[http://www.sciencedaily.com/releases/2010/02/100226161430.htm]

Hypnosis Can Help Control Pain Among Women With Metastatic Breast Cancer

Feb. 26, 2010 — Hypnosis can help alleviate the pain and suffering experienced by women being treated for breast cancer, according to a study by a University at Buffalo School of Social Work professor.

The randomized trial measured pain and suffering, frequency of pain and degree of constant pain among 124 women with metastatic breast cancer, according to Lisa D. Butler, associate professor in UB's School of Social Work, a faculty member in the Buffalo Center for Social Research and first author of the study.

Researchers recorded levels of pain at four-month intervals for a year. Women who were assigned to the treatment group received group psychotherapy, as well as instruction and practice in hypnosis to moderate their pain symptoms. They reported "significantly less increase in the intensity of pain and suffering over time," compared with a control group, who did not receive the group psychotherapy intervention.

However, those using hypnosis reported no significant reduction in the frequency or constancy of pain episodes.

"The results of this study suggest that the experience of pain and suffering for patients with metastatic breast cancer can be successfully reduced with an intervention that includes hypnosis in a group therapy setting," according to Butler. "These results augment the growing literature supporting the use of hypnosis as an adjunctive treatment for medical patients experiencing pain."

The study was published last year in an issue of the American Psychological Association journal Health Psychology.

The researchers also found that, within the treatment group, those patients who could be hypnotized more easily -- a group the researchers said demonstrated "high hypnotizability" -- reported greater benefits from hypnosis. These patients used hypnosis more overall, including outside of the group sessions, and in some cases used it to address other symptoms related to their cancer.

"These results suggest that although hypnosis is not at present standard practice for treating a wide range of symptoms that trouble cancer patients, it is worth examining that potential," Butler says. "Together, these findings suggest that there may be a number of benefits to the use of hypnosis in cancer care including, but not necessarily limited to, its more traditional application for pain control."

Butler joined the UB faculty in January 2009, after doing research at Stanford University's School of Medicine. She was hired at UB to strengthen the university's research focus on "extreme events" as part of the UB 2020 strategic planning initiative. She recently published a nationally recognized study on how some people living through an extremely traumatic event -- including the 9/11 terrorist attacks -- have the ability to recover or even grow in personal and interpersonal functioning.

Butler Lisa D; Koopman Cheryl; Neri Eric; Giese-Davis Janine; Palesh Oxana; Thorne-Yocam Krista A; Dimiceli Sue; Chen Xin-Hua; Fobair Patricia; Kraemer Helena C; Spiegel David
Effects of supportive-expressive group therapy on pain in women with metastatic breast cancer. Health psychology, 2009, 28(5), pp. 579-87.

OBJECTIVE: To examine whether a group intervention including hypnosis can reduce cancer pain and trait hypnotizability would moderate these effects. DESIGN: This randomized clinical trial examined the effects of group therapy with hypnosis (supportive-expressive group therapy) plus education compared to an education-only control condition on pain over 12 months among 124 women with metastatic breast cancer. MAIN OUTCOME MEASURES: Pain and suffering, frequency of pain, and degree of constant pain were assessed at baseline and 4-month intervals. Those in the treatment group also reported on their experiences using the hypnosis exercises. RESULTS: Intention-to-treat analyses indicated that the intervention resulted in significantly less increase in the intensity of pain and suffering over time, compared to the education-only group, but had no significant effects on the frequency of pain episodes or amount of constant pain, and there was no interaction of the intervention with hypnotizability. Within the intervention group, highly hypnotizable participants, compared to those less hypnotizable, reported greater benefits from hypnosis, employed self-hypnosis more often outside of group, and used it to manage other symptoms in addition to pain. CONCLUSION: These results augment the growing literature supporting the use of hypnosis as an adjunctive treatment for medical patients experiencing pain.