales outlived their usefulness? pp. 226–238.

The validity of selecting high and low scoring subjects on the basis of scores on hypnotic susceptibility scales for hypnosis experiments is questioned with a number of possible critiques. For example, it is suggested that sociocognitive theorists are better advised to manipulate the variables they believe are of importance, while dissociative theorists should question whether the scales used muddle distinctions in underlying mechanisms. Parallels are drawn with developments in other areas of research, such as intelligence.

Address for reprints: Erik Woody, PhD, University of Waterloo, Faculty of Arts, Department of Psychology, Waterloo, Ontario, Canada N2L 3G1.

Lynn SJ. Automaticity and hypnosis: A sociocognitive account. pp. 239–250.

Lynn presents a new theory of suggested involuntariness in hypnosis based on the following ideas: (1) high susceptibles enter hypnosis with a conscious intention to experience and behave in line with suggestions; (2) high susceptibles firmly expect to be successful responders; (3) these intentions and expectations function as response sets in that they trigger the hypnotic response automatically; and (4) subjects do not hesitate to experience the effects as involuntary because (a) they are triggered automatically and (b) their intentions and expectations create a readiness to do so.

Address for reprints: Steven Jay Lynn, PhD, Psychology Department, State University of New York at Binghamton, Binghamton, NY 13902-6000, USA.

Chaves JF. The state of the ‘state’ debate in hypnosis: A view from the cognitive-behavioural perspective. pp. 251–265.

It is argued that many of the pivotal concepts in the debate over whether hypnosis is an altered state of consciousness were ambiguous at the outset and led to misconceptions that have obscured the debate throughout its history. With the maturation of the cognitive-behavioural perspective and the growing refinement of state conceptions of hypnosis, questions arise whether the state debate is still the axis about which hypnosis research and theory pivots, despite the previous heuristic value of the debate.

Address for reprints: John F. Chaves, PhD, Division of Behavioural Medicine and Bioethics, Department of Oral Biology, Indiana University School of Dentistry, 1121 West Michigan Street, Indianapolis, IN 46202-5186, USA.

Perry C. Admissibility and *per se* exclusion of hypnotically elicited recall in American courts of law. pp. 266–279.

In recent years, there have been moves to rescind the *per se* exclusion of hypnotically elicited testimony in law courts; this raises a question of the probative value of such additional information when it is uncorroborated. This situation is compared with that of the polygraph as an index of deception. Some legal distinctions in Wisconsin are used to illustrate one alternative to the *per se* exclusion approach. Admissibility of scientific evidence has been based on a criterion of ‘general acceptability within the relevant scientific community’, though the US Supreme Court recently overturned this decision by making general acceptability only one of several criteria. Three decisions based on this change, one involving hypnosis and all concerned with ‘recovered repressed memories’, indicate some problems however.

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Laurence J-R. Hypnotic theorizing: Spring-cleaning is long overdue. pp. 280–290.

In this paper the author argues that previous clinical and experimentally based theories of hypnosis have been one-sided, and led to a stalemate where most experiments can be interpreted from any point of view. It is argued that the practice of performing truncated experiments dedicated to the glory of one’s preferred theory must be relegated to the past. Moreover, it is suggested that the use of concepts or constructs that cannot be clearly operationalized should also be dismissed to avoid the problems faced by the field of hypnosis in previous decades.

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Nash MR. Why scientific hypnosis needs psychoanalysis (or something like it). pp. 291–300.

The author contends that some contemporary hypnosis theories are too narrow in scope and isolated from mainstream models of psychology, thereby rendering them unable to explain any more than hypnosis itself. This approach is contrasted with psychoanalysis which, it is suggested, lends itself to hypothesis testing based on a general theory of human behaviour and experience. For illustrative purposes, the sociocognitive approach to hypnosis is criticized for being too narrowly inductive in focus, and having problems with reification. Remedies for these difficulties are suggested.

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Ray WJ. EEG concomitants of hypnotic susceptibility. pp. 301–313.

Given the stable electrocortical differences found in low and high susceptible individuals, the question arises as to whether we can use additional EEG measures to help understand the nature of these differences. One possible alternative is the pointwise or fractal dimension, which we examined during baseline conditions with high or low susceptible individuals. The dimensionality measures suggest that high susceptibles display underlying brain patterns associated with imagery, whereas low susceptibles show patterns consistent with cognitive activity (e.g. mental maths), suggesting a similar speculation to that of Tellegen, who makes a distinction between imaginative and realistic responding.

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Nadon R. What this field needs is a good nomological network. pp. 314–323.

It is argued that hypnosis research lacks a coherent structure or nomological network that stems from fundamental disagreements concerning the construct validity of hypnotizability, which in turn stem from different research practices across laboratories. It is for these reasons, Nadon suggests, that the field has had less impact on psychology and medicine than is warranted.

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Kihlstrom JF. Convergence in understanding hypnosis? Perhaps, but perhaps not quite so fast. pp. 324–332.

It is argued that, despite recent attempts to search for convergence in different theoretical accounts of hypnosis, two highly salient issues remain contentious: the question of whether hypnosis involves alterations in consciousness, and the nature and correlates of individual differences in hypnotic response. Although convergence is a laudable goal, it should not be done at the expense of obscuring the complexity of hypnosis as an altered state, a cognitive skill, and a social interaction.

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Book reviews

- Burrows GD, Stanley R. (Eds) (1995). *Contemporary International Hypnosis: Proceedings of XIIIth International Congress of Hypnosis*, Melbourne, Australia, 6–12 August 1994. Chichester, England: Wiley. Reviewed by James R. Council.
- Bölcs E, Guttman G, Martin M, Mende M, Kanitschar H, Walter H. (Eds) (1995). *Hypnosis Connecting Disciplines: Proceedings of the 6th European Congress of Hypnosis in Psychotherapy and Psychosomatic Medicine*, Vienna, 14–20 August 1993. Vienna, Austria: Medizinisch-Pharmazeutische Verlagsgesellschaft m.b.h. Reviewed by James R. Council.
- Edgette JH, Edgette JS. (1995). *The Handbook of Hypnotic Phenomena in Psychotherapy*. New York: Brunner/Mazel. Reviewed by Joan Murray-Jobsis.

INTERNATIONAL JOURNAL OF CLINICAL AND EXPERIMENTAL HYPNOSIS, 45(4), OCTOBER 1997

Special issue: Hypnosis in the relief of pain: Part I. Also includes an author index of the last 45 years' International Journal.

Articles

Chaves JF, Dworkin SF. Hypnotic control of pain: Historical Perspectives and future prospects. pp. 356–376.

This article outlines the history of hypnotic analgesia in experimental and clinical hypnosis, dating back to its emergence early in the nineteenth century, and charts a record of struggle for its acceptance which was only won when the debate became almost entirely localized within the professional community. Since the mid-twentieth century, scientific information about hypnotic analgesia has grown substantially and has had significant influence on strategies for acute and chronic pain management. If recent calls for its wider application in pain management are to succeed, it will require additional data from clinical populations and a balanced and scientifically prudent approach by its advocates.

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Patterson DR, Adcock RJ, Bombardier CH. Factors predicting hypnotic analgesia in clinical burn pain. pp. 377–395.

Controlled studies provide support for the use of hypnosis in the treatment of pain from severe burn injuries. The mechanisms behind hypnotic analgesia for burn pain are poorly understood with this patient population, as they are with pain in general, although it is likely that burns victims are more receptive to hypnosis than the general population. This article postulates some variables that may account for this enhanced receptivity, including motivation, hypnotizability, dissociation, and regression.

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Tan S-Y, Leucht CA. Cognitive-behavioural therapy for clinical pain control: A 15-year update and its relationship to hypnosis. pp. 396–416.

The evidence for the efficacy of cognitive and cognitive-behavioural methods of pain control is briefly reviewed. In particular, cognitive-behavioural therapy (CBT) for chronic pain was recently listed as one of 25 empirically validated or supported

psychological treatments available for various disorders. A number of emerging issues are further discussed in light of recent developments and research findings. The relationship of CBT to hypnosis for pain control is briefly addressed, with suggestions for integrating hypnotic and cognitive-behavioural techniques.

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Dinges DF, Whitehouse WG, Orne EC, Bloom PB, Carlin MM, Bauer NK, Gillen KA, Shapiro BS, Ohene-Frempong K, Dampier C, Orne MT. Self-hypnosis training as an adjunctive treatment in the management of pain associated with sickle-cell disease. pp. 417–432.

A cohort of patients with sickle cell disease, consisting of children, adolescents, and adults, who reported experiencing three or more episodes of vaso-occlusive pain during the preceding years, were enrolled in a prospective two-period treatment protocol. Following a four-month conventional treatment baseline phase, a supplemental cognitive-behavioural pain management programme that centred on self-hypnosis was implemented over the next 18 months. Results indicate that the self-hypnosis intervention was associated with a significant reduction in pain days, the proportion of 'bad sleep' nights and the use of pain medication. However, findings suggest that overall pain reduction was due to the elimination of less severe episodes of pain. Nevertheless, this research demonstrates that the treatment programme can be beneficial in reducing unpredictable, recurrent episodes of pain, in a population for whom few safe, cost-effective medical alternatives exist.

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Farthing WG, Venturino M, Brown SW, Lazar JD. Internal and external distraction in the control of cold-pressor pain as a function of hypnotic susceptibility. pp. 433–446.

The effectiveness of different pain-distraction tasks was compared as a function of level of hypnotizability, using the cold-pressor pain-testing procedure. Selected high, medium, or low hypnotizable participants underwent a one-minute baseline hand immersion, with periodic pain ratings. Independent groups were then given four-minute test immersions under one of five distractor conditions: (1) analgesia suggestion (internal distractor); (2) guided imagery (internal); (3) word memory (external); (4) pursuit-rotor (external); and (5) placebo (let mind wander). All four treatments significantly reduced pain only for highly hypnotizable subjects, compared to the control group. Anxiety state ratings indicate that findings could not be explained in terms of anxiety. It is concluded that high hypnotizables are more effective than lows at diverting attention to pain, regardless of task used.

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Book reviews

Hilgard ER, Hilgard JR. (1994). *Hypnosis in the Relief of Pain* (Rev. ed.). New York: Brunner/Mazel. Reviewed by Amanda J Barnier.

Tinterow, M. M. (1989). *Hypnosis, Acupuncture and Pain: Alternative Methods of Treatment*. Kansas: Bio-Communications Press. Reviewed by Basil Finer.

- Loftus E, Ketcham K. (1994). *The Myth of Repressed Memory: False Memories and Allegations of Sexual Abuse*. New York: St Martin's Press. Reviewed by George K. Ganaway.
- Evans BJ, Stanley RO. (Eds) (1994). *Hypnosis and the Law: Principles and Practice*. Australian Society of Hypnosis. Reviewed by Eilis S. Magner.

INTERNATIONAL JOURNAL OF CLINICAL AND EXPERIMENTAL HYPNOSIS, 46(1), JANUARY 1998

Articles

Chapman CR, Nakamura Y. Hypnotic analgesia: A constructivist framework. pp. 6–27.

Emerging research and theory on the mechanisms of consciousness suggest that a constructivist framework may facilitate both pain research and the study of hypnosis. It is proposed that the brain constructs elements of pain experience and embeds them in ongoing consciousness. The contents of immediate consciousness feed back to non-conscious parallel processes to help shape the character of future moments of consciousness. Hypnotic suggestion may interact with such processing through feedback mechanisms that prime associations and memories and thus shape the formation of future experience.

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Barber J. The mysterious persistence of hypnotic analgesia. pp. 28–43.

Hilgard's neodissociation theory accounts for acute hypnotic analgesia, but not persistent pain relief. The effect of hypnotic treatment might be explained in two ways: a neurophysiological model or a learning model. Clinical experience suggests a two-component model: (1) the clinician communicates ideas that strengthen the patient's ability to derive therapeutic support and to develop a sense of openness; (2) the clinician employs post-hypnotic suggestions which ameliorate the pain experience, and which, in small, repetitive increments, tend to maintain persistent pain relief over increasing periods of time.

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Weisenberg M. Cognitive aspect of pain and pain control. pp. 44–61.

This article review some of the origins of cognitive theory and pain theory, as well as examples of cognitive-behavioural pain relief techniques used and the research support for the approach. Special emphasis is given to self-efficacy, perceived control, and stress inoculation therapy. There is also a discussion of some of the limitations of the cognitive approach. The overall conclusion is that the cognitive approach is a powerful and effective one for pain control despite its limitations.

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Alden P, Heap M. Hypnotic pain control: Some theoretical and practical issues. pp. 62–76.

In the context of pain management, hypnosis may be best conceived as a set of skills

to be deployed by the individual rather than as a state. It is argued that such an emphasis is more compatible with those pain management practitioners who have been cautious in acknowledging the value of hypnosis. The authors present a minimal and atheoretical definition of hypnosis and list the basic properties of hypnosis that may be used in the treatment of pain. Maintaining the notion of trance is acknowledged as promoting an effective outcome in some cases, but it is argued that in other instances relevant skills may be more effectively engaged at the expense of a trance notion by targeting the specific skills that are to be used for therapeutic benefit.

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Eastwood JD, Gaskovski P, Bowers KS. The folly of effort: Ironie effects in the mental control of pain. pp. 77–91.

During exposure to pain, subjects engaged in hypnotic analgesia or stress inoculation provided pain reports every 5s and 45s, respectively. It was found that the frequency of pain reporting had a significant effect on subjects' level of experienced pain, a finding with important methodological implications for the study of hypnotic analgesia. Preliminary evidence was obtained suggesting that high hypnotizables during hypnotic analgesia remained relatively undisrupted by pain reporting. The results are interpreted as contradicting theories of hypnotic analgesia which propose it is an intentional, effortful process and supporting the dissociated control theory of hypnosis.

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Crawford HJ, Knebel T, Kaplan L, Vendemia JMC, Xie M, Jamison S, Pribram KH. Hypnotic analgesia: 1. Somatosensory event-related potential changes to noxious stimuli and 2. Transfer learning to reduce chronic low back pain. pp. 92–132.

Fifteen moderately to highly hypnotizable adult subjects with chronic low back pain participated. All subjects showed significantly reduced pain perception following hypnotic analgesia during cold-pressor training. In Part 1, somatosensory event-related potential correlates of noxious electrical stimulation were evaluated during attend and hypnotic analgesia (HA) conditions at anterior frontal, mid-frontal, central and parietal regions. During HA, decreased spatiotemporal perception was evidenced by reduced amplitudes of P200 and P300 in certain regions. It is suggested that HA is an active process that requires inhibitory effort, dissociated from conscious awareness, involving the anterior frontal cortex. In Part 2, the development of self-efficacy through the transfer of new skills of pain reduction to the reduction of subjects own chronic pain is described. Reports of pain reduction, increased well-being and increased sleep-quality were found after three sessions. It is argued that hypnosis and other psychological interventions need to be introduced early as adjuncts in medical treatments for onset pain before the development of chronic pain.

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Spiegel H, Spiegel D. (1987). *Trance and Treatment: Clinical Uses of Hypnosis* (paper ed.). Washington, DC: American Psychiatric Press. Reviewed by Amanda J. Barnier.

- Barber J. (1996) *Hypnosis and Suggestion in the Treatment of Pain: A Clinical Guide*. New York: Norton. Reviewed by Samuel F. Dworkin.
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