

CHAPTER 8

THE DANGERS OF HYPNOSIS

The risks of undergoing hypnosis are on par with other forms of psychotherapy. Competently performed hypnosis has no risk or danger. Even when performed incompetently, hypnosis generally has only minimal risks.

But there are isolated exceptions, such as:

- ✘ When hypnosis is used to treatment of a condition the hypnotist isn't trained to treat without hypnosis
- ✘ When a symptom is removed by a direct command
- ✘ When an inadvertent post-hypnotic suggestion has been applied
- ✘ Following an amateur hypnotist.

What's more, even skillful suggestion by an unethical or malicious hypnotist – or hypnosis used on a particularly vulnerable person – has the potential for creating psychological damage. Extreme caution should be exercised about treating individuals who suffered from personality and emotional disorders prior to hypnotherapy. If the therapy worsens the problem, the hypnotherapist is often blamed.

For this reason, hypnosis is not recommended for people with:

- ✘ Certain medical problems,
- ✘ Drug or alcohol abuse,
- ✘ Hallucinations or delusional bouts.

The problem is that unexpected and unwanted thoughts, feelings or behaviors can manifest during or after hypnosis. Hypnosis can impair their mental functioning in ways they hadn't previously experienced. Rare but true, what follows is a partial list of the complications that can emerge:

∞ uncontrolled weeping ∞ lowered stress threshold ∞ drowsiness, excessive sleep ∞ fatigue ∞ anxiety and panic attacks ∞ nausea, vomiting ∞ personality change ∞ antisocial acting out ∞ attention deficit ∞ symptom substitution ∞ body or self-image distortions ∞ dizziness ∞ stiffness in neck or arm ∞ fainting ∞ irritability ∞ impaired or distorted memory ∞ depression ∞ concentration loss ∞ histrionic reactions ∞ identity crisis ∞ over dependency ∞ stupor ∞ confusion ∞ impaired coping skills ∞ delusional thinking ∞ tactile hallucinations ∞

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depersonalization ∞ sexual acting out ∞ tremors ∞ guilt ∞ headache ∞ insomnia medical emergencies ∞ sexual dysfunction ∞ injury or physical discomfort ∞ psychosis ∞ regressed behaviors ∞ spontaneous trance ∞ traumatic recall

Pain and other physical problems shouldn't be treated with hypnosis unless the client has first consulted a physician. It's crucial for the underlying physical cause of pain to be determined before administering trance work to assist in its management effort. Hypnosis can help manage pain, but not cure it.

Very young children lack the necessary attention span, so formal hypnosis isn't recommended for them. However, interactive treatment methods may be used such as storytelling, play therapy, art therapy, and guided visualization. During sessions, suggestions can be made to a young child.

People who wish to uncover childhood memories often request hypnosis, too. But hypnosis may or may not be effective in such cases. Memories may surface; however, they may be what are called false memories. The accuracy of such memories isn't guaranteed to be reality based. These are sometimes disturbing for a patient.

After trance work, some patients feel slightly disoriented. But together, a therapist and client can ensure the patient is completely alert and sufficiently energized. Only then should the client leave the therapist's office, once they're ready to get on with their day.

In a few rare cases, patients experience mildly disturbing thoughts or feelings after hypnosis. If this happens, the patient should immediately call the therapist for a follow-up session.

CHAPTER 9

BEWARE OF EMOTIONAL LANDMINES

Hypnotists sometimes momentarily lose control of the hypnosis process. This happens when the specialist is caught off-guard by a patient's emotional problems or psychological needs. If not trained to deal with these awkward situations, there's a risk of exacerbating the problem – and the risk of creating new ones.

The crux of the matter is that hypnosis often involves intense emotion and vivid imagery, both of which seem quite real to the client. There are times when the hypnotist may even get caught up in the patient's fantasy, or at least in the emotional aspects of it.

In 1961, prominent Australian hypnotist and scholar Ainslie Meares identified the following list of potential difficulty areas that untrained or poorly trained hypnotist (and other psychotherapist) may experience:

1. The situation may be deliberately misused to meet ulterior needs (e.g. seduction of trusting female clients)
2. The interaction may enhance negative aspects of the hypnotist's personality, or create dependence of the client on the hypnotist
3. Traumatic confrontation with previously unacknowledged memories
4. Precipitation of a latent psychosis
5. Substitution of one symptom for another
6. Panic reaction, or creation of traumatic fantasy
7. Complications due to misunderstandings
8. Difficulty in arousing the client, and problems caused by incomplete alerting.

If an unexpected situation is encountered, and the hypnotist panics or behaves irresponsibly, there is a very real risk in some cases of existing psychological problems becoming exacerbated. This is why hypnosis should not be considered a casual interaction, but an intimate communication that should be used with some respect.

Before considering hypnotherapy, you must obtain a proper diagnosis from a physician to understand what is being treated. This is especially true if the condition is psychological in nature (for example, a phobia or anxiety), in which case it is important to first be evaluated by a psychiatrist. Without an accurate diagnosis, it's possible to exacerbate the symptoms.

Also, though rare, hypnotherapy can lead to the development of "false memories." Also called confabulations, these are unreal memories fabricated by the unconscious mind.