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## **Just imagine: the power of hypnosis**

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If you still put hypnosis in the category of bizarre, unscientific hocus pocus, you might be interested to know it's cited in 11,480 PubMed articles, including studies of its usefulness in pediatric procedural pain, migraine, burn care, cancer, asthma, abdominal pain, dyspepsia, irritable bowel syndrome, and psychiatric disorders.

You might be even more surprised to learn that you've probably been practicing aspects of hypnosis in your office for years.

Are you sometimes playful with fearful children, distracting them from your examination with a story or coin-behind-the-ear trick? Do you engage the wonderful imagination of a preschooler to get his cooperation? Do you ask a preteen struggling with popularity issues to act out with you a difficult peer drama, casting her as the hero?

Dorland's Medical Dictionary defines hypnosis as "a state of altered consciousness, usually artificially induced, characterized by focusing of attention, heightened responsiveness to suggestion and commands, suspension of disbelief with lowering of critical judgment, the potential of alteration in perceptions, motor control, or memory in response to suggestions, and the subjective experience of responding involuntarily."

Seen in this context, hypnosis isn't a party trick, it's a potentially powerful tool for the medical care of children (and adults!). Like all of the skills you use, the efficacy of hypnosis is enhanced when you come to understand the principles behind it, receive some training, and practice, practice, practice.

Hypnosis came to life for me when I watched a talented pediatrician prepare to give a 4-month-old an immunization in his Michigan office.

He gently arranged the baby on a table in the middle of the room and asked the child's mother to stand at the head of the table, above him. Then he asked the mother to lower her forehead toward her child, until their foreheads touched.



In that calm, quiet, magical moment, the pediatrician delivered the vaccination. The baby didn't cry or squirm, but seemed quite literally mesmerized by this unfamiliar form of touch from his familiar nurturer.

Lulling someone into a relaxed state of being by introducing a surprise is inherent in many hypnotic techniques. The surprise may be in your voice, soft and slow, pausing in a cadence rarely heard in human communication. It may be in the fanciful picture you encourage in your patient's already vivid imagination using words.

Sometimes, quite honestly, you won't know just what it is, or why it works. It just does, as in the way crying babies will sometimes quiet when you step outdoors with them. Is it the temperature? The scenery? The light? Whatever induces the change, the baby's mental state is clearly altered. Her eyes wander. Her breathing changes. She listens. Voila.

With preschoolers and young school-age children, verbal distraction comes beautifully into play.

It doesn't take much, and it works best when you're vague and let the child fill in the details.

Start telling a story featuring a character not so unlike the child in your care. Set the scene for your once upon a time, but leave the details to the child. Maybe it was cloudy or maybe clear. There was a light wind blowing, or it was very still. Music could be heard in the distance, or the chirping of birds or maybe no sound at all. The little boy, or little girl, or bear cub or bunny sat or strolled, I don't know. And so on ...

Once the scene is rolling in your patient's young mind, very gently and gradually suggest physical changes that might be occurring in him or her. Whisper. Lightly stroke the patient's forehead or arm.

"You might start to feel lighter, as though your arms are floating or your temperature is changing; you're getting cooler, or more comfortable."

When you prepare to deliver the treatment, don't make promises, only suggestions, ending with the idea you want the child to hold.

"This might not make a difference, or it might make the pain almost go away," you might say.

"You may begin to feel more numb in your right hand or maybe in your left hand."

With older children you may want to use hypnotic language in predicting success. Like an Olympic skier standing at the top of the hill envisioning the turns and the victorious arrival, encourage the enuretic child to picture awakening to the signal of his or her body and going to the bathroom.

"Some children start to wake up and go to the bathroom after a week or so," you'll say, "but some children wake themselves up the very first night."

In strategic family therapy, imagination informs "the magic question."

A therapist asks the family, "If I were magic and could make this problem go away overnight, what would be the first thing you'd notice when you woke up?"

By thinking through a time of resolution, family members begin to see their dilemmas as solvable and also note the details of the dynamics that have had them stuck.

I have found my training in hypnosis tremendously helpful in my pediatric practice, not just for procedural or chronic pain, but for the day-to-day challenges of helping families to heal.

You may want to learn more and hone your hypnotic skills, either through a workshop or an excellent textbook, such as Dr. Karen Olness' "Hypnosis and Hypnotherapy with Children," Third Edition (Guilford Press, 1996).

Even if you don't delve deeper into hypnosis, I do hope you'll tap into the power of suggestion at every visit, in delivering a care plan in such a way that everyone believes good things are going to happen. Use the words "when you take this three times a day" rather than "if" as you predict a successful plan. Avoid using negatives such as, "Don't worry about it," because the mind tends to hear the phrase while skipping the "nots": as in, "Worry about it." Remember, significant improvements occur from the power of suggestion alone 30% of the time when one gives a placebo!

When you prescribe a medication or a behavior plan, predict compliance and a good outcome. It has certainly worked well in alternative medicine, which engenders a belief in treatment that often surpasses common sense and evidence.

So close your eyes and imagine the restored health of your patients' bodies and minds, families who share the vision, and patient interactions infused with a sense of hope and possibility.

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