

# Hypnosis: Software for the Mind

*A free ebooklet by*

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# Hypnosis: Software for the Mind

[Adapted and expanded from an article in the Journal of Alternative Therapies]

"You can conquer phobias, lower anxiety, banish panic, build confidence, control pain, and reduce stress with hypnosis" says Dr. Bryan Knight author and psychotherapist.

"It's not the hypnosis but the therapy that is done while you're hypnotized that helps you," adds Knight, who holds degrees in psychology, social work and counselling.

According to Dr. Knight, hypnotherapy is much faster than regular psychotherapy.

"The reason for this is that hypnosis links you directly with your subconscious. This is also why hypnosis is useful in the treatment of a long list of problems and challenges from stopping smoking to recovering from childhood sexual abuse."

(The subconscious is that part of your memory which is outside of conscious awareness).

Contrary to popular belief, says Knight, hypnosis is not something someone *does* to you.

It is a way of using your concentrated imagination to change your deeper mostly subconscious, thoughts. First you relax your body, and then you relax the conscious part of your mind and focus your imagination.

To do this, you of course have to remain **awake**.

**You** are in control.

Your cooperation with the hypnotherapist enables you to experience thoughts and images as though they were real.

"It's as though you are uploading fresh, positive, software to replace the outdated or defective software that's now messing up your life."

Because the subconscious cannot tell the difference between real and imagined experience the new "software" leads to changes in your behaviour and your conscious thoughts, adds Dr. Knight.

"So if you were terrified of speaking in public, for example, a few sessions of hypnotherapy could transform you into someone who loves to get up and give a speech to a crowd."

That's what happened to Dr. Knight.

As a young man he was a tenants' rights organizer and was often interviewed on radio and TV.

"I enjoyed organizing sit-ins and demonstrations but I dreaded the media interviews. My mouth would dry up, my palms dampen with sweat and my stomach churn in knots."

But since he began using hypnosis several years ago, Dr. Knight has taken every chance he can to speak in public.

He appears often on radio and television and frequently conducts workshops in Canada, England and the United States.

"For most people, being in hypnosis doesn't feel much different to how they usually feel. But most likely, you'll feel relaxed, probably more relaxed than ever before," says Dr. Knight.

He adds that you were born with a particular talent for hypnosis. Perhaps you are among the small percentage [estimated 3% - 10%] of people who have a terrific talent for hypnosis.

Or you may be among the small percentage [estimated 3%] of people who have little talent for hypnosis.

Most likely, you are among the majority of us who fit somewhere in between the two extremes.

The good news is that even a slight talent is sufficient for you to benefit from hypnotherapy.

Your skill can be enhanced with guidance by a hypnotherapist -- and with practice. [To find a competent therapist go to <http://hypnosis.org/kn-how.html> ]

You relax into hypnosis by means of an induction.

This may well include slow deep breathing and most probably, soothing words from the hypnotherapist.

Music, rhythmic sounds, gestures, visual props, even DVDs, can also lull you into hypnosis.

DVDs? Yes. Psychovisual Therapy hypnotic DVDs, which Dr. Knight distributes, enable you to drift into light hypnosis with your eyes open. Titles ranging from *Stress Control* to *Positivity* are available. [Details: <http://hypnosis.org/DVD.htm> ]

*Mind & Hypnosis* shows you how the mind works and what hypnotherapy is all about.

You can easily learn to hypnotize yourself by following the step-by-step instructions in Dr. Knight's ebook, "Self--Hypnosis: Safe, Simple, Superb."

<http://hypnosis.org/self.html>

The ebook is an expanded version of a chapter from Dr Knight's "Health and Happiness with Hypnosis." <http://hypnosis.org/kn-hhh.html>

"Read this book and you'll come away with a clearer understanding and respect for hypnosis, its uses and its benefits," says Dr. Eileen Alexander, a family physician and past-president of the Ontario Society of Clinical Hypnosis.

The book presents a myriad of examples of how hypnotherapy has helped people overcome problems or enhance their creativity.

These case histories illustrate the three main ways hypnosis is used as

a therapeutic tool:

- to uncover the cause of a problem (e.g., why you are swept with waves of rage),
- to deal with symptoms (e.g., to stop nail-biting, or to overcome insomnia), or
- to make your psychotherapy sessions easier and faster.

In a previous book, *Love, Sex & Hypnosis: Secrets of Psychotherapy*, Dr Knight explains the close connections between hypnosis and psychotherapy, historically and today.

[ More information: <http://hypnosis.org/kn-love.html> ]

"All successful psychotherapy has a hypnotic component," says Dr. Knight, who has nearly forty years' experience as a therapist.

He emphasizes the overriding importance of genuine caring for the client by the therapist. This caring has been called "*Psychotherapeutic Eros*."

"It's a kind of love that is similar to, yet very different from, the love in your other relationships -- as parent and child, pastor and penitent, teacher and pupil, or friend and friend," says Dr. Knight.

"The therapist is not emotionally involved in the client's life the way a parent or a friend is, nor ideologically involved the way a priest or minister is, but nevertheless 'loves' the client and thereby stimulates his or her own resources to get better."

"The love liberates the client to flower, but hypnosis is the process by which it actually happens."

Or, as he likes to say: "*Love makes change possible; hypnosis makes change real.*" [See <http://www.therapy-insights.com> for more about therapeutic love.]

When hypnosis is used mechanically, without this love from therapist to client, it may appear successful -- for a while.

"For more permanent effects, the client has to know you really care," says Dr. Knight.

Like the clients for whom he made personalized hypnosis audiocassettes when he was about to go into hospital: they were thus able to continue their therapy during the weeks Dr. Knight was unavailable.

Similarly for a fellow hypnotherapist who faced a serious operation, for whom Dr. Knight made a get-well-soon audiotape.

"When he told me how much the tape meant to him he had tears in his eyes," says Dr. Knight, himself obviously moved.

"My own healing was greatly enhanced by a similar audiocassette made for me by an American colleague, Dr. Maurice Kouguell.

"After my operation [a Canadian record of eight bypasses of artery blockages in a single operation] I was off pain-killers within two days and out of the hospital in four."

Now he produces a similar personalized hypnosis healing tape for anyone about to enter hospital for a critical operation.

[Click here <http://hypnosis.org/kn-audio.html> for details.]

Before the invention of chemical anesthesia, surgeons used to numb patients in thousands of operations with the forerunner of hypnosis (known as "animal magnetism").

Hypnosis under various names has been used in one form or another (e.g., the sleep temples of Ancient Egypt and Greece) for thousands of years.

There may even be mention of hypnosis in the Bible (Genesis 2:21, 1 Samuel 26:12, Job 4:13, 33:15, Acts 10:10), but its modern use dates from the Viennese doctor, Franz Anton Mesmer, in the late 1700s.

Mesmer built upon the folklore and wisdom of the past while not being afraid of experimentation and learning by doing.

Although the public's appreciation was vast, the medical establishment, because of its vested interests, was outraged.

Mesmer rarely used words. He relied on passing magnets around a distressed person, and later, on simply making passes with his hands.

His clients expected to experience relief from their problems by entering a convulsive state after which they would feel released and calmed.

It is not clear if Mesmer was acquainted with the medical antecedents to his work. He did acknowledge the spiritual root, which was the healing work of a Jesuit priest, Father Maximilian Hell.

In 1774 Mesmer for the first time witnessed animal magnetism when he watched the priest apply magnets to the bodies of persons suffering from various ailments.

An early medical influence may have been the fifteenth-century book by physician Thomas Fienus.

Dr Fienus understood that there are two ways a person's imagination can be fired up: from within himself, and through the influence of someone else.

When the imagination of a sick person is stirred by a doctor his illness can be cured because the patient's imagination combines with his belief in the curative powers of the physician.

The public in France, especially the upper classes, adored Mesmer. They accepted his claim that there was some kind of invisible force (which he subsequently referred to as a fluid, though it remained invisible) which travelled from the magnetizer to the person seeking a cure for whatever ailed her.

Most magnetizers were men and most patients were women.

Mesmer built on ancient Masonic concepts of illness being evidence within the individual of an imbalance of a universal fluid. The induction of convulsive attacks, or crises, created a healthy redistribution of the fluid.

Thus Mesmer believed the process was physiological but as invisible as electricity and magnetism -- subjects of great interest to scientists of that era.

His "scientific" explanation for the creation of healing convulsions, in contrast to the faith cures of contemporary exorcists, has earned Mesmer the credit for founding dynamic psychiatry.

At first Mesmer used to magnetize objects which his patients could then touch (or in the case of "magnetized" water drink, or pour over themselves).

Large gatherings were held in which people would all be connected by a rope to a magnetized tree, or share an 18th century version of a hot tub.

Later, Mesmer found that simple "passes" of his hands were sufficient to put patients into a trance. Whatever the means, patients usually went into convulsive hysterical motion following which they felt relieved and refreshed.

Once he had dispensed with actual magnets,

**"There was no talking during the treatment, so there were no direct verbal injunctions. However, these were implicit in the therapist's attitude.**

**The passes, the music, the setting; the atmosphere round the tub, ('baquet') were factors which were indirectly to increase the effect of suggestion, but also contributed in producing a kind of sensory deprivation which induced an alteration of the state of consciousness, gradually ending in the 'crisis.'**

**Mesmer's patients did not all have attacks. Some showed, rather, a sort of lethargy, while still being able to walk, talk, etc. In other words, they were hypnotized." (Chertok, 1981, p.91).**

This practice of "animal magnetism" was forever altered when the Marquis de Puysegur, a disciple of Mesmer, focused his attention on what happened to people in what we would call deep hypnosis and which he named magnetic somnambulism.

He observed that when someone was in this state his or her symptoms and behaviour could be influenced by what the "magnetizer" said.

According to French psychiatrist Leon Chertok, Puysegur developed the following principles, all of which have stood the test of time and still guide most therapists today:

- Convulsions were not necessary; words were sufficient,
- The magnetist had to *listen* to the person seeking relief,
- Often the client had to re-experience painful feelings,
- The sessions had to be of regular frequency and duration,
- The magnetist had to be neutral and patient, and
- Symptoms might return temporarily.

**"While he was in deep magnetic sleep, [the client] was asked to establish his own diagnosis . . . and the form of his treatment . . . He was also asked to predict the development of his treatment: when he would recover, when the attacks would occur, etc.**

**Thus was produced a kind of psychodrama in which the patient caused the magnetist to play a part in a series of successive catharses."**  
(Chertok, 1981, p.93).

The French Royal Commission of 1784 into animal magnetism dismissed the cures they observed by explaining them away as caused by the imaginations of the subjects.

*The Commission overlooked the same important facts as do many of today's critics of hypnotherapy.*

A modern doctor explains:

**"Unfortunately no report was made of the positive results of Mesmer's work or of the psychological implications of the illnesses and the results of his treatment. Unfortunately, too, the Commission also failed to comprehend that the cures were genuine enough even if there appeared to be no physical or organic origin to the illness." (Waxman, 1984, p.6).**

*If imagination can be that powerful surely it should be dignified, not disgraced.*

A century after the Royal Commission Sigmund Freud had helped to push hypnosis out of the limelight with his invention of psychoanalysis.

There is, however, an intimate connection between hypnosis and psychoanalysis:

- Hypnosis theory and practice anticipates much of psychoanalysis.
- Hypnotic procedures were used by the founder of psychoanalysis.
- And the practice of psychoanalysis induces hypnosis.

Freud sought to escape the hypnotism label for his work; he began to use free association with no apparent awareness of that technique's basic similarity -- with its couch, relaxation, closed eyes, occasional touch on the client's forehead -- to the formal hypnosis he had renounced.

Not that Freud underestimated the power of therapeutic hypnosis. He used it for years. He translated books written by the leading practitioners of his day (Charcot and Bernheim).

But Freud met with some discouragement, such as difficulty in hypnotizing many patients, and lack of long-lasting changes in those he did hypnotize.

Perhaps another of the reasons for Freud's failure was his bleak view of the subconscious. He claimed it is a cesspool of aggressive and sexual impulses.

Today's therapists are more likely to view the subconscious as a neutral well of memory.

Many even take the opposite view to Freud: for them the subconscious is a potent source of good.

**Like his contemporaries, Freud failed to realize that the client, not the therapist, is in control of her use and "depth" of hypnosis.**

Freud grossly misunderstood the nature of hypnosis. And he held a warped view of love. He claimed:

**"From being in love to hypnosis is evidently only a short step . . . There is the same humble subjection, the same compliance, the same absence of criticism toward the hypnotist just as toward the love object." (Kline, 1958, p.27).**

Freud's error, shared by most people of that era, was to place the client (usually a woman!) in a weak, dependent role.

As psychoanalysis grew in popularity, hypnosis fell out of favour for decades.

Today, so light is the therapeutic trance in psychoanalysis

**"that many traditional psychoanalysts respond with indignation when it is suggested that their patients are in continually varying states of trance as they free associate on the couch" (Rossi, 1988, p.49).**

Indignation is hardly called for because -- in or out of therapy -- people frequently lapse naturally into a hypnotic state. According to Rossi, *hypnosis is triggered anytime a person is remembering a sequence of events.*

Such a recall process is a crucial part of many current therapeutic methods. Thus many therapists who claim no expertise with hypnosis unwittingly use it in their work.

Stage hypnotists kept the art alive. Several of them began to use hypnosis off-stage to help people, for example to overcome shyness or stuttering, to change bad habits such as smoking or nail-biting.

Meanwhile, research into hypnosis both in the West and in Russia, continued within the walls of universities. These scientific findings confirmed and amplified the knowledge about hypnosis that had been gained in the past and confirmed contemporaneously by courageous clinical practitioners.

In the 1950s both the British and American Medical Associations acknowledged the value of hypnosis as a tool for healing. Despite this, only a minority of doctors practised hypnotherapy.

The new respectability of hypnosis in scientific and medical circles was matched by exciting developments in therapy offices.

Spurred on by the example of geniuses such as Milton Erickson more and more psychologists and other professionals endorsed hypnotherapy and created innovative techniques for its use with troubled clients.

Because psychoanalytic therapy drags on and on for years, and rarely, if ever, results in a cure and is very expensive, it has waned in popularity.

The 21st century thirst by clients, insurance companies and psychotherapists for short-term, cost-effective methods makes hypnotherapy an attractive alternative.

Nevertheless, in-office hypnotherapy may not be appropriate for a particular client.

Then the therapist's ability to use other techniques is important, says Dr. Knight.

**"Frequently I'll combine another approach -- rational-emotive therapy, or behaviour therapy, or solutions-oriented therapy, for example, along with hypnosis to give the client optimum benefits."**

For Dr. Knight, as for most therapists, the greatest reward of being a therapist is not financial, but seeing clients achieve their goals:

**"When a shy person becomes outgoing, when a man is no longer terrified of driving or when a woman becomes able to complete her PhD dissertation -- this is what makes doing hypnotherapy worthwhile."**

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