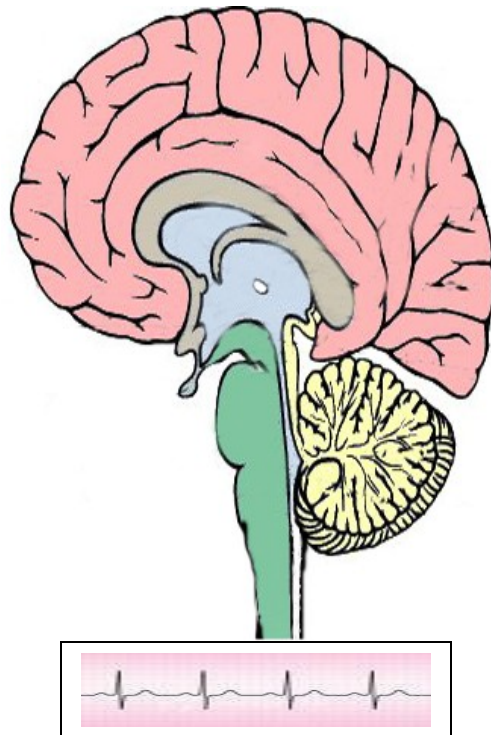


The Psychoplasty & Clinicl Hypnosis

(Treatment of Incurable paralysis)



By

Dr.J.P.Singh

Preface

Welcome to the world of psychoplasty. It is mostly helpful to treat the conditions of curable and incurable paralysis caused by brain cell injury such as CVA-stroke, head trauma, spinal injury or any pathogenesis.

Paralysis is world wide the most common cause of disability and death. This treatment is dedicated to those patients who are unfortunately suffering from incurable paralysis and not seem any further hope of recovery. Psychoplasty offers a new scope of healing beyond available modern medicines and therapies.

The Psychoplasty (psyche induced brain cell plasticity) technique has already been tested and proven success-rate is 60 to 70%. It helps to restore normal daily life of paralyzed patients as well as make them competent to fight against disability.

The hypnotic trance is a created altered state of conciseness. Where any individual can obtains advantage of psycho-physiologically maintained scale-down electrical frequencies of the brain. It uses clinically.

Brain cell plasticity is a natural phenomenon. The brain allows rewiring of neurons network as per demand of learning aptitudes. It may be either apt by the long term conscious practices or enforced by the inductive suggestions under hypnotic trance.

Usually, the hypnosis is used in the field of psychiatry. But I discovered a vast therapeutic scope of hypnosis in the field of neurology. The use of hypnosis in Neurology, of course, is my personal contribution.

I hope the book will be of help to both the medical professionals and the common persons. Views on the book are welcome.

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Dr.J.P.Singh

Chapter : I

THE BRAIN: ANATOMY AND PHSIOLOGY

The Nervous System

The nervous system is the most important and complex system of human body. It is concerned with our experiences, emotions, intelligence, movement, creativity, internal environment of body, consciousness and complex activities. It allows and performs – breathing, blinking, learning, thinking, bodily processes etc.

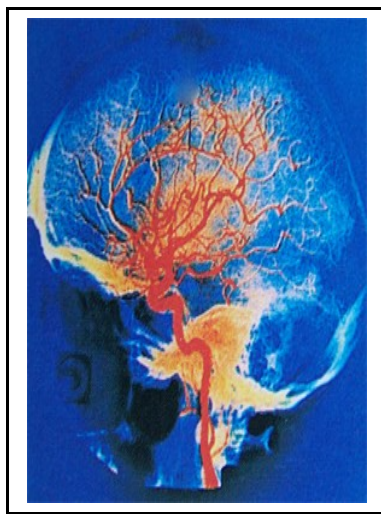


Fig. 1: Angiogram of the brain

The Human Nervous System has divided into two parts, called Central Nervous System (CNS) and Peripheral Nervous System (PNS). The CNS is consisted with the brain up to spinal cord. PNS is extensive part of CNS. It extends up to peripheral area of the body, the Peripheral Nervous System transmits between the body and the CNS.

There are two types of movements regulates and performs by the Peripheral Nervous Systems: Voluntary and Autonomic. We can control and perform the voluntary actions and activities of the body as per own desires, but Autonomic Nervous activities regulates functions to maintain the internal bodily environments like balance of blood pressure, hormone production, intestinal movements, breathing, secretions etc.

Nervous system of the body happens to be the most complicated system as it involves a lot of functions. Creativity, intelligence and consciousness depend entirely on this system. Because of this system one can not only communicate but also perceive and preserve emotions. It happens to be controlling agent of all activities and functions of the body. It is therefore autonomous and generates autonomous functions. It is also responsible for complex activities like playing instrument, learning, riding any vehicle etc.

It consists of brain, spinal cord, nerves. The human brain weighs about 1.4 kg and contains 100 billion neurons. Brain and spinal cord contain two types of tissues: gray matter which initiate and process nerve impulses and white matter which transmit them. Nervous

system consists of two parts : Central Nervous System (CNS) consisting of brain, spinal cord and Peripheral Nervous System (PNS) consisting of nerves which emerging from CNS branch forth covering the entire body. CNS process and coordinate the signals of nerves.

The complex activities of the nervous system appear to be starting and miraculous. These are many activities which are consciously performed. Say for example, learning how to ride a bicycle. When you begin to learn riding a bicycle, you consciously learn it. Once you acquire the skill, you can ride any bicycle. The conscious practice of riding then goes deeper into the unconscious in such a manner, riding the bicycle becomes automatic and spontaneous. This change from the conscious to the unconscious is performed by the nervous system.

Motor nerves perform two types of movement: Voluntary, such as movement of any body part as and when desired or needed; and Involuntary, such as heart beat, intestinal movement, breathing, blood pressure.

The sensory receptors respond to the stimuli and transmit data to the brain. Skin, eye, ears, tongue, nose are the organs which retains sensory receptors.

Central nervous system monitors all activities of the body and mind. It regulates our consciousness, besides performing the other autonomous functions of the physical body. Body's consciousness resides in the central nervous system.

The Human Brain

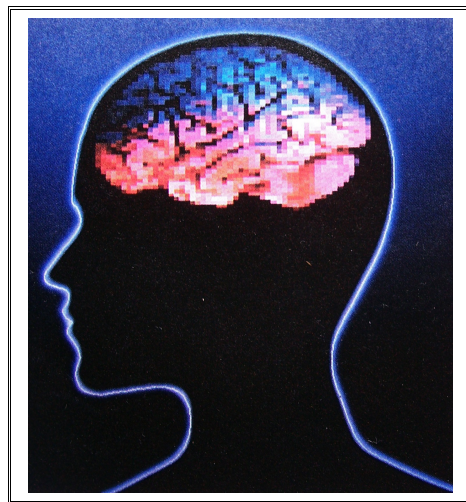


Fig. 2: The Brain Anatomy

The human brain is situated in a quite safe nutshell of bony skull. It is a so soft and very sophisticated structure of the body. The human brain works as the Governor of entire nervous system. It regularizes, monitors and produces major activities of nervous system. It is also a base of consciousness, thought, intellect and movement of the body, which made and presented human being as some different than vegetative.

The human brain is made up of 100 billion neurons and 1000 billion glial cells. It is having 3 Pounds (1.4 kg.) weight, consist with 78 percent water, 10 percent fat, 8 percent protein. The brain uses 20% volume ratio of entire blood contains in the body.

The Hemispheres of the Brain

The cerebrum is a largest structure of the brain; it is divided into two Hemispheres: Left Hemisphere and Right Hemisphere. These are made up of gray and white matter composed with internal parts of the brain extended up to spinal cord.

Left Hemisphere : Right hander persons are getting more advantage of left hemisphere, which is concerned with our sequential analysis, sense of logical interpretation of information and data, systematic nature, imagery and symbolic production like writing language, mathematics, speech. The left Hemisphere is dominant hemisphere in more than 9 out of 10 people.

Right Hemisphere : Left hander are getting more scope of right hemisphere. Holistic functioning, complex skills like dancing, gymnastic act etc. are related with right hemisphere. It is also related with audio visual modalities and storage of concerned memories.

The Lobes of the Brain

The structure of human brain is divided into four lobes-

Name	Function	Injury or damage related features
Frontal Lobe	Emotion, Reasoning, Movement, Parts of speech, Creativity, Judgment Problem solving, Planning, Purposeful act, Concentration, Learning	Impairment of recent memory, Inattentiveness, Learning difficulty, Speech disorders, Lack of concentration, Contralateral plagia, Expressive or motor aphasia Imbalance.
Parietal Lobe	Sensory nerve inputs touch, pain, pressure, taste, heat, body orientation	Inability to feel sense and recognize parts of the body writing difficulty.
Temporal Lobe	Hearing interpretation of auditory stimuli, Language Speech Learning, Memory information, Meaning	Hearing difficulty, aphasia Childish behavior irritability, Agitation
Occipital Lobe	Receptive of visual objects, recognition and interpretation of visual stimuli	Loss of vision, disability to recognize objects, flash of light, stars.

Parts of the Brain

The Human Brain itself consist an integral complete structure, but according to functionality and visual featurisation it may be divided into various parts as –

Parts	Function	Injury or damage related features
Cerebral Cortex	Outermost layer of brain cerebrum composed by gray matter regulates higher brain functions, sensory data analysis. Thought, language, reasoning, movements, experience, planning, memory function, earning information.	Loss of higher brain activities, senseless movementless, Learning disorders, memory loss, speech disorders, loss of reasoning power.
Cerebellum	Balance coordination and control of voluntary movements, maintain posture. It is a cauliflower shape structure located in the lower part of the brain	Tremors, Ataxia, Lack of muscular coordination, Involuntary movements.
Hypothalamus	Control on endocrine system, regulates – sleep, temperature, digestion, sexual functions, appetite, stress response. It is 1/300 of total brain weight and responsible for some very important behaviour. It is located at the base of thalamus and it is the higher centre for autonomic nervous system.	Hormonal imbalances, Inability to control temperature and autonomic nervous system.
Thalamus	Thalamus receives sensory information and relays to the cerebral cortex. Also receives information from cerebral cortex and transmit to the other part of brain and brain stem. It is a processing centre of cerebral cortex and controls sensory and motor integrations. It is the part of limbic system, located in internal portion of center brain.	Altered level of consciousness, Loss of perceptions.
Pituitary Gland	The Pituitary Gland controls other glands through out the body and controls hormones secretion and helps convert food into energy. It is part of limbic system located under hypothalamus.	Inability to convert food into energy. Hormonal imbalance.
Peneal Gland	Peneal Gland located in internal portion of the brain, it is part of limbic system. The peneal gland is activated by light, without trace of light peneal gland would never start work. It controls growth and maturity of the person.	Restricted growth and maturity condition.
Amygdale	The Amygdale is a almond shape structure located in the internal limbic system of forebrain. It controls emotions	Inability to feel happiness and emotions. Arousal of amygdale can cause of

	such as happiness, madness.	unclear thinking.
Hippocampus	The seahorse (crescent) shape structure in the deep temporal lobe, a part of limbic system is Hippocampus. It forms up and stores random current memories and also involve in learning. It is a keeping house of working memories as instant level but permanent long term memories moved into basal ganglia.	Inability to recall memory, loss of retention power, learning disability.
Basal Ganglia	The Basal Ganglia are the capsule like island structures in the deep brain. They consist with sub-cortical gray matter nuclei clusters of neurons. They help to control and coordinate voluntary movements like walking. Basal Ganglia are also memory consolidators, where consisted long term final phase of memories save-up, it may be caused physical and psychological changes while symbolization of memories. Basal Ganglia processing link between thalamus and motor cortex. It controls the smoothness of muscles movement.	Disco-ordination of neuro-muscular movement. Loss of permanent long term stored memories changes in behaviour, Chorea, Parkinson, Tremors, difficulty to initiate movements.
Brain Stem	The Brain Stem is a stem like portion of the brain. It is made up of diencephalons, midbrain, pons and medulla oblongata. The Brain Stem is a main motor pathway. It is crossed over the opposite sides at beginning of spinal cord. It relays nerve impulses between spinal cord and the brain and also regulates heart rate and breathing.	Contra lateral palsy or inability, loss of sense and movements of whole body.
Midbrain	The midbrain is a part of brain stem. It is pathway of cerebral hemispheres, it is included the thalamus, hippocampus and amygdale. It controls breathing, auditory and visual reflexes, swallowing and heart rate included cranial nerve –III, IV	Loss of consciousness, breathing, speaking, hearing problem, Irregular heart rate
Pons	The Pons consists under midbrain in the brain stem. It is concerned with respiratory centre and cranial nerve – V, VI, VII and VIII	Respiratory difficulties, cranial nerve palsy,
Medulla Oblongata	The Medulla Oblongata is expressing of motor track and it is concerned with cardiac, respiratory, vasomotor functions including cough, gag, swallow	Ipsilateral palsy, loss of consciousness, pupils size and movement fixed. Abnormal breathing pattern,

	and vomit mechanism. it covers to cranial nerves – IX, X, XI and XII	absent cough, gag, cranial nerve palsy.
Corpus Collosum	The Corpus Collosum is a connecting pathway structure to connect left and right hemispheres. It allows for communication between both hemispheres.	Split brain syndrome
Choroid Plexus	The Choroid Plexus situated on upper site of thalamus nearby x-shaped ventricles and cavities in the brain. This area is involved in producing protective cerebrospinal fluid.	Deficiency of cerebrospinal fluid.
Spinal Cord	The Spinal Cord is an extensive structure of brain stem. The nerve impulses use to run between the brain and the peripheral nerves through tracts (pathway) in the spinal cord.	Paralysed sensory or motor function of concerned area or part of the body.
Cerebrum	The Cerebrum is the largest part of the brain. It consists of gray and white matter and having active link to every part of the body. It is full of neurons and Glial cells. The outermost layer of cerebrum is called cerebral cortex. It processes sensory data and sends motor impulses to the muscles.	Paralysed sensory and motor activities, deficiency in learning and performing intellectual works.

Brain Cells

Numerous microscopic cells are contained in the brain. Many of them are working as a special messengers called neurons. They send and receive electro-chemical signals to and from the brain over entire nervous system of the body. Neurons are brain cells. Sense, emotion, movement, memory, intellectual activities are processed by them. Grey matter of the brain consists neurons. Neurons originate nerve impulses or transmit neuro-signals. But Glial cells are not like neurons, they are non-neuronal cells and unlikely they provide support, protection, nutrition, maintenance to the neurons.

Neurons

In the brain neurons form dense packed clusters. More than 100 billion neurons are contained in the human brain, these are nerve cells and transmit nerve signals to and from the brain. Neurons are connected to other neurons or muscles or organs or glands. The neuro-transmission is transmitted as a chemical signal across the nervous pathway or next target cell.

Neurons consist of a cell body with nucleus, axon and dendrites. Dendrites are the signal receivers and Axons (nerve fibers) are signal conductors. Axon ends called Axon terminal where it joined with the gap between the Axon terminal and from an adjacent cell body or a dendrite. Dendrites bring information toward the cell body and Axon extends information away from the cell body. Axon consists with Node of Ranvier and Myelin sheath which helps to speed up generated neuro-transmission signals.

Generally a typical neuron has one or two axon fibers, many dendrites, one nucleus body and about 1,000 to 10,000 synapses. It is able to communicate 1,000 to 10,000 other neurons of muscles, glands or organs of the body.

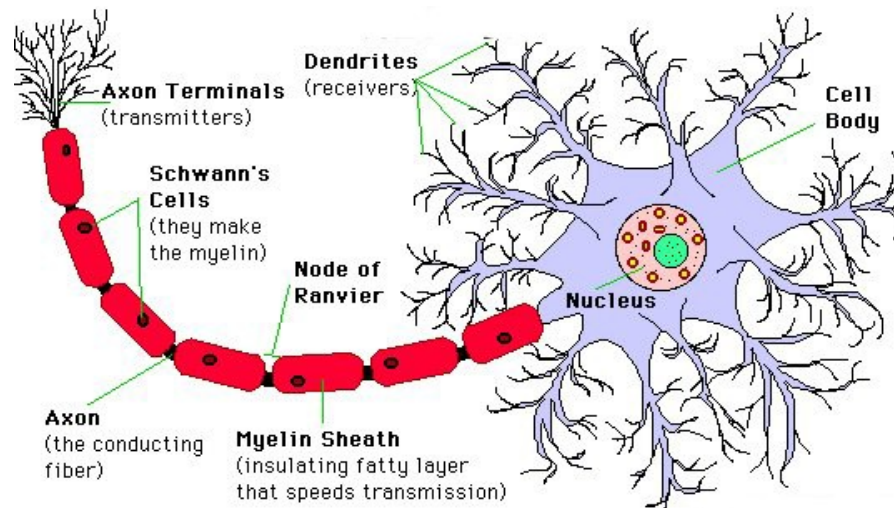


Fig. 3: Structure of Neuron

Types of Neurons-

Sensory Neurons : Sensory neurons are concerned with body sense specially sense organs like eye, ear, nose, tongue etc. They carry signals from the sense receptors and transmit towards central nervous system. These neurons have two processes and called Bipolar Neurons.

Motor Neurons : Motor Neurons are responsible for motor function or movement of the body. They carry signal from central nervous system and transmit to muscles and glands and produce motor functions. These are multipolar neurons.

Inter Neurons : These neurons consist with two axons instead of an axon and a dendrite. They communicate spinal cord by using his one axon and other one with either the muscle or skin at a time. They have made no neural wiring within the central nervous system. Inter neurons called also Pseudopolar Neurons or Spelling Cells.

Glial Cells-

The Glial cells simply called Glia (“Glue” in Greek) or Neuroglia. Glial cells were discovered by pathologist Rudolf Virchow in 1858, when he was searching for a “connecting tissue” in the brain.

The human brain consisted by 100 billion neurons and 1,000 billion Glial cells. About 90 percent of brain cells are Glial. The Glial or Glue cells are like a housekeeper of neurons. They act like little ropes to hold the neurons clusters in the brain. Although Glial cells are

nerve cells but they do not carry nerve impulses likewise neurons. They perform physical and nutritional support for neurons moreover digestion of parts of dead neurons, manufacturing myelin for them etc.

The scientist who studied the brain of *Albert Einstein* had observed the presence of a huge number of Glial cells, in his specific area of brain. The presence of numerous Glial cells made him a great intellectual.

The famous myth – “We are using only 10 to 5 percent of our brain. Now has been proved after the discovery of the Glial cells, those are containing ten times more than neurons. The recent discoveries of 2004 have disclosed that Glial cells are working as a manager of communications in the synapse gap and whereas great importance has confirmed in the field of learning.

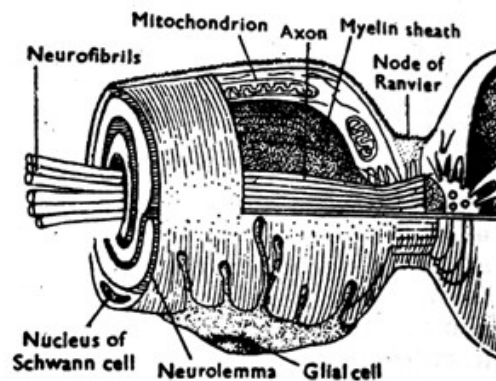


Fig. 4: Structure of Glial Cells

Role and Function of the Glial Cells –

1. Holding the surrounding neurons properly at place.
2. To provide supply of nutrients and oxygen to neurons.
3. To insulate one neuron from other one.
4. To destroy pathogens and remove dead neurons.
5. Modulation of neuro-transmission to allow signal efficiency.
6. Regulation of repair of neurons after injury.
7. To proceed synaptic plasticity and synaptogenesis under crucial condition.

Data Pathways of the Brain

The brain receives various types of sensory data and information from different parts of the body and processes it to produce further voluntary responses. There are three types of process, called pathways-

Voluntary Pathways : The voluntary nervous system is working through the desire of person. The sensory information or thoughts trigger the brain to produce voluntary motor responses. For example- a mosquito bitted on my right hand, then localized peripheral skin receptors transmit information through the sensory nerve pathway to the cerebellum, where sensory data will primarily fine tuned and carry forwarded to cerebral cortex to produce coordinated proper motor signals. Cerebral cortex will finally analyse the received data

signals and then produce instruction data to the relevant muscles through motor nerve pathway of left hand to hit the mosquito immediately. Therefore mosquito will hit up by left hand. Entire action and proceeding will carryout within a second.

Autonomic Pathways : The internal environment of the body controls by the autonomic nervous system. It works without conscious intervention and help. The autonomic nervous system regulates –blood pressure, breathing, intestinal movements, body temperature and other important vital functions.

There are two types of autonomic nerves- Sympathetic and Parasympathetic. Those are having opposite outfit but balancing responses to each other most of the time. During stress, exercise, fear or any other concerned mental or physical activities or conditions, where one of them dominates to other one.

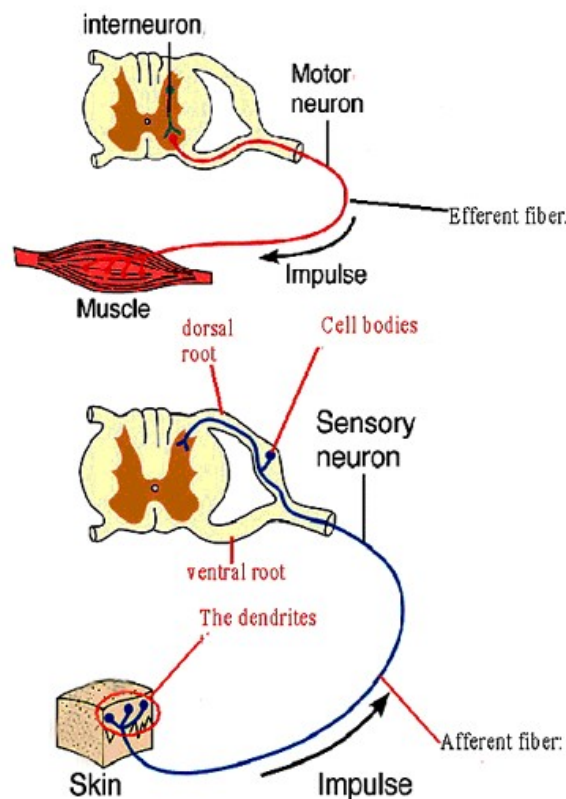


Fig. 5 Motor and Sensory Pathways

The sympathetic nerve impulses are carried by spinal nerve and extended up to organs. But parasympathetic nerves impulses are carried by cranial nerves and these are also extended up to organs as face to face of sympathetic nerve endings.

The entire function of autonomic nervous system is under control of the brain stem. The brain stem regulates autonomic nervous system. It collects data from internal receptors through sensory spinal nerves, thereafter processing, it releases proper response to sympathetic and parasympathetic nerves for remote action. Because of this, the autonomic nervous system always remains on duty even when we might be slept or consciously busy

elsewhere. The autonomic nervous responses are performed by the brain mostly unconscious level of the mind. We can not control or regularize them as per own desires.

Reflexes Pathway : The reflexes are involuntary responses, therein motor nerves perform some work spontaneously without intervention or desire of consciousness. The spinal cord produces most of reflexes except blinking, it comes from the brain directly though the cranial nerves.

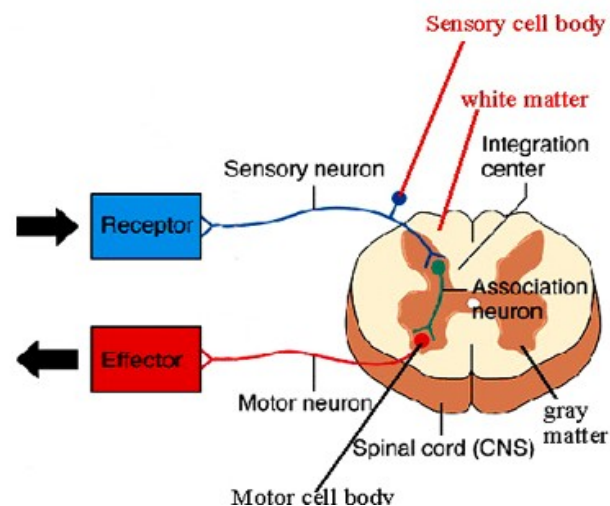


Fig. 6: Reflex Pathway

During the deep sleep person spontaneously used to hit mosquitoes, covers his body by blanket without using consciousness. These acts are performed by spinal cord as a reflex response.

The spinal cord is an extended but integral part of the brain. It is composed by gray and white matter consisted with brain cells or neurons, so that it is working as a extended part of the brain. Spinal cord process sensory impulses received from body. It is able to directly transmit signals to the concerned muscles to produce relevant motor functions.

The spinal reflex pathway is a short cut link of nervous system. Normally these pathway start from peripheral nerve endings of sensory nerves and turned it to the motor nerve root of spinal cord. Each spinal nerve has own motor and sensory root. The motor nerve root enters in the spinal cord from the front side and sensory nerve root enters from rear side. Accordingly it is easy to develop short cut link between adjacent sensory and motor nerves in the spinal cord through presented intervention of gray and white matter.

Chapter : II

Altered Level of Consciousness (Scale-down Brain Frequencies)

In 1929, Hans Berger developed Electroencephalograph (EEG) machine. This machine presents electrical frequency of neurons consisted in the upper most layer of cerebral cortex of the brain. Two electrodes are placed on each side of patient's scalp. Machine produces electrical frequencies of the brain on monitor as wave form on the graph format. The Electroencephalograph draws frequency graphs correlated with brain functions and activities. There are four classic ranges of electrical frequencies of the brain –

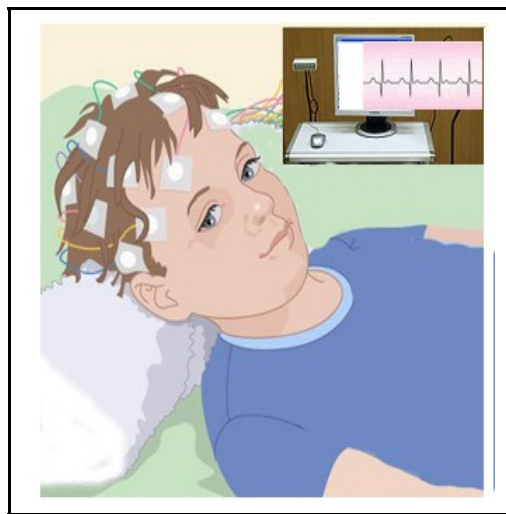



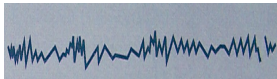
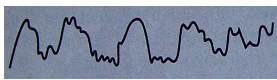
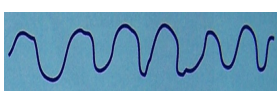
Fig. 7: Electroencephalography

1. **Delta Frequency** – The frequency range from 0 to 4 cycle per second (CPS) or Hertz (Hz) called Delta frequency. This is usually a state of coma or total unconsciousness.
2. **Theta Frequency** – The frequency range from 4 to 8 cycle per second (CPS) or Hertz (Hz) called Theta frequency. This range is concerned with deeper subconscious level of brain.
3. **Alpha Frequency** – The frequency range from 8 to 13 cycles per second (CPS) or Hertz (Hz) is called Alfa frequency. It is dreaming while sleeping state.
4. **Beta Frequency** – The frequency range up to 13 cycles per second (CPS) or Hertz (Hz) is called Beta frequency. It is conscious awaking state where we work and perform reasoning well.

Details of Altering Brain Frequencies:

The modern studies of human brain revealed that our brain works under some known measurable frequencies. The frequency range are closely corresponds the activities performed by the person. The EEG define that there are four types of electrical frequencies. According to variations (increasing-decreasing) of brain frequencies physiological features, activities

and level of consciousness are altering. The conscious acts when brain transmits 13 CPS or higher level of electrical frequency, but subconscious signifies only under scale-down frequencies.

Frequencies	Wave Graph	Description
Beta (β) 13-30 CPS		Awake, normal alert, conscious, ability to analyze data reasonably and logically, practical sense about experiences, men at work.
Alfa (α) 8-13 CPS		Relaxed, calm, meditation, creative visualization, lethargic state, activation of subconscious mind, cataleptic control, feeling lethargy, low respiration and heart beat, prompt suggestibility.
Theta (θ) 4-8 CPS		Deeper relaxation and meditation, problem solving, cataleptic and somnambulistic state, deeper state of Subconscious mind, extraordinary sense of perception (ESP), somnambulism, performance of proper suggestibility.
Delta (δ) 0-4 CPS		Deepest dreamless sleep, state of coma, unconsciousness, vegetation, <i>Samadhi</i> , hibernation.

Physiological Features under Range of Brain Frequencies

1. **Physiology under Beta Range** : We are working within 14 to 20 CPS range of the brain frequency when we turn out to be excited, irritated, feared, disturbed, anxious the frequency range increases likely up to 30 CPS. Persons suffering from acute hysteria, over burst, infuriated gain 40 to 60 CPS frequency. Higher frequency range prepare to increase blood supply on cerebral cortex, so that it causes to start overloaded frequent breathing pattern along with accelerated mental activities as restlessness, altered state of consciousness, irrelevancy, impatience etc.

When a man works under significant normal ideal physiological conditions then brain maintains 14 to 20 CPS frequency. Hyper temperament, hysteria or mania is caused to be accelerated brain frequency signals signify over pressure.

2. **Physiology under Alpha Frequency** : When we close eyes, start taking long deep breaths and try to concentrate without interference of sensory approaches the frequency turns into alpha. At where, automatically everything begins countdown even blood pressure, breathing cycle and brain frequency.

When we drop into the sleep the cerebral cortex becomes gradually inactive and turns its functions at least level. When we could not be conscious then observe dreams. At alpha frequency range we experience the appearance of subconscious that try to take place consciousness.

Physiologically we find very well and quite calm with reduced blood pressure, decrease breathing pattern. At the same time cerebral cortex release less frequency and signify it is unable to precede data, due to least blood supply therein.

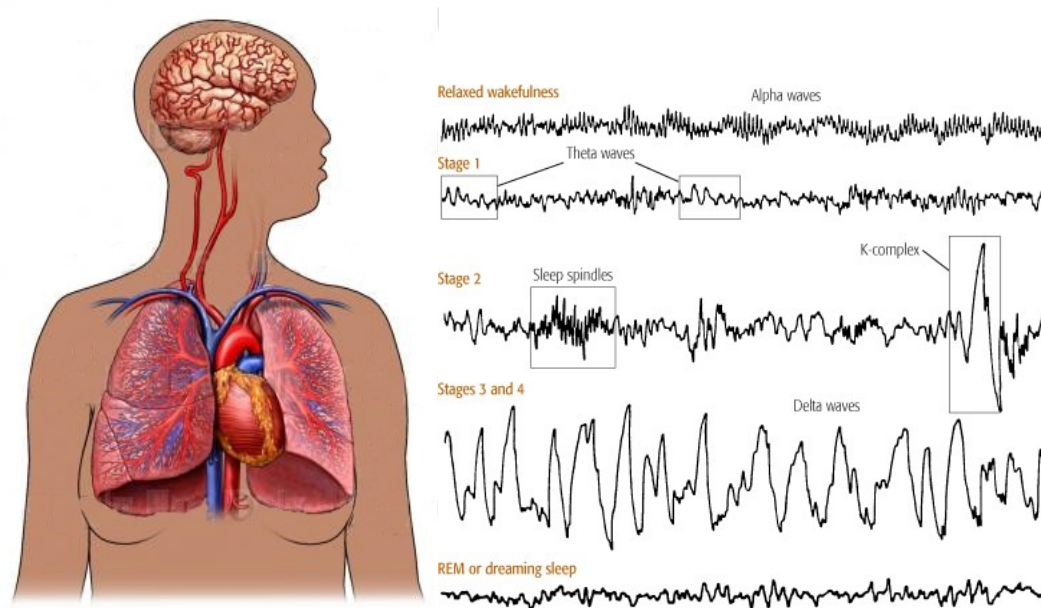


Fig. 8: The Alteration of Brain Frequencies

3. **Physiology under Theta Frequency** : The Theta frequency is more deeper than alpha. Where persons feel more calm and quite. Also it signifies a proper suggestivity and positive responses under hypnotic trance.

Physiologically, the basal ganglia may be opened under hypnotic trance and may be recalled long term back memories remained therein as symbolic forms. Also person can experience some psychic phenomenon. In this frequency heart beat and breathing gradually decreases than alpha range.

4. **Physiology under Delta Frequency** : The Delta frequency is concerned with the deepest state of mind and brain, this is like a condition of coma. It may perform '*samadhi*' vegetation or hibernation like biological states. Not much known about it.

Advantage of Scale-down Frequencies:

The brain frequencies are generally leveled on four slabs- beta, alpha, theta and delta. The beta frequency is normal conscious state, it is upward 14 cps. Specifically, apart the range of alpha and theta (12 to 7 cps) frequency is called scale-down frequency. When scale-down frequency runs, the brain turns into quite positive and suggestible. At this moment, brain provides a great advantage of significant psyche induced brain cell plasticity.

How to Generate the Scale-down Frequencies-

The scale-down frequencies may be generated with the help of following elements-

- Clinical Hypnosis
- Creative Meditation and Yoga
- Created Surprising Situations
- Psycho-drillic Practices
- Slow-down Breathing Practices
- Hypnotic Medicines
- Anesthetic Medicines

The traditional therapeutic scope and use of Hypnosis has yet been defined only in the field of Psychiatry. But I got some remarkable responses while treating paralysed patients, who were suffering from brain cell injury and associated problems. The Hypnosis promotes and sometimes enforces brain cell plasticity and it results in recovering the mobility and normal sense in the body. The use of Hypnosis in the field of Neurology is a new idea. I hope this contribution will be useful for mankind, particularly for those patients, who are suffering from any type of brain cell injury.

The Alteration of Brain Frequencies

The regulation phenomenon of Brain frequencies is very complicated and yet not well known. But the brain frequencies are usually altering by the variation of Heart (rate and pressure), Lungs (rate, breathing pattern and volume) and by the kinds of activities performed by the Brain, which is also closely attached with Psycho-physiological or emotional patterns of human being that provides to extend the scope of Endocrine glands system.

The following six factors are responsible to modify the brain frequencies -

1. Heart (Rate and pressure)
2. Lungs (Rate, breathing pattern, volume)
3. Brain (Involvement in the certain works)
4. Psycho-physiology (Emotional conditions)
5. Endocrine glands system (Secretion of hormones)
6. Physical Condition

I have made some experiments to observe the alteration in the brain frequencies under physical, physiological and psychological basis of human being. The feedback and responses as received are given below-

1. Just after closing eyes, the brain frequency drop-down near about 2 to 3 CPS.
2. Breathing rate and brain frequency rate both are proportionally related to each other.
3. When the cerebral cortex becomes engaged in the work, the brain frequency observe gradually increase as per kind and nature of performed work.

4. When the brain performs high intellectual pattern of work, it needs gradually high pressure and additional supply of the oxygenated blood. As a result, the heart rate and breathing normally are increased.
5. The Psycho-physiological activities like- emotion, fear, excitement, depression, anxiety etc may be caused to the rise and fall of brain frequency.
6. The secretion of particular hormones from endocrine glands may be caused to fluctuation of brain frequency.
7. When any person uses his five sense organs and brain start to process the concerned stimuli data and responds accordingly, brain frequency noted enhance.
8. When a person droops in the deep sleep or trance, the brain frequency scaled-down.
9. There are three types of breathing patterns- Glossopharyngeal breath (short breath), Intercostal breath (deep breath) and Diaphragmic breath (deepest breath). The brain frequency follows scaled-down pattern from short breath to deepest breath relatively.
10. When brain works under pressure and discomfort. It transmits scaled-up frequency, despite of comfort and pleasure.

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Chapter : III

Brain Cell Injury and Psychoplasty

Hypothesis of Invention

This invention is related to the concept of that if a normal person may become paralysed through hypnotic suggestions then why not a paralysed person may regain his normal body strength in a similar way.

Hypnotic Induction

Hypnotic suggestions are able to strongly induct and motivate the brain cells to produce neuro-functions both- motor and sensory without interference of conscious mind. This is a great advantage of hypnosis, which is able to rewire the brain, using phenomenon of brain cell plasticity. Consequently paralysed patients may regain functions.

Brain Cell Plasticity

In fact brain cells are not made of plastic like material but they are working in a group of networks. While we start to learn any new thing, at beginning, experience difficulty, but after some practice it becomes easy and comfortable due to brain cell plasticity or rewiring of neuron network. After practice, brain develops a certain network amongst effective cells, it is known as plasticity of brain, where brain made change slightly its physical connectivity with other intact neurons.

Human brain contained about 100 billion cells or neurons. It works like a computer's hard disc, where memory and processing setup both are configured therein, cells or neurons are like clusters. Entire function and movement of the body is configured inside the brain map, it allocates in particular sites. These particular sites are liable to produce particular activities or movement in the body. You can imagine when a particular drive (site) of our computer becomes corrupted (damaged) then it could not recover and process the data remains therein. It is like a partial paralysis of hard disc. Likewise same feature occurs in the brain. The clinical condition of paralysis is caused by partial damage (corrupt) or inactivation of brain sites.

Mechanism of Brain Cell Plasticity

Any muscular movement and sense feeling is due to our brain function. Brain cells are regularizing these activities. If I desire to move arm, the certain site of brain which regularizes this particular movement becomes active and produce neuro-transmission accordingly. It will produce body movement. But in the case of paralysis the brain cells turn into injured due to trauma, cerebro-vascular attack (CVA) or likewise any other physical or pathological conditions, consequently the function could sustain.

It is a great advantage of hypnotic trance where we can produce strong aspiration into the unconscious mind of patient through suggestions. It inducts plasticity or rewiring in the brain. This induction can motivate nearby cells to take place damaged ones. The cells generate rewiring of network and start neuro-transmission again. Therefore, the plasticity plays a prominent role to reinstate body movements and sense.

Indication of Hypnosis in Paralysis

There are two types of paralysis- one is functional and other one is organic. In case of functional paralysis, any pathological or organic damage not observed, it takes place either due to complexity of functional procedure of neuro-muscular system or as well as psycho-neurological complications. Clinically, pathologically and physically every thing observed like usual. In spite of this, if the patient is unable to move his body or unable to feel sense just use hypnosis for rapid and safe recovery.

In case of organic paralysis, where any organic damage observed as well as out side of the brain related to muscle injury, nerve injury, bone injury, etc. it should be treated conservatively. But in case of brain cell injury, hypnotherapy may be seceded even when patient might have diagnosed as incurable.

Generation of Neurons

The study of the brain is known as Neuroscience. The Neuroscience is yet their under developing stage. It is very difficult to understand the reticular activities and mechanism of the brain function at every level from the molecule to the psychology.

In spite of this the old concept and myth that the brain can not grow new cells or regenerate old ones after damage has been found false. Neuroscientist observed the privileged brain areas where brain cell grew. The neurogenesis located at Dendrite-gyrus, Hippocampus, Olfactory bulb and subventricular zone in human brain. The Hippocampus is concerned in learning and memory and subventricular zone is concerned in the production of cerebrospinal fluid that helps to protect the brain and spinal cord. Likewise the current researches are going on to locate other parts of the brain where genesis of neurons or glials may be occurred. Some studies claim possibilities to reveal in cerebellum also.

Data Processing in the Brain

The phenomenon of data processing in the brain is very reticular. Neuroscientists have developed motor and sensory maps of the human brain. By the help of these maps now it is easy to pin out the certain area of brain which is responsible to produce motor function and sense of the particular part or area of the body. The dominant hemisphere signifies comparatively more activeness than dominated.

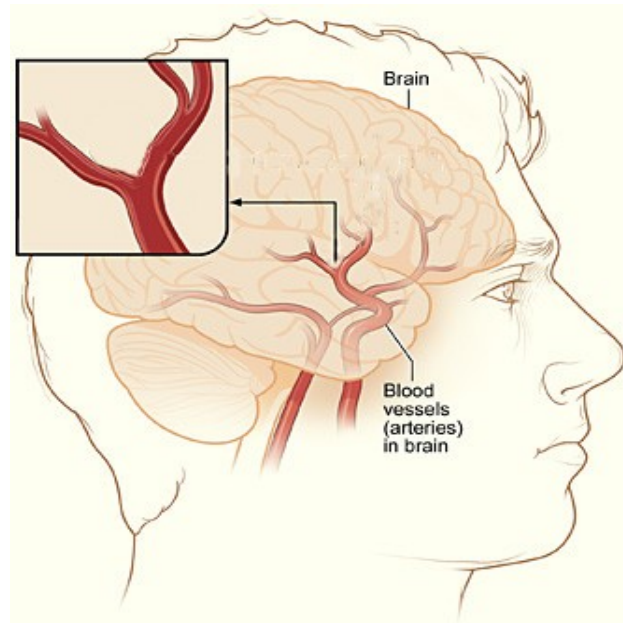


Fig. 9: Blood supply to the cerebral cortex

Although normally in case of complex higher human functions performance such as learning, memory, intellect, specialized fine skills the entire brain becomes active and coordinate processing of relevant data.

The cerebral cortex is upper covering crown layer of the brain. This is data analyst of the brain; it monitors and regularizes the consciousness. Anatomically the cerebral cortex is an upper lining area of the brain. The internal carotid artery gives blood supply upto the cerebral blood vessels, those vessels are connected with the superficial surface area of cerebral cortex. At the extension of upper end of supply track, the carotid artery's branches and vessels becomes narrowed. Moreover the heart is situated in the chest and it is pumping blood to the brain just anti-direction of gravity. So it is very clear that the cerebral cortex area of the brain never undergo the pressure of acute blood supply, except any accidental or extraordinary condition elsewhere occurred therein.

The brain is very sober and sophisticated structure of the body. The life and consciousness how can maintain with or without the brain, it is a great mystery, for details please follow the next chapter.

Brain Cell Injury

Causes of Brain Cell Death and Damage

There are various known and unknown causes of brain cell death and damage. One of them is disuse decay that happens naturally after adulthood. Unused cells lose contact links with axons and synapses and develop disuse atrophy. They become reluctant about sensory impulses and persists deterioration.

Else of this there are some signified pathogenic and physical causes for brain cell death and damage like stroke (CVA), head trauma, cerebral embolism, cerebral hemorrhage (bleeding), atherosclerosis, meningitis, diabetes mellitus, viral encephalitis, brain abscess, hypertension, motor neuron disease, ischemic attacks, Alzheimer's disease, birth injury, whichever may be induced by physical, chemical or psychic agents or forces.

It is well known fact unlike other cells of the body the brain cells survive life long except might not be damaged by pathologically or traumatically.

Clinical Features – The brain cell injury features as following conditions and symptoms, those depends on the area of the brain where and how much has effected -

- Paralyzed part or parts of the body – Hemiplegia, Paraplegia, Facial Palsy etc.
- Loss of sense (numbness) in a part or parts of the body.
- Inability to control fine movements.
- Audio and visual difficulties.
- Speech difficulty.
- Loss of consciousness or alteration.
- Loss of memory with confusion or drowsiness.
- Lack of concentration.
- Slow processing of new information.
- Inability to learning new tasks.
- Lack of attention.
- Difficulty to perform complex mental activities.
- Lack of self confidence.
- Decrease random excess memory power.
- Loss of intellect and thinking power.

What is the prognosis

Most people with minor brain cell injury completely recovers within a few days. But serious injury may be developed as permanent disability, paralysis, coma, persistent losses of consciousness or death.

What might be done

In case of serious injury patient should be hospitalized and start life saving initial treatment. Then try to find out reason of brain cell injury by using pathology, FMRI, SPECT, PET scan, CT Scan, MRI, Carotid Doppler Scan, Colour-enhanced X-Ray, cerebral angiography. After diagnosis, plan for curative treatment through conservative medicines like for cerebral thrombosis or embolism give thrombolite drugs, for prevention of clotting give blood clotting preventive drugs, for hemorrhage bleeding give antihypertensive drugs, for arteries inflammation may be given carito-steroids and so on. Then switch up for rehabilitation through physiotherapy, speech therapy or occupational therapy.

Aim of Psychoplasty Treatment

- Rewiring of the brain cells by enforcing hypnotic suggestions.
- Utilizing full scope of brain cell plasticity.
- To enhance the self confidence of the patient.
- To grow positivity of the patient.
- To use unconscious mind of the patient for clinical purpose.
- To enhance the neurotransmission in the brain.

- To motivate the patient come out from his mental complexes, fears and apathy.
- To enhance and speed up recovery process.

Motivation and Enforcement for Brain Cell Plasticity

When we start learning, brain develops easier network of neurons to perform learning, it is natural phenomenon of brain is called plasticity of neurons. Several times we take advantage of brain cell plasticity and it runs life long. While we start learning and practice consciously with the recurrent exercises the brain cells buildup the shortest, easiest and effective network to perform best quality of output. The active exercises motivate plasticity but any type of enforcement or compelling is obviously not possible at normal state of consciousness.

A paralysed patient, who consciously wants to move his hand and wants to overcome from disability, he could try to do whatsoever was possible. In spite of all possible efforts he could not move his hand, because he remains conscious.

But under hypnotic trance, the same patient has suggested to move his hand; he tried and moved it well. In the previous session, conscious mind was active and disagreed to allow the plasticity. Conscious is not suggestible due to its nature of reasoning, thinking, experiencing. But in the trance, subconscious becomes ready to suggestive inputs. Consequently, the brain builds-up a new network of cells to perform suggested movements with help of intact proxy healthy cells. In this way newly buildup network enhances brain function and patient regains movement.

This scope is limited only for those patients who experience the hypnotic trance, as well as up to described alpha-theta frequency range.

Imaging Techniques to Observe the Brain Cell Plasticity

A number of techniques are available to investigate the brain cell plasticity and improvement as signified within the brain. That may be easily verified that cited cells network and function is running intact or has been broken-down. Simply, we can use-

1. Positron Emission Tomography (PET)
2. Single Photon Emission Computerized Tomography (SPECT)
3. Functional Magnetic Resonance Imaging (fMRI)
4. Single-cell Recording
5. Magnetic Resonance Imaging (MRI)
6. Computerized Tomography (CT) Scan
7. Electro-encephalography (EEG)
8. Angiography of the brain
9. Electro-myographic Biofeedback (EMGB)

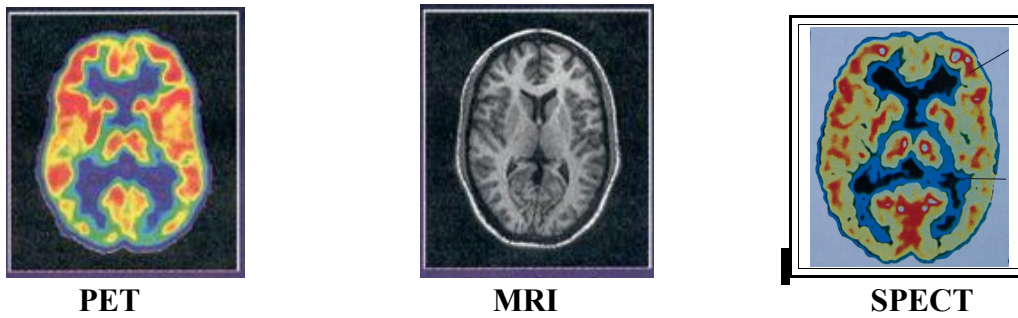


Fig. 10: Imaging Techniques to Observe the Brain Cell Plasticity

The Scope and Advantage of the Brain Cell Plasticity

While brain interacts with any new learning aptitude it opt a new network of neurons. Brain's ability to change of this type of rewiring called – Plasticity of brain, neuro-plasticity, cortical plasticity or cortical remapping. This is a natural phenomenon of brain. It occurs throughout life deliberately.

According to Canadian psychiatrist **Norman Doidge** – “Neuro-plasticity is one of the most extraordinary discoveries of the twentieth century”. The brain plasticity has been signified a great importance in the field of learning and extend also a scope in the field of neuro-rehabilitation, recovery of brain cell damage.

After brain injury or stroke, brain damage reported partially. Where plasticity constructs rewiring of new network of healthy neurons to enhance neurotransmission for maintaining the muscles tone as well as prominent. It happen start through synaptic firing in the phenomenon of plasticity by induction of thoughts and desires. When brain receives enough strong input desires, it rewires a strong alternative network of healthy neurons to take place of damage one, then rapid recovery followed well.

The Glial cells contains more than ten times of neurons. Those are supportive, nutrients and oxygen supplier. They take part actively in the process of plasticity. Glial cell repairs myelin sheath, axon and dendrite parts of the damaged neurons. They destroy pathogens, remove dead neurons and modulate neurotransmission in the brain. The Glial cells have also signified as manager of communications in the synaptic gaps.

The brain may compensate as well as recover for damage by forming new connective intact network between healthy neurons with the help of Glial cells under enough excitory induction, motivation or enforcement, it should be introduced by either physical exercises or imposed in the brain by using clinical hypnosis. Hypnotic induction gives more prominent and rapid result in comparison of exercise induced motivation.

The modern researches and clinical data with neuro-plasticity challenges the old established idea that the brain functions are fixed in certain locations as described. According to new findings the old ideas and maps are needed to be reviewed and modified.

The plasticity depends on person to person differences. Some persons are of hard wired brain and some are of soft wired and also some are of unwired. The hard wired brain is less plastic than soft. Soft wired brains signify vital scope of learning and modifications then hard wired. Hard wired can do same monotonic work life-long but soft wired will opt tendency to change and adopt new skills and works. Persons who are of unwired brain they have least scope of plasticity, they are likely mentally retarded and out of learning criteria. Therefore soft wired brain is more useful than other once.

The brain retains throughout life capacity of plasticity but it appears greatest on young age then after decreases along with aging up oldest. Neonatal and children grow gradual with this capacity. Sometimes it depends on the mental, physical condition of the person also.

Hazards and Obstacles – The clinical hypnosis is quite safe and risk free tool. But reluctant and apathetic minded patients are mostly observed very difficult while hypnotize them. Reluctance, carelessness, poor understanding of the patient may create difficulty. On the contrary patients who are well determined, positive, optimistic and suggestive get immediate remarkable results, because of their ability to undergo into the deep trance and follow the suggestions properly.

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Chapter : IV

Elements of Psychoplasty

The components of treatment -

The condition of paralysis is generally caused by brain cell injury such as CVA-stroke, head trauma, spinal injury or any pathogenesis. When paralysis has diagnosed incurable and patient not seem any further hope of recovery, he is running year by year at unchanged stable condition, despite of this the Psychoplasty technique reports significant recovery, beyond practicing medicines and therapies. It is quite safe, free from side effects, gentle and easy to treat. The psychoplasty technique is composed with seven elements; those are individually tested, recognized and well known, those are given below-.

- Suggestions during Scale-down Frequency
- Electrical Stimulations (NMS, TENS, IFT, Mentamove)
- Medicines-
 1. Anabolic Agents (Nandrolone)
 2. Neurotonics (Mecobalamin)
 3. Nootropics or Cerebral Activators (Piracetam)
- Physical Exercises
- Skill Training (Mental and Physical)
- Electrotherapy (Shortwave Diathermy, Ultrasound Therapy, Laser Treatment)
- Counseling to the Patient and Family Members

Details of treatment-

Suggestions during Scale-down Frequency-

The modern studies of human brain revealed that our brain works under some known measurable frequencies. The frequency range corresponds to certain kinds of activities being performed by the person. The brain frequencies are generally leveled on four slabs as beta, alpha, theta and delta. The beta frequency is normal conscious state, it is upward 14 cps. Specifically apart the range of alpha and theta in between 12 to 7 cps is called scale-down frequency range. While scale-down frequency runs, the brain becomes quite positive and promptly suggestible. At this range, brain provides a great advantage of psyche inducted brain cell plasticity. The scale-down frequency range is an important phase to input such verbal suggestions those induct psychoplasty.

The key note strategy of this treatment is to change the brain setup of patient, whereas the inner mind power has to be acquired and friendly took under use without interference of conscious mind patterns. A technique to change the brain setup is the prime element of this treatment and other six elements are supportive and secondary.

Electrical Stimulation –

The affected nerves and muscles are stimulated by physiotherapy instruments- Neuro-muscular Stimulator, TENS, IFT, Mentamove. The electrical stimulations facilitate

neurotransmission through therapeutic electrical current when placing electrodes on the affected sites. It is helpful to maintain peripheral neuro-muscular facilitation. The electrical stimulations are like external stimuli signals that induct and promote brain cell plasticity.



Fig. 11: Electrical Stimulator

Medicines -

Anabolic Agents (Nandrolone) –

The anabolic agents (Nandrolone) increases rate of constructive metabolism, the process by which an organism converts simpler compound in to living, organized substances in the body. It is recommended in injection form in an ideal dose, if physical condition of the patient allows for the same. The anabolic steroid overcome chronic debility of the patient, after administration of the dose patient feels strength in his body, it helps to grow mental confidence and promotes the process of brain cell plasticity.

Although it has clinically been proved that there is no any role of anabolic agents in recovery of paralysis but it creates euphoria and supports constructive metabolism that helps to establish the effect of scale-down frequency suggestions during treatment. If patient reports the tendency of negativity along with acute depression then he will not cooperate properly with the treatment procedure. At such moment the administration of anabolic agents can boost-up the mental power and confidence of patient up to the expected extent, so that patient would easily excess his cooperation with the therapy.

Neurotonics (Mecobalamin) –

The mecobalamin is the neurologically active form of vitamin B-12. Studies revealed that mecobalamin is effective in neuron repairing and neuron rejuvenator in the peripheral area. It is useful in case of peripheral neuropathy, diabetic neuropathy, alcoholic neuropathy and drug induced neuropathy. Injection form of mecobalamin under ideal dose promotes nerve regeneration.

Nootropics or Cerebral Activators (Piracetam) -

Nootropics or cerebral activators claims to improve the cerebral functioning, protects cerebral cortex against hypoxia (an abnormally decrease supply or concentration of oxygen) and cerebro-cortical insufficiency. It is indicated to aging disorders such reduced cerebral functioning- evidence by memory loss, intellectual decay, character disorders, psychomotor disorders.

Physical Exercises –

The physical exercises should be prescribed and updated time to time as per physical condition and observing the improvement of patient. These are helpful to strengthen the neuromuscular system, maintain mobility of joints, gaining full range of motion, facilitation of blood supply, vasodilatation, softening of muscles and further progression. It helps to promote brain cell plasticity.

Skill Training (Mental and Physical)-

The psychoplasty gives rapid improvement in the physical power of body. But due to unused dystrophy and lack of confidence patient does not move. So that, at this moment mental and physical skill training is require to maintain the progress.

Electrotherapy - (Shortwave Diathermy, Ultrasound Therapy, Laser Treatment)

Shortwave Diathermy (SWD), Ultrasound Therapy and Laser treatment is useful to maintain flexibility of muscles, vasodilatation and manipulation of joint's movement. It reduces pain, rigidity and constriction of affected body sites.

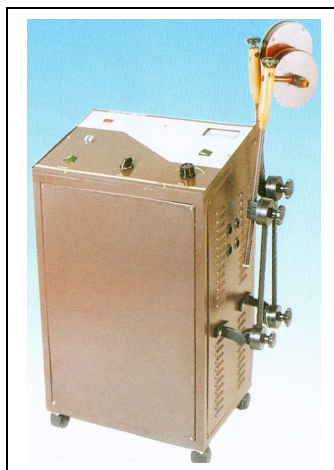


Fig. 12: Electrical Stimulator

Counseling to the Patient and Family Members -

The counseling should be given to boost-up the self-confidence, enhance the positive attitude, co-ordination and understanding with the therapist and therapy system.



Chapter : V

The History of Psychoplasty

The world-wide practice of hypnotherapy so far has been for psychological disorders.

At first, I learned and practiced hypnosis merely to entertain peoples; it began purely as social entertainment of my friends and relatives. When I used to hypnotise some persons and put post-hypnotic suggestions during hypnotic trance that “now you feel that you are now unable to move your left arm and left leg”, I would find that even after regaining consciousness, they would not to move his limbs like paralysed.

I observed this very seriously and carefully, along with everybody else were surprised about it. In the course of my practice, I developed an idea that if a normal person may become paralysed through hypnotical suggestions, then why may not a paralysed person regain his normal movements in a similar way?



Fig13: Shivmangal Prasad

Once in my native village there was a 65 years old person, named Shivmangal Prasad. I was closely related to him. This gentleman had suffered from thrice cerebro-vascular attacks (CVA-Stroke) and was paralysed thoroughly the right side. Thus he was unable to move and feel sense in his right limbs from last three years. He had been handicapped and was unable to stand and walk. I felt bad about it, but did not know how to help him.

Then one night I had a dream that I am standing in front of him, I raised my right hand towards him. Then from my palm divine rays began to flow in the direction of that man. After this, surprisingly he got cured and standup immediately. When I woke up, the dream was very clear in my current of memory, I tried to understand the meaning of the dream. I felt that perhaps, I could help/heal that person through hypnosis.

Therefore, according to inspiration received from dream I decided to hypnotize that gentleman and tried to give suggestions which encouraged and enabled him to regain sense and movement in his paralysed limbs, surprisingly. He got improved up to a great extent. This event manifest the beginning of my practice. During the course, I could discoverer a significant grand scope of Hypnosis in the field of Neurology, especially to treat the paralysed patients, even they might have diagnosed incurable.

Therefore, I started applying psychoplsty technique to treat the patients suffering from various types of paralysis and neuro-muscular and neuro-psychological disorders.

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Chapter : VI

MIND AND PHYSIOLOGY (The Psycho-physiology)

The mind and brain often are used as synonym of each other. But the brain is an anatomical structure and the mind is functionality of brain. We can recognize the functionality of brain as mind. While the mind does not have itself a physical existence then conscious and subconscious mind also may not be physical. Therefore, it was difficult to explain the physiology of mind along with its conscious and subconscious levels.

According to the level of brain frequencies we can classify the consciousness and explain the physiology of conscious and subconscious mind. Whereas subconscious mind is lower assortment of brain frequencies and conscious mind is its higher assortment.

The Psycho- physiology is a scientific study of interaction and interrelation of the psychic (mind) and physiological facts. The mind is deeply interconnected with our physiology. It works as an emotional stimuli and that is effectively able to produce relevant physiological features. Some emotional and physiological stimuli along with relevant physiological features are given below for reference-

Sn.	Features	Emotional Stimuli	Physiological Stimulant
1	Tearing	Pain, regret, helplessness, happy, grief.	Tearing gas, straw or sand particle in the eye, chili powder, strong chemicals.
2	Vomiting	Looking ugly materials, bad test, feeling of restlessness or tension.	Odor smell, intake of over salted water, intake of pungent, rotten or poisonous food.
3	Semen fall	Experiencing erotic dreams, sexual excitement, looking blue films or sex scenes, thinking about sex, reading sex stories.	Touch of body, physical involvement in sex, intake of erotic drugs.
4	Breathing-up	Excitement, sensual involvement, fear, irritation, feeling restlessness, discomfort, over conscious, tension.	Physical exercise, intake of stimulants, involvement in the higher intellectual activities,.
5	Breathing-down	Deep meditation, trance, unconscious state, depression, lethargy.	Exhausted energy, debility, deficiency of protein, minerals or water, depressant drugs.
6	Perspiration (sweating)	Over excitement, fear, shame, disdain, uneasy, irritation, sexual involvement, restlessness, tension, discomfort, anxious, upset mind.	Physical exercise, high temperature, high blood pressure.

The physiological features are intended on the one hand by emotional stimuli and the other hand as same by the relevant physical intakes or activities.

There is a deep connection between the mind and the physiology. The one influences the other. The existing thoughts and ideas have certain bearings on the body. Let us take an example to verify this fact. Let us take the case of vomiting. By taking water with common salt one develops tendency to vomit. The vomiting is caused because of the input of salt into the body. Someone who does not eat meat, if taken to the meat market, he would develop vomiting tendency because of the compulsion of the physiology. The inbuilt distaste or hatred for meat compels one to vomit. Vomiting, therefore, is because of a common mechanism. In both the cases, certain chemical reactions take place within the body resulting in vomiting, one triggered off by external input and the other is mental psychological. In the later, saliva gland produces salty water to lead to vomiting. Thus it is evident that there exists dialectical relationship between mind and physiology.

Let us also take another example. Suppose someone has eaten a curry in a hotel. He left the hotel. He comes back to the hotel after two years. The owner of the hotel could recognise him and enquired - 'Are you all right?'

The person then is surprised by such a question from the hotel owner, as he was hale and hearty. He asked - "Why to you raise such a question ? Am I not fine ?"

The hotel owner then replies : "No, no, you are fine. But two years before you visited our hotel and dined. The persons who took the curry that you had also take, died. It was discovered that a snake got cooked up in the curry and the curry became poisonous and all who took the curry died. Thank god, nothing did happen to you". As soon as the owner stops the story, the person visiting the hotel after two years, suddenly falls on the floor and dies.

There was no physiologically justified cause for his death. But psychologically he felt that he had taken poison. This thought or perception affects the physiology to produce poison internally, through psychogenic action leading to his death. Before his conscious mind could logically think and rectify the act of his eating the curry two years before, the physiological arousal by the unconscious resulted in his death.

Let us take another example to evidence the connection between mind and physiology. The patient is taken to hypnotic trance. A piece of stone is placed on his palm. But the therapist would tell the patient that he has placed a burning charcoal. The patient would immediately throw off his hand as his mind has stored up this piece of information that the fire causes injury and would leading to rise of a boil.

In actuality, there is no burning charcoal, but a stone. Then it is observed that because of the information given to the patient his mind sends recovery fluid to the palm to recover the burn. Because of the deposit of this recovery fluid, the portion of the palm where the stone was placed, starts swelling like a boil, even in the absence of burning charcoal. It is, therefore, understandably clear that the physiology gets activated by the pre-existing thought.

In dream also this link between mind and physiology can be known. The semen-fall is needed for the physiology, particularly when the semen has been stored to fullness and is

overflowing. The physiology conditions the falls. The semen-fall is possible even because of the mental need of the patient. The patient would have a dream in which he would experience the amorous atmosphere. Because of the amorous atmosphere caused in the dream, the patient would have semen-fall. Thus there exists a complementary relationship between mind and physiology.

The physiology is governed by the central nervous system. Voluntary activities take place because of the voluntary nervous system. But there are some autonomic activities like heart beats, intestinal activities lung's rhythms etc. over which one does not have any control by the conscious mind. Thoughts influence the activities of the autonomic nervous system. For example, anger because of anger, heartbeats would increase, blood pressure would run high, electrical frequency of the brain also would increase, one would also sweat.

With the help of hypnosis, one can produce desires and thoughts in the patient. The therapist, therefore, after producing thoughts can motivate the physiology of the patient as per clinical requirement. This would obviously make the therapy effective and purposeful.

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Chapter : VII

The History of Clinical Hypnosis

Animal and Bird Hypnosis

At beginning the hypnosis was used in the animal and birds hypnotism. The popular use observed in the field of poultry forms, where the formers were calmed the hens sat on the eggs by tying legs and drawing a line with chalk in front of her beaks. At the middle of 1700, the some scientist and biologist like Preyer, Verworn, Emile Mesmet, B. Danilewsky studied physiology of hens reflexes under phenomenon of such temporary paralysis.

Father Gassner

Catholic priest Father Gassner was practicing faith healing in Switzerland in 1770. At that time, mental illness was believed as a witchcraft and demon possession. Father Gassner used to touch with a diamond studded cross on forehead of patients and they within shortly dropped in to the trance, as sleep like state. Persons believed he was God's representative on earth, he cured or as well as relieved numerous patients. **Franz Anton Mesmer** later became curious about the stories of Father Gassner's treatment process.

Franz Anton Mesmer (1734-1815)

The origin of clinical hypnosis often takes us back to Anton Mesmer who was born on 23 May 1734 in Vienna of Austria. From the very early childhood he had been genius. He was attracted deeply by the occult science and human/animal magnetism. He had also developed deep interest in astrology. Later on, after choosing to become a physician by profession, he began to study more closely about the effect of magnets on human body. He developed the theory of Animal magnetism. When he touched his fingertips from the forehead to the toe of the patient, there was a considerable effect on the patient, subsequently leading to the cure of pain or disease or ailment. He treated innumerable patients with unexpected success. When he publicly demonstrated and announced the success of his novel method of treatment or therapy. As a result, other professionals, without realizing the importance of the method, became jealous of Mesmer and collectively conspired against him and name this therapy as superstitious and sorceress.

They propagated that Mesmer's mode of treatment is anti-religious. Mesmer extradited by Austrian government. As a punishment imposed on Mesmer, the government ordered him to leave the country. Finding no alternative, being helpless, Dr. Mesmer left for France.

In Paris he came across a wealthy woman. She came to the rescue of Dr. Mesmer and extended all kinds of support to set up a hospital that was extremely scientific. The hospital had a large room which was made aromatic, dimly-lighted, cool, pleasant and comfortable by

a standard. The patients felt extremely relaxed and finally got cured of their diseases by the treatment of Mesmer.

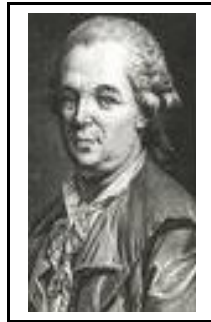


Fig. 14: Dr. Anton Mesmer

It is also known that the wise men from Louis XVI's, royal court, the rich merchants and distinguished persons from abroad became his patients and got cured. At that time, chloroform was not in vogue. Mesmer used his therapy in such a manner that even without chloroform, the patients could be operated. The success of Mesmer revolutionised treatment and brought him acclaim. During his life time this therapy became popularized world wide. He also trained many illustrious and distinguished doctors. Mesmer's mode of treatment came to be known as Mesmerism. On March 5, 1815, Mesmer passed away.



Fig. 15: Dr. Anton Mesmer at work

Armand, Marquis de Puysegur (1757-1828)

Mesmer's disciple Marquis de Puysegur, improved upon Mesmer's method, he proved that the interaction between patient and therapist could be allowed to experience trance. He explained about the phenomenon of "waking trance" that a patient could talk and perform activities while in trance.

Dr. James Braid (1795–1860)

The Scottish physician and surgeon, in 1840 advocated that mesmerism was a nervous sleep in which the person remains active and acts in conformity with suggestions. In this process, Dr. Braid further argued that mesmerism was a deliberate attempt to generate sleep. In later years, in 1843, Braid's method came to be known as hypnosis. Dr. Braid called it hypnosis, *hypnos* is a Greek word used for sleep. He said that it is a particular state of sleep that may be created by eye gazing practices.

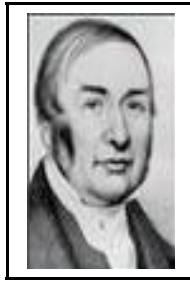


Fig. 16: Dr. James Braid

Dr. James Braid showed that when an individual constantly gazes at a particular point, his/her mind overcomes the burdens of the problems posited in the conscious and the same time he/she can enter into the state of hypnotic trance as per suggestion of therapist. Braid was impressed with second 'sense' when *Lafontaine* presented somnambulism in a mesmerised girl. Braid tested her by forcing a pin but she felt no discomfort. James Braid's work 'Neurypnology, or the Rationale of Nervous Sleep', published in 1843. He rejected the "pass" conception established by the Anton Mesmer and proved that without pass the trance may be created. Dr. Braid called it hypnosis, *hypnos* is a Greek word used for sleep. He said that it is a particular state of sleep that may be created by eye gazing practices.

James Esdaile. (1808- 1859)

He was a Scottish surgeon. In 1845, he appointed in India at Hooghly Hospital and successfully performed mesmeric analgesia during numerous surgical operations (the first recorded mesmeric analgesic operation had done by Dr. Topham and Squire Ward in the amputation of leg) because, at that time, chloroform was not invented. One year after leaving India, in 1852, he published his work titled 'The Introduction of mesmerism as an Anaesthetic and Curative Agent into the Hospitals of India'.

THE NANCY SCHOOL

**Auguste Ambrose Liebeault (1823-1904) and
Hippolyte Bernheim (1840-1919)**

They had established a school, named Nancy School of Hypnosis to train the physicians and medical professionals in Hypnotherapy.

Jean-Martin Charcot (1825–1893)

He considered that the hypnotism is a special physiological state. The positive result of hypnotherapy in case of psychic imbalance had proved among the physician, doctors. Professor Jean-Martin Charcot was a French neurologist and his friend **Hippolyte-Marie Bernheim (1840–1919)** began to train the medicine professionals. They both believed hypnosis is to be a physiological state of heightened suggestibility. Bernheim's book named 'De la Suggestion' published in 1884 and 'La Therapeutic Suggestive' in 1886.

Professor Charcot made use of hypnosis to patients suffering from hysteria. He argued hypnosis is a special physiological state. He further argued that because of the complexities of mind, a patient goes hysteric. By driving out or minimizing this level of complexity of the mind, patient can be brought to normalcy.

Sigmund Freud (1856–1939)

Freud was a physician, a neurologist, a hypnotherapist, a student of Professor Jean-Martin Charcot and Hippolyte-Marie Bernheim. He was very much fascinated by his friend **Dr. Breuer** (1842-1925) while he had successfully treated a complicated hysteric patient “Anna O.” through hypnosis. *Studies on Hysteria* (German: *Studien über Hysterie*) was a book published in 1895 by Sigmund Freud and Josef Breuer. It contained a number of case studies, included one of the most famous case- Anna O (her real name was Bertha Pappenheim). I cite here that story from *Synopsis of Psychiatry* (H I Kaplan, B J Sadock– 7th edition: BI Waverly Pvt. Ltd., New Delhi Page-240).

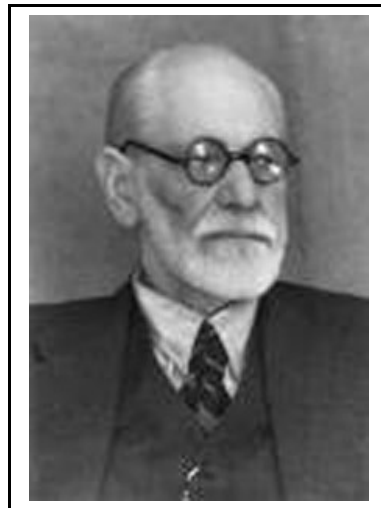


Fig. 17: Sigmund Freud

“Anna O” was a 21 year old young beautiful, intelligent woman she presented a plethora of hysterical symptoms in association with her father’s fatal illness. The symptoms included serious disturbances of sight and speech, inability to ingest food, paralysis of three extremities with contractures and anesthetics, and a nervous cough. She also manifested two distinct states of consciousness: one, a relatively normal young woman; the other, a troublesome and naughty child. Dr. Breuer observed that she shifts between two discrete personalities seem to be induced by some form of autohypnosis and he was able to bring about the transition from one personality to the other by placing Anna O in a hypnotic state.

Dr. Josef Breuer knew that Anna had been very attached to her father and had nursed him along side her mother while he was on the deathbed. During her altered state of consciousness (called hypnoid state), Anna could recall vivid fantasies and powerful feeling she had experienced as her father lay dying. Dr. Breuer was astonished to note that his patient’s recollection of the affect-laden circumstance during while her symptoms first appeared led those symptoms to disappear. Anna dubbed the process the talking “talking cure.” She was so taken by it that she continued to discuss one symptom after another. For

example, she remembered sitting at her father's side while her mother was absent and having a fantasy or daydream about a snake. In her vision the snake was about to bite her father. She tried to ward off the snake, but her arms had gone to sleep as a result of having been draped over the back of her chair. The paralysis remained until she was able to recall the scene under hypnosis, whereupon she regained use of her arm.

Dr. Breuer became enchanted with his extraordinary patient. He spent so much time with her that his wife grew jealous and resentful. Frightened by the sexual connotations of his wife's complaints, he abruptly terminated the treatment of Anna. Several hours after that termination, he was called to Anna's bedside in the midst of crisis. He found her agitated and in the throes of hysterical childbirth. Although he had been unaware of any sexual feelings toward him, the phantom pregnancy (*pseudocyesis*) reflected Anna's intense erotic longings for Dr. Breuer. He claimed his patient down by inducing a hypnotic trance, and, in a state of extreme agitation, he arranged for an immediate departure to Venice with his wife for a second honeymoon.



Fig. 18: Anna O

Freud's era was a golden period of hypnotherapy. Freud learned hypnosis by Dr. Chacot and Dr. Marie Bernheim and was fascinated with Dr. Breuer. He decided to use hypnosis as a routine part of his clinical practice since 1887. During the course of his practice, he developed the following two therapeutic methods-

1. Abreaction
2. Free association

Freud experienced that the patients would relive and verbalize their traumatic events while they have undergone hypnosis. Freud helped patients to recover past memories. He advocated that repressed feelings and emotions connected with the past traumatic events should be recovered, because actual solutions are contained therein. He used the *abreaction* method for this. His *free association* method is like a free conversation between the patient and the

physician; where patients are invited to disclose whatsoever came into his mind without censoring thoughts.

Freud believed that all the diseases are not physical, but psychic diseases are also to be recognized. Using hypnosis, he began to unravel the mysteries of the conscious, subconscious (preconscious) and unconscious mind. He could also study the movement of the conscious and the subconscious and was able to measure their dimensions. Freud began also to interpret and analyse dreams, he declare that the interpretation of dreams is a royal road to understand the unconscious.

It was Freud who gave the foundation stone to the modern psychotherapy and psychoanalysis. He disclosed that the psychic diseases are mostly caused by repression and suppression of desires.

ERA OF PSYCHOTHERAPY-

William James- He was a psychologist, his book named 'Principles of Psychology' published in 1890, where he described details of hypnotherapy.

P. C. Young: Young had done a systematic experimental work on Hypnosis in his doctoral research, submitted at Harvard in 1923, in the department of psychology.

Clark Hull: He was an experimental and learning psychologist, he submitted his research paper about his extensive experiments in Hypnosis, initiated at the University of Wisconsin in 1920 and at Yale in 1930.

Milton Erickson: He was a psychiatrist. He used clinical hypnosis and created wide interest in Hypnosis among psychotherapists.

RECOGNITION at TODAY

- In 1955, the British Medical Association (BMA) recognized hypnotherapy.
- This was followed in 1958 by the American Psychological Association consequently in 1959, Hypnosis was granted "official status" of an "adjunctive tool" in medicine. As such.
- In 1961, the AMA recommended that medical professionals receive 144 hours of training in hypnotherapy.

In the U.S., U.K., France and other countries the hypnotherapy has achieved its official recognition and distinction. Now the days, hypnotherapy has entered the mainstream of psychiatry (See- *Synopsis of Psychiatry* by H I Kaplan, B J Sadock— 7th edition: BI Waverly Pvt. Ltd., New Delhi Page-778).

In the internet also, one comes across many web sites devoted to hypnotherapy and hypnosis.

Chapter : VIII

HYPNOSIS: An Introduction

What is Hypnosis?

The states of the mind are three fold: the first is universally known as the conscious, the second as subconscious and the third as unconscious.

Hypnosis is a created state in which the conscious state of brain becomes silent and inactive, and the subconscious gets activated by the suggestions of the hypno-therapist.

It is, in other words, like a state of trance, where the subconscious can be used as per the requirement of an individual.

It is a verified fact that about 5 to 7% of the brain enjoys the privileged state of being conscious; and about 93 to 95% of the brain's space is attributed to the subconscious and the unconscious. Even in the case of the most intelligent person, this 7% of the volume of the brain-space remains active or conscious so as to think and act rationally, aided by reason.

Hypnosis within a therapeutic setting tries to make use of the other 93 to 95% of the brain-space so as to traits posited in the subconscious and the unconscious. Hypnosis, therefore, brings to surface the recondite layers of the brain and lends access to these layers so as to read and investigate the causes of the imbalance, if any. When one is transported a hypnotic trance, his/her conscious state gets automatically bypassed. The subconscious assumes the role of the conscious, without bringing in any fissures or distortions or ruptures to whatever remains posited or generated in the existing state of the conscious.

According to *Synopsis of Psychiatry* (H I Kaplan, B J Sadock– 7th edition: BI Waverly Pvt. Ltd., New Delhi Page-857) The Hypnosis is a complex mental phenomenon that has been defined a stage of heightened focal concentration and receptivity of the suggestions of another person. It has also been called an altered state of consciousness, a dissociated state, and a stage of repression. However, there is no known Psycho-physiological basis for hypnosis as there is for sleep, in which characteristic electroencephalogram (EEG) changes appear.

Hypnosis, a Common phenomenon

There are situations in our everyday life when the subconscious gets automatically activated and replaces the conscious.

For example, suppose you have gone to a grocer's shop to buy tooth-paste. The moment you have a look at different brands of paste, you are reminded of T.V. advertisement of paste, say for example of colgate. Your unconscious response to the advertisement gets transformed into a conscious activity and you ask for a colgate paste.

Similarly, when a house is on fire, and the oldest man in the house who has become paralysed for years, becomes conscious of the fire and begins to walk because of the survival instinct He comes out of the house. But the moment person become surprised at the old man's miraculous recovery and they shout, "Oh, this disable can walk," the old man suddenly falls down and walks no more. The drive of the unconscious made him walk upto a punt. But

because others made him conscious once again that he was paralysed, the active unconscious takes a back seat and the conscious prevails on him and he becomes paralysed once again.

These are hypnotic-like experiences which we often come across in our daily life. I cite here from *Synopsis of Psychiatry* (H I Kaplan, B J Sadock– 7th edition: BI Waverly Pvt. Ltd., New Delhi Page-857)

Naturally Occurring Hypnotic-like Experiences- the percentage of persons indicating that they have had such experiences-

Have you ever been in a room full of people, ostensibly taking part in the group yet mentally being far away from it ?

90%

Have you every been unsure whether you did something or just thought about having to do it (e.g., not knowing whether you either mailed a certain letter or just thought about mailing it)?

87%

Have you ever been able to block out sounds from your mind so that they were no longer important to you ? Or so that they seemed very far away ? Or so that you no longer understood them ? Or so that you did not hear them at all ?

87%

Have you ever been so lost in thought that you did not understand what people said to you, even when they were talking directly to you and even when you nodded token agreement ?

84%

Have you ever been staring off into space, actually thinking of nothing and hardly been aware of the passage of time ?

81%

Have you ever had the experience of recollecting a past experience in you life with such clarity and vitality that it was almost like living it again ? Or so that it actually seemed identical with living it again ?

78%

Have you ever been able to shut out your surroundings from your mind by concentrating very hard on something else ?

77%

Have you ever had the experience of reading a novel (or watching a play) and while doing so, actually forget yourself, your surroundings and live the story with such great reality and vividness that it became temporarily almost reality for you ? Or actually seemed to become reality for you ?

75%

Have you ever been lulled into groggy state or put to sleep by a lecture or a concert, even though you were not otherwise fatigued or tired ?

73%

Have you ever wandered off in your own thoughts while doing a routine task so that you actually forgot you were doing the task and then found, a few minutes later, that you had completed it without even being aware that you were doing it ?

70%

Neuro Linguistic Programming (NLP)

Even if the NLP's origin dates back to the 1970's, when Dr. John Grinder (who studied mathematics and computing) and Richard Bandler, (a renowned linguist) worked together to model human excellence by splintering behaviour and language into its basic components and examining what really made it function, it has not achieved the kind of popularity that it duly deserves.

Today, slowly but surely, NLP's importance has been realized in business and management studies, teaching, sports, and therapy. It has now been acknowledged and accepted as a science that studies how the brain codes learning and experience. This coding influences and monitors all forms of communication and behaviour. NLP, therefore, offers a convenient and reliable model of communication that tries to identify and use diverse patterns of thought that affect an individual's behaviour. Once this identification is done, it becomes easy or convenient to identify the problems, disorientation of any sort in an individual. Then it becomes easy to improve the quality of behaviour and of thought.

NLP accelerates change in behaviour and thought. It would no be wrong to say that NLP has improved upon the time consuming, languish psychotherapy.

Nature and Scope of Hypnotherapy

Access to the unconscious can cure multiple diseases, ailments. Hypnotherapy tries to have access to the subconscious which shelters emotions, imagination, memory, habits, intuition and leads to the superconscious. It successfully regulates our body functions. It is the essence or the heart of our experiencing ourselves as ourselves and the world, besides alluding to the relationship that the self perpetuates with the world. Hypnotherapy also tries to transform the subconscious and find a redressal for it, depending upon multiple possibilities. Hypnotherapist, therefore, can induce and intensify or deepen hypnosis in an individual as per the clinical requirement.

The scope of hypnotherapy is admittedly and admirably vast. With the help of such therapy, an individual's ability to perform can be increased. It can generate confidence; it can help in improving health; it can ascertain relationships and can amount to establishing a more enduring relationship. It can intensify and magnify concentration. It can help one to recall or recount the past. This is also known as hypnotic regression.

With the help of hypnosis one can overcome the negative impacts often associated with habits. It helps one to control pain, chronic or otherwise. It serves to mitigate fears and phobias. It also can help one to reduce one's stress. It can promote one's self-expression.

Of late it has been found that his therapeutic method can do immense good to neurology. It can cure neurological diseases such as paralysis to which we are often incurable.

It can also be useful to the sports persons, management personnel, media persons who remain extremely engaged and breathlessly busy and how crave for relaxation or relaxed moments hackneyed and pressing demands of the daily routine.

Normally hypnosis is used in the field of psychiatry. The use of hypnosis in neurology, of course, is my personal contribution.

A salient feature of the use and scope of Hypnosis and Hypnotherapy has given below-

1. Analgesic use
2. Anaesthetic use
3. Muscle or Muscles group relaxant
4. Muscles tone enhancive
5. Illusive perceptions – Vision, taste, sense etc.
6. Control over autonomic nervous system – breathing, heart rate, secretions
7. Concentration enhancive
8. Self confidence enhancive
9. Regression – Age Regression/Past life Regression
10. Extraordinary sense of perception (ESP) – Thought reading, Insight, Clairvoyance
11. Educational Guidance
12. Embryonic learning
13. Telepathy
14. Painless delivery
15. Mind wash and mind culture
16. Promotion of arts and visionary outputs
17. Sports medicine
18. Hypnotical investigation
19. Control over metabolic rate
20. Brain cell plasticity inductive
21. Mental programming by past hypnotic suggestions
22. Hypnotical diagnosis
23. Personality development
24. Creation of Samadhi
25. Creation of deep trance
26. Psychiatry
27. Extension of life span
28. Induction and enforcement of brain cell plasticity
29. Time distortion
30. Creation of catalepsy

States of Hypnotic Trance

Normally there are **three** states of hypnotic trance : Lethargic state, cataleptic state, and somnambulistic state.

- **Lethargic State** : This is the first state of hypnotic trance in which one feels the effect on eyes and eyelids. To be more specific, one feels heaviness in the eyes and one tends to sleep. Body becomes dull, as under the spell of intoxication. Heart beats go slow. Breathing also becomes slow.
- **Cataleptic State** : This second state is deeper state than the first. One goes to deep slumber in the state. The neuro-muscular system gets controlled by the directions or suggestions of the therapist. According to the instructions or directions of the therapist, the sensory and motor nerves begin to respond. The sense oriented consciousness also gets affected in accordance with the directions of the therapist, who also can create a kind of delusion, if he likes so. Say for example, a patient feels cold. But the therapist can tell him/her that

it is not so and hence one can feel relaxed. The subconscious mind is activated or aroused and begins to function as per the directions of the therapist.

- **Somnambulistic State** : This is deepest and intense state of hypnosis. The mind's unconscious becomes active. Extraordinary sense of perception (ESP) gets developed. One becomes inward-looking or insightful. In this state one goes beyond one's own existence, escaping from the body. Without aid of his/her senses, he/she can have perceptions from outside. Complex mental problems can be solved and cured through the process of mind-wash and mind-culture.

Physiology of Trance (Functioning of Brain)

The EEG (Electro Encephalograph) machine discovered by Hans Berger to study brain waves, When a person's eyes are closed the brain generates electrical frequencies 8 to 12 cycles per second (CPS), Such waves called alpha frequency. The brain waves correspond to diverse mental functions.

Functioning of brain is known by electrical frequencies which are produced spontaneously. These electrical frequencies can be seen through Electro-Encephalographic computer. By setting electrodes on either side of the brain, the functional frequencies of the brain can be seen on the computer screen. There are four kinds of frequencies, such as β (Beta), α (Alfa), θ (Theta) and δ (Delta)-

- **Beta (β)** represents the awakening frequency which is more than 13 cycle per second (CPS). This is the stage of normal awakening. If the frequency is more than 16, it indicates a case of mental excitement. In case of hysteria or mania or any other uncontrollable condition of anger (or when one is infuriated) the frequency can run up to 40 to 50 cycles per second.
- **Alfa (α)** represents a frequency which varies from 8 to 13 CPS. In this state one can shut eyes and feel relaxed. This is known as lethargic and cataleptic state of hypnotic trance. In this stage, the suggestions given by the therapist directly influence the neuro-muscular activities of the body. Muscles correspondingly, rather slavishly and promptly respond to the suggestions.
- **Theta (θ)** represents a frequency which varies from 4 to 8 CPS. This is also known as the somnambulistic stage of hypnosis. In this phase one is transported to deep sleep and the heart beats and breathing go slow. The conscious mind becomes completely defunct. The subconscious and the unconscious become active. Extraordinary sense of perception (ESP) prevails over. Both the subconscious and the unconscious behave like an open book. In this stage, mind-wash and mind culture can be effective. By mind-wash, complexities, thoughts, desires, prior information, prejudice, existent in the mind can be removed, and new thoughts may be introduced.
- **Delta (δ)** represents the unknown and hither to unexplored zone represented by a frequency of 0 to 4 CPS. This stage takes one to hibernation, *samadhi* or vegetative stage. This is also known as the coma stage. Unfortunately, hither to hypno-therapy has not attempted to have access to this stage.

States of the Mind

Normally the mind has three states-

- (a) Conscious
- (b) Subconscious
- (c) Unconscious

The conscious corresponds to intelligence, reasoning, rationality, analysis, sympathy, solace, mental attitude. The subconscious corresponds to faith, belief, superstition, dream, hatred, love, compulsion, emotion.

The unconscious corresponds to regression, extra ordinary sense of perception, insight, enlightenment.



Chapter :IX

Myths and Limitations of Hypnosis

Hypnosis has caused anxieties and queries of people. At times, certain misconceptions also bring in difficulties to the hypno-therapist. An attempt is made here to clarify certain doubts and misgivings regarding hypnosis.

Can all persons be hypnotised ?

No, all can not be hypnotised. The persons who are mentally disoriented or disorganized or restless or made can not be hypnotised, because hypnosis depends on concentration and responses to suggestions. More than 95% of persons can benefit from hypnotherapy.

Can all persons be uniformly hypnotised ?

No, all persons can not be uniformly hypnotised. Almost 95% persons can be hypnotised upto clinical trance level.

About 85% can be hypnotised upto the state of cataleptic.

And 30% to 40% can go upto the somnambulistic state.

Is there uniform difficulty occurring in every session of hypnosis ?

No, it is not so. The first session is the most difficult. Once a person is brought under hypnotic trance, the subsequent sessions become easy. In the first session, the patient does not develop the kind of rapport that is necessary in favour of the therapist. His mind is replete with complexities and uncertainties, anxieties. But once he comes under the hypnotic trance, in the subsequent sessions he gains confidence and becomes fully familiar of the technique involved. In addition, the therapist offers a pre-hypnotic suggestion by informing that he would face difficulty in the second or subsequent sessions.

Can the animals and birds be hypnotised ?

Father Athnesius Kirture in his book "*Ars Magna Lucis et Umbrae*" published in 1646, mentioned that the hens could be hypnotised.

By tying the legs of a hen if a slate would be kept in the front and a line be drawn, the hen would then go to sleep. The hen would not move its limbs or wings and it would appear that it has come under the spell of paralysis. At the moment of hatching, the hen does not allow anyone to come closure to the egg. The one who deals in hen would always use this method to bring the hen to sleep so as to take away the egg. After sleep, the hen does not remember if it laid any eggs.

Anaconda's eyes retain the power to hypnotise its prey, so that after constant gazing of the anaconda, the prey gets automatically drawn towards it.

By playing upon *veen*, the snake-charmer can hypnotise the snake. Thus it is evident that human beings can hypnotise animals and birds, and animals also can hypnotise other animals.

Can someone, by force, be hypnotised ?

No, in case of clinical hypnosis. In clinical hypnosis, the person who is willing to be in trance, the therapist clinically assists him in experiencing the trance. So, in clinical hypnosis, the patient's willingness, his presence, his cooperation is necessary. There are some individuals whose eyes retain power of hypnotizing others. Such people can hypnotise someone again his/her willingness.

Can hypnosis assist in immoral and criminal acts ?

No, in clinical hypnosis it is not possible. Every individual is governed by a system of values. When this system gets thwarted, the individual's hypnotic trance automatically gets disturbed. The subconscious mind's deposits get automatically disturbed and hence it resists hypnosis. It also depends entirely on the mentality and temperamental attitude.

Is it true that only the persons with lesser intelligence get hypnotised ?

No, this is not so. To come to hypnotic trance, average level of intelligence is necessary. Those who are made, idiotic, ignorant and those who would not respond to suggestions properly, can not be hypnotised. Hypnosis depends more on concentration than on intelligence or foolishness.

Can one acquire Extraordinary Sense of Perception through hypnosis ?

Yes ESP can be acquired. At the deeper level of hypnosis, one goes to somnambulist state. And at this state one can acquire ESP, as in this state the consciousness escaping from body can be projected to outside.

This reminds one of *Sanjay's* ability to view and listen to whatever was happening at the battlefield of *Kurukshetra*. It is also true that Sanjay had his greater insight and intuitive power because of which Sanjay was able to narrate everything to *Dhritarashtra* about the battlefield. This was because of the acquisition of ESP. Similarly, hypnosis can serve as an aid to take one to the somnambulist state, without using the five organs of sense. And so this can be termed as the sixth sense.

Is it possible to know in hypnosis the secrets of someone else's mind ?

In the deeper level of hypnosis, the sixth sense or the ESP gets developed so that one can have access to someone else's mind's secret.

Is regression possible through hypnosis ?

At the deeper level of the hypnosis, when the unconscious gets fully activated, one can have access to the past time of this life, usually as a replay of the events.

Is personality development possible through hypnosis ?

In today's competitive world, personality development has become a familiar, well recognised phenomenon, more particularly in Management Studies, Entrepreneurship and Business Administration. Through hypnosis, personality development is possible. Complexes, phobias, anxieties, restlessness, lack of self confidence can be removed through positive hypnotic suggestions, and develop positive attitude leading to the creation of a balanced personality. This can be achieved through brain-wash and brain-culture.

Is there any fear that one does not come back to one's senses after hypnosis ?

There should be no such fear. There exists a rapport between the patient and the therapist. This rapport is not harmful. As long as this rapport exists, the patient would remain. No case has so far reported in which a patient never come back to normalcy. It is difficult to take one to sleep, but easy to wake him up with the simplest "Wake up" suggestion. In exceptional cases, someone can go to normal sleep immediately after hypnosis. He would wake up normally once the sleep is over. There is no cause of worry even in such cases.

Do the patients uniformly aide by the suggestions of the therapist ?

It depends upon the quality of suggestions, and the perceptibility of the patient. This can be explained through an example. There are three boys. You instruct each one to get a betel nut from the shop. This first boy would readily jump and come back quickly with the betel nut. The second one would go slow and get the betel nut. But the third boy, before going to the shop, would like to know in detail about the type of betel nut, about the shop

from where he has to get and at last he would ask for the money. Thus the last boy's perceptibility is more than that of the other two.

The last boy accepted the suggestions perfectly and therefore his action was perfect and he could get the right kind of betel.

Similarly in case of hypnosis, the suggestions are to be perceived properly.

Can the person recollect the moment of hypnosis, after the hypnotic trance ?

Normally one can recollect the moment of hypnosis. But if during the hypnosis, the post-hypnotic suggestion would be given that he would not remember anything after he gets back to normalcy, he would not remember anything. Therefore, it also depends on suggestions.

Which language should be used for proper hypnotic suggestion ?

The mother-tongue or any other familiar language, the patient knows and understands can be used. The quality of language would depend upon the level or standard of the patient. Liberty or sophisticated language can be used if the patient seems to be capable of perceiving the suggestions given through the language.

Is there any difference between mesmerism and hypnosis ?

Hypnosis is the developed stage of mesmerism. Dr. Anton Mesmer used 'pass' to bring a patient to hypnotic trance. Later on, without using 'pass', Dr. James Braid was realized that one could be hypnotised by eye gazing techniques which called hypnosis.

Is there any side effect or danger involved in hypnosis ?

No, there is neither any side effect nor any danger.

Is the therapist a magician or a divinely enlightened person ?

No, not so in the case of clinical hypnosis. It is a scientific technique by which the conscious of the patient is made inactive and the unconscious is activated.

Is chanting mantras or meditation etc. necessary for a hypno-therapist ?

No. There is no need of mantras or meditative practices. He should only know and follow the techniques. Any one can learn it and practise it, but he has to be scientifically trained.

Is the patient unconscious during the trance ?

No, not at all. The patient remains conscious because the subconscious takes over the activities of the conscious. In this state, he remains extremely awake and aware. The attention of the patient is drawn as per the direction of the therapist instead of normal consciousness.

□□□

Chapter : X

TECHNIQUES OF CLINICAL HYPNOSIS

Multiple techniques are in vogue in clinical hypnosis.

Crystal Ball Technique

This is a traditional method of hypno-therapy. A patient is made to sit comfortably. A crystal ball of 2 to 3 cm diameter is fastened to a thread. It is then kept at a distance of 3 to 4 feet from the patient. Light is allowed to fall on the crystal ball and then the ball is oscillated at the level of the patient's eyes. The patient is asked to move his eyes only (without moving the head) and follow without blinking oscillating crystal ball. After sometime, the eyes become tired. The patient feels sleepy. The patient is instructed to sleep with suggestions : "Sleep, sleep, sleep". The patient goes to hypnotic trance.

Instead of crystal ball, one can use pencil torch or other bright or dazzling items.

Power's Spiral Technique

After Melvin Powers (American hypno-therapist), this technique became popular. He took a gramophone disc with diameter 30 cms. He developed co-centric spirals on it and used the gramophone the move the disc. He glossed the centre of the axle with deep dark colour. He then would advise a person to gaze the centre so that the person, after constant gazing, experiences exhaustion in his eyes, and with the sleeping suggestion from the therapist, he goes to hypnotic trance.

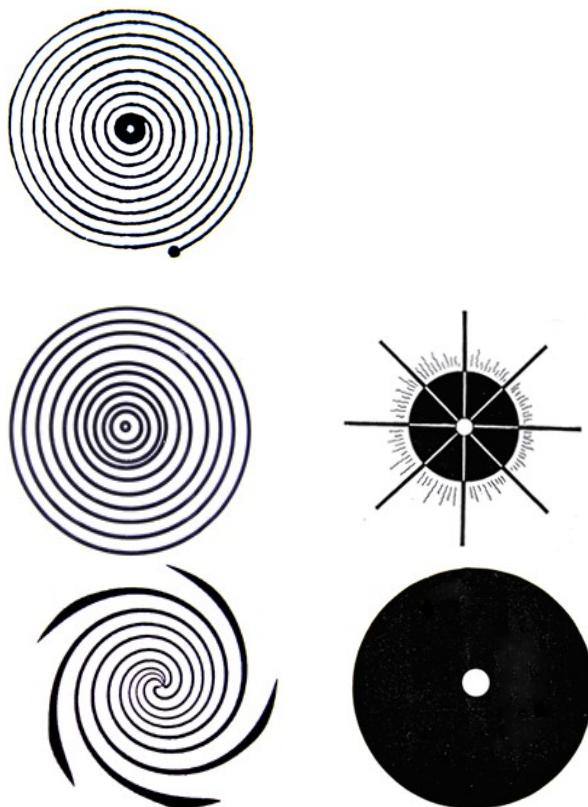


Fig. 19: The Power spirals

Counting Technique

A person, in this technique, is asked to fix his eyes on a dark spot of a white board at a distance of 2 to 3 feet at the level of the eyes. He is further advised to blink every time a number is uttered and then to look at the spot. After uttering numbers, and accordingly followed by the blinking and gazing, muscles of the eyes become tired and the person feels fatigue. When the therapist realizes that the patient is no longer in a position to reiterate his gaze and blink, he asks him to go to sleep. With this suggestion of the therapist, the patient dives into hypnotic trance.

Count-down Method

In this method, the patient is asked to count the number downwards, say from 100 to 0, besides gazing at the centre of the board (like the suggestions given in the counting technique). Intermittently the therapist is to enquire if the patient feels sleepy and then finally got to sleep, this is how the patient can dive to hypnotic trance.

Chemical Technique

This is the most scientific technique in which general anesthesia is used intravenously in the presence of an anesthesiologist. Normally for this purpose pentathol (thiopentone) injection is used. The patient within moments loses his senses and becomes unconscious. His unconscious then gets activated. The hypno-therapist has to continually speak to the patient. The patient also takes part in the conversation through the activated subconscious. Even fickle minded people, restless people and who are not prone to hypnosis, can be hypnotized by using the chemical technique.

Other methods are psychological. This method is chemical. In this method certain force is used, whereas in other techniques no force is used. This is the ultimate technique used by the therapist when other techniques fail. This technique has no side effect. But it is mandatory on the part of the therapist, to follow this technique in the presence of an anesthesiologist.

The unconsciousness can be produced by inhaling volatile anesthetics like Halothane (Fluothane/Hypnothane). Monitoring this process is necessary as individuals differ in becoming unconscious or in developing the feeling of lethargy. For this purpose a bottle may be used. Pressing the knob of the bottle the patient would be in a position to inhale. But as soon as the patient feels lethargy, the knob would automatically get blocked to avoid further release of the liquid. The purpose of taking help of such chemicals is not to take patients to the state of unconscious. Our concern is to take the benefit of the initial stage, i.e. to create lethargy in the patient and not total unconsciousness.

Flame Gazing Technique

In this case, the target of gazing is the candle or lamp or flame which should be kept 60 to 90 cms away. The patient is suggested to gaze at the flame without blinking. Similarly

exhaustion sets in and the eyes go heavy, and with the suggestion from the therapist, the patient experiences hypnotic trance.

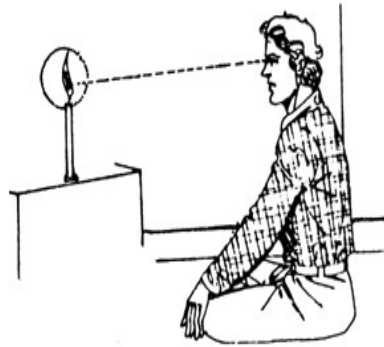


Fig. 20: Flame gazing technique

Pass Technique

Dr. Mesmer used this technique to bring a patient to hypnotic trance. The therapist passes the finger-tips on the patient lying on the bed. The finger-tips should be allowed to touch the patient from top to toe. The touch of one finger in a circular way at the lining joint of eyebrows (known as site of third eye), the patient can be brought to hypnotic trance.

Clinical Studio Technique

With the advancement of technology, a clinical studio can be set up in such a manner that when a patient enters it, he/she can easily feel the difference. This feeling of difference can be generated by making the studio fragrant, cool, comfortable, silent, less illumined. After sitting for sometime in the studio, one begins to feel completely relaxed and sleepy.

Similarly in the studio, with the help of a computer, the process of gazing can be made available. The therapist with help of his assistants is merely to operate the systems to signal suggestions, when the patient perpetuates or reiterates trance.

Chapter : XI

How to Hypnotise ?

Nine steps to be followed-

1. Preparation
2. Pre-hypnotic Counseling
3. Selection of the Technique
4. Induction of Trance
5. Observation
6. Treatment
7. Post-hypnotic Suggestion During Trance
8. End of the Hypnotic Trance
9. Informal Conversation with the Patient.

Preparation

A studio which is quiet, and whose ambience is comforting is necessary for this purpose. Easy, comfortable chairs or sofa may be kept in the studio for the patient and the therapist. Lighting arrangement, sound system, and either a board or a computer LCD screen for target gazing should be made ready. The studio can be made aromatic to create a more comforting, solacing kind of atmosphere. Chemicals, syringe, needles, cotton etc. should be kept in the studio. The studio should be furnished with equipments like E.E.G (Electroencephalograph), E.M.G.B. (Electromyographic Bio Feedback), computer. A control room within the studio or adjacent to the studio to operate audio-visual multimedia, light system is to be installed. The patient should be asked to occupy his chair.

Pre-hypnotic Counseling

When the patient is seated comfortably, he/she should be told briefly about what the treatment is. His superstitious attitude or misgivings about hypnosis, if any, should be removed at the stage of technique to be used for hypnosis.

He should be made to realise that the treatment is scientific. He should have no fear. His confidence is to be made positive so that the patient automatically is prepared to go for the treatment. All his/her queries be met with. He should be made to feel that the therapist can help him/her in overcoming the problems. Through conversation only the therapist can develop confidence in the patient so that the patient is made to realize the target of the therapist.

Selection of Technique

Selecting a technique to be followed is very important in case of hypnotising a patient. At times, the therapist is likely to choose a technique that suits him the most or that

he uses normally. But care should be taken to know, understand the psyche of the patient in the initial stage. A particular technique is to be followed, depending entirely on the nature of the patient. If a particular technique is felt to be unsuitable, the therapist can ultimately choose the chemical technique. The first attempt is always difficult. Once the technique followed in the first attempt yields good result, the same technique is to be followed in every further attempt of hypnosis. If the patient fails to go to hypnotic trance, with the first technique, the therapist has to counsel him further so that he easily goes to trance in following other techniques.

Induction of Trance

The patient has to feel completely relaxed and comfortable. From toe to top, each part of the body is to feel relaxed. Only then, the induction of trance is possible. The therapist has to create such an ambience through suggestion. The patient is to be advised about the step by step use of the technique flanked by suggestions from time to time. He is to be convinced that he would abide by the suggestions. Suppose the therapist would ask the patient to concentrate on his hand, the patient at the mental level should concentrate on hand. It is not necessary that he should look at his hand or pass his palm over the hand or hold the hand.

Normally he should be aroused to concentrate on the hand. The patient can be asked to look at the dazzling object, in case of crystal ball-gazing technique, besides informing him : "As you look on to the glittering object which I'm oscillating, your eyes would feel tired after sometimes. And then your head would be haunted by the spell of sleep. And when I would ask you to sleep, you would retire to sleep. In the process of gazing the dazzling object, you would derive delight and your mind would become light. You would begin to realize that your body also has become very light. At this moment only you will enter into the hypnotic trance. Your muscles would be relaxed. You allow your body to be relaxed too. Take deep breath. You concentrate your attention on me. You are entering into sleep. Even if you would go to deep sleep, you would be in a position to listen to me. It would not be possible for you to gaze the crystal ball. Your eyes are tired and you have tears. Your eyes are automatically closing. I say you sleep! sleep!! sleep!!! drop in sleep deep! deeper!! deepest!!! I would count from one to three and you would go to deep sleep. As long as I don't ask to wake up you should remain in this condition of sleep. When I count from one to three you would feel sleepy. But when I would utter three, you would go to deep trance.

One : Your body is losing its senses.

Two : Your eyelids have become heavy and your head is heavy with an intoxicating sleep. You like to have a deep sleep.

Three : Sleep! sleep!! sleep!!! You have gone to deep sleep. You would have act as per my suggestions. You are asleep but you can hear me. You will keep your eyes closed as long as I instruct you to open.

This is one of the ways in which one can be inducted to trance. But others can follow other ways and use different kind of language. But important is the suggestion. The more pointed and direct distinct the suggestions, the more effective is the induction to trance.

Observation

It has already been stated that there are stages of hypnotic trance: lethargic, cataleptic and somnambulistic. Step by step the patient would drop to deeper stage of trance. Every stage has its clinical importance and every stage retains its observational points. This is presented through a chart hereunder-

Observation Chart

State of trance	Observation point/effect	Result
1. Lethargic	Eyes being to feel sleepy. Consciousness of the body is less. Heaviness on eyelids. REM observed.	Partial effect of suggestion, normally not effective.
2. Cataleptic	Muscular system inactive. Hands, feet, eyes are fully influenced. One goes to a deep sleep. The sensory system and muscular system; follow the suggestions, as suggestions control the sense perceptions	Considerable effect on suggestions. Sensory and muscular systems under full control.
3. Somnambulistic	Deepest sleep. Unconscious mind activated. Secret thoughts, complexes hidden at the case of the mind come to surface. Mind becomes an open book. Autonomic nervous system and voluntary nervous system get promptly affected by the suggestions.	Intensive effects of suggestions. Mind-wash. Mind-culture. Extraordinary sense perception. Insight and Regression.

Indicators of Trance Development :

However, M. Erickson who was responsible for familiarizing the modern clinical hypnosis, in his famous book ***Hypnotic Realities*** : The induction of clinical hypnosis and forms of indirect suggestions, (Irvington : New York, 1976, P. 98). Categorises indicators of trance development as following -

- (a) Autonomous ideation
- (b) Balanced tonicity (catalepsy)
- (c) Changed voice quality
- (d) Comfort, relaxation
- (e) Economy of movement
- (f) Eye changes and closure
- (g) Ironed out facial feature
- (h) Feeling distant
- (i) Feeling good after trance
- (j) Lack of body movement
- (k) Lack of startle response
- (l) Literalism
- (m) Objective and impersonal ideation
- (n) Pupillary changes

- (o) Response attentiveness
- (p) Retardation of reflexes : Swallowing, blinking
- (q) Sensory, muscular and body changes
- (r) Slowing and loss of blink reflex
- (s) Slowing pulse
- (t) Slowing respiration
- (u) Spontaneous hypnotic phenomenon : amnesia, anesthesia, catalepsy, regression
- (v) Time distortion
- (w) Time lag in motor and conceptual behaviour.

Use of Instruments for Effective Observation :

The E.E.G. machine helps to know in which state of trance the patient is. It also helps to know the electrical frequency of the brain is running presently in which range as β , α , θ , δ .

The E.M.G.B machine helps to know the muscles' tone. As the patient goes to cataleptic or somnambulistic state, the variation in tones of muscles can be known. But in the state of lethargy, the tone of muscles can not be known.



Fig. 21: Test of lethargy

In a scientific manner E.E.G and E.M.G.B machines can be used to locate the state of trance of the patient. The suggestions given by the therapist will have its effect on the patient. The extent to which the patient could undergo affected or not also can be known. In the lethargic state, the suggestion would be responded to by eyes. Lethargic state is necessary for introducing deeper trance. That is how this state even though the first, is important.

In the cataleptic state the effect is more on senses, sensory and motor activities. If there is any effect on these, the patient is experiencing the second state or cataleptic state. If

no effect is found in sense, sensory and motor activities, then it should be presumed that the patient is still in the first state i.e. lethargic state.

External Symptoms :

From the appearance of the patient, certain features can be observed through which the state of trance also can be determined. Deep breathing, muscle tone can be observed. From the external appearance of the patient, one can know that the patient has moved into deep sleep. Shoulders and head would droop.

The jaw remains slack to indicate the relaxation of the jaw muscles. REM (Rapid Eye Movement) may be observed. Eyelids may begin to flutter, which would indicate that the patient is heading towards a trance with 10 cycles per second. REM is the confirmation of the trance. Even without REM one can go to trance. If eyelids stuck open half it means has gone into the trance.

The face is bereft of any expression and of any thought. From the appearance of the patient it can be known whether he/she is relaxed or not; whether he/she experiences restlessness. It is an admitted fact that no two persons would react in the similar fashion during the induction of hypnosis.

Test of Lethargy :

In this test, what is observed is the eyelids that become heavy and get shut or open and maintains a status REM. Eye muscles become fatigued. On enquiry how he feels he would reply that he feels exhausted.

Catalepsy Test :

The neuro-muscular system responds to suggestions. The testing can be followed in the following manner-

"You interlock your fingers. Your hands can not be separated without my suggestions. Try to do this. You would not be able to do it because of the effect of the earlier suggestion. I've now touched your hands and now you can separate your hands."

If he abides by such suggestion, it can be inferred that the patient has gone to the cataleptic state. Similarly another testing can be done in the following manner-



Fig. 22: Catalepsy test

"You lift your hand and hold it straight and horizontal." Then after a minute the patient is asked to lower it down. His hand would automatically come down without any

effort by the patient. He would accept this. He would begin to have faith in the therapist so that this faith would assist the therapist in pursuing further in session. Voluntary muscular movements can be observed through suggestions in order to know if the patient has entered the cataleptic state.

Sensory Hallucination Test :

Misperceptions of the five senses are known as hallucinations. Any sensory channel i.e. smell, sound, taste, sight, can be affected by hallucinations.

Though, suggestions misperception can be created. By offering ammonia to inhale, if suggestion is given that he is inhaling fragrance of rose, then the patient would accept it. By piercing needle into the skin, if suggestion is given that there would be no pain, then the patient is likely to accept it. Auditory misconception can be created. Suppose one listens to a flute and he is suggested that he is listening to harmonium, he would accept it. Similarly by giving honey to taste, if he is suggested that he is tasting salt, then he would be in a position to accept it. Showing the photo of Christ, if he is suggested to notice Krishna, the patient would accept it.



Fig. 23: Sensory Hallucination Test

Extraordinary Sense of Perception (ESP) Test :

In the deepest state of hypnosis, one has access to the unconscious mind where the conscious mind completely ceases to operate. Without the use of normal senses, one's perceptive ability increases in this state of hypnosis. In order to know whether the extraordinary sense of perception (ESP) has been developed or activated, ESP test is needed—

Age Regression :

This test can enable one to re-experience some events from the past. A man of forty years of age can experience his childhood of a particular time, say when he was only 8 years old. In the deep trance, one can have age-regression. Suppose a patient has developed some mental illness. In order to know its cause, age regression is necessary so that the patient can

experience the past or lost age and through the suggestion of the therapist, the cause or origin of the disease can be known.

Past-lives Regression :

Similarly, in this state of hypnosis one can have, through regression, explore the experience of past lives. If someone experiences the past life, then it can be said that he has ESP.

Time Distortion Test :

This test helps one to have the experience of an altered reality. Say for example, if one is in a sorrowful mood, he can be taken to an ecstatic mood that he had experienced once, sometime in the past. Thus the present reality gets distorted into a past realized experience, so that the patient feels relaxed and when brought to consciousness, he feels delighted. The regression would, therefore, have a positive impact so that he would overcome the moment of grief in the present.

Test of Insight :

With the help of this test, we can know the patient's insight, televisioning power, intuitive power, mind-watching ability, telepathy etc. We can remember here the context of *Mahabharat* where *Sanjay* could visualise everything of the battle of *Kurukshetra* and narrate in minute detail whatever was happening there to *Dhritarashtra*. This was because of the ESP of *Sanjay*.

One can also understand and know the secrets of other people's mind, because of the presence of ESP. If through suggestions, one dives to deeper state, one can feel illumined and enlightened.

All tests are not required for the patient. The therapist has to decide upon the kind of test he is likely to make for a particular patient. It is further imperative that minimum number of tests are to be undertaken. The therapist also must determine the suggestions after confirming the state of hypnosis. Suggestions of deeper state should not be given to a patient who is in the lethargy state.

Treatment

Treatment is given through suggestions. Two types of treatment are offered : One type is concerned with psychiatry and the other with neurology.

The psychiatric patients are treated through positive clinical suggestions, keeping in mind the condition of the patient. The therapist can at once know the mental condition of the patient through counseling. It can't be uniform to all patients. It will vary depending on the mental condition of the patient.

The patients with neurological problems can be treated too. But the suggestions would be flanked by instructions to have physical movement. Suppose, someone's hand suffers from neurological problem such as paralysis so that the patient can not lift his hand. In such cases, once the patient dives into cataleptic state or deep trance, the therapist through positive suggestions arouses the mental power of the patient and induces him to lift his hand. It would be observed that in the trance the patient is able to lift his hand. This is a symptom to indicate

that the neuro transmission has already been initiated once again and this would continue even after the period of trance, that is, when the patient comes back to normalcy. Like the paralysis other neurological problems can be managed or cured by this treatment.

Post-hypnotic Suggestions (PHS) during Trance

Such suggestions given during hypnotic trance may not have immediate effect on the patient as these get deposited in the subconscious level of mind, but these have every likelihood of being active when the patient is conscious. These suggestions are time oriented, and hence can have its effect after a time lag.

Such suggestions also can assist the therapist to take the patient to a deeper trance in future sessions. The effect of such suggestions can remain with the patient for months or even for this life-time. We can verify the effect of post hypnotic suggestions through an example.

A person, addicted to alcoholic drinks, was given post hypnotic suggestions that whenever he would have alcoholic drinks, he would develop vomiting tendency. This suggestion got stored up in the unconscious. So, when he began to have alcoholic drinks, he developed vomiting tendency, so much so that he could not have any alcoholic drinks. Thus he changed to another drink. Even going home, he tried other drinks too. But all the while he realized that he couldn't drink any alcohol. Similarly in the next sitting, he was given the suggestion that the drink would make him feel good. With this suggestion hidden in the subconscious, the patient would enjoy the drinks and would like it. When he became his normal self, he tasted alcoholic drinks. But this time he realised that the drink was really good. Thus in both these cases, post hypnotic suggestions had a positive effect. The post-hypnotic suggestions help an easy and deeper induction of trance in future sessions.

The effect of unknown shock or trauma in the mind also gets removed by such suggestions. It also puts an end to obsessive compulsive disorders. Disoriented, disjointed behaviour, which often retard personality development process, can be treated by and through post-hypnotic suggestions.

End of Hypnotic Trance

Hypnotic trance is a created mental sleep and not spontaneous or natural sleep. When the rapport with the therapist is broken or interrupted, the patient comes out of trance may go to normal sleep or may remain awake. It is therefore not necessary to be worried about the patient. If the therapist, after hypnotising a patient, goes to do something else, no other person can act as a therapist as the patient would not accept the suggestions he automatically become back in conscious.

It is difficult to take one to the state of trance, but very easy to wake him up. If someone in trance, does not return to normalcy, therapist in that state can enquire from the patient the ways he would like to come back to normalcy. A technique is used to wake up the patient from trance. The therapist can say :

"Now I will count from 1 to 5. By the time I would count 5, you will come out of sleep. You will feel energetic and fresh, you would realize that you have come out of a deep sleep. Your eyes, hand and feet and above all the entire would come back to normalcy. Your mind is full of ecstasy. Give attention to my counting from 1 to 5. When I would utter 5, you

would completely remain awake : 1... 2... 3... 4.. 5 ... (count)." With the utterance of 5, the patient would come back to normalcy. The therapist can invent new ways also as per his requirement.

Informal Conversation with the Patient

Informal conversation (with the patient after he is normal) should aim at knowing the trance experiences of the patient. In case of discrepancy or contradiction of given suggestions and mentality of the patient, the therapist must manage to minimize the discrepancy through counseling. He must be motivated to celebrate the joyous trance experiences. He would begin to realise that never before he had such sound sleep and that he would feel quite energetic. If he faced any uneasiness or difficulty in the trance, the therapist can know it through informal conversation. This is how a support and creates a confidence in the patient that in further sittings, he would feel quite easy, comfortable and his problems would be over.

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Chapter : XII

MENTAL HEALTH DISORDERS AND MANAGEMENT

People often experience mental health disorders. Such disorders in the long run may be dangerous and fatal. That is why the moment one realizes that he/she is developing some disorders, care should be taken to regain the normal mental health. We discuss and explain here some mental health disorders and the methods of managing such problems.

Obsessive Compulsive Neurosis

It is such a disease in which a person remains obsessed with some thoughts. His conscious mind fails to behave normally. The presence of mind takes a back seat, as a result of which he goes on repeating one act continuously. Such actions get terminated only when someone interrupts by enquiring : "What are you doing ?" This disease is evenly present in males and females. With the educated and elite people this disease is found in a greater degree. Housewives also get affected by it, because in domestic works, the women do not use their intellect and they do it mechanically. That's why they remain obsessive about certain domestic activities.

After lighting the gas stove, a lady often forgets that the gas burner was ignited. She remains preoccupied with some thoughts generated by the unconscious. This can result in any sort of fire accident. There can be another instance. A lady because of some compulsions of the mind, can go on rubbing her hand continuously but unconsciously. She would stop doing it, only when interrupted.

Such cases can be managed through hypno-therapy. It is imperative, therefore, on the part of the therapist to locate and identify the origin of such mental health disorders.

The Key Symptoms-

1. Repeated attempts.
2. Mental conflict
3. Feeling of insecurity
4. Self-devaluation
5. Distinct reflex action/gestures

How to identify the origin ?

The case history should be known and recorded both from the patient and her family members. Any event or situation responsible for this disorder should be known through case history. At times, the origin can be known from case history. But it may not happen in more complicated cases or even in the cases of children who fail to recall from the past. In such cases, we can abide by intensive psychoanalysis. If psychoanalysis also fails to locate the origin, then hypnotizing the patient, we can know from the patient the exact cause of the disorder. During the trance, the unconscious activated so by having access to the unconscious through hypnosis, the origin can be known easily.

Through certain clinical suggestions, the patient can be treated. But the mental health disorders could be of different types and so the suggestions are likely to vary for each patient

and for each disorder. Regression is useful for allowing the patient to go to past and then mind-culture can started as per clinical requirement. Suppose the therapist could know through the case history, counseling that there was some problem when the patient was thirty years old. So, in order to finally prove it, the patient would be allowed to have regression. Some suggestions are given below to go ahead with the treatment -

"Calm your mind... Relax your body... and concentrate yourself to my suggestions. I will take you back now to your past. Now you are forty years old. But I will take you to when you were thirty years old. I will count down from forty to thirty. Every number I utter would take you down by a year. I now start the countdown. You give your full concentration to my countdown... 40 – 39 – 38 – 37 – 36 – 35 – 34 – 33 – 32 – 31 – 30. Now, you have reached back to thirty years of age.



Fig. 24: Obsessive compulsive Neurosis

You are now thirty years of age. You can now remember very well the incidents of that age. You are feeling fine now. In this year such an incident occurred, that has a deep effect on your mind. Remember that incident. You can very easily remember it. Memories of that incident are appearing in your mind. You can visualise the entire scene of the event. You will tell me about that incident. I shall count from 1 to 5. By the time I would count 5, the incident would come to your mind and you can visualise it. 1 – 2 – 3 – 4 – 5. You are seeing now the incident. Give me a report in detail of that incident."

The patient would then tell or narrate the incident. The therapist, after knowing it, will have to be careful in giving further suggestions. As per the condition or situation of the patient (e.g. a feeling of sin or guilt) further curative suggestions would be given by the therapist.

In this connection, I am reminded of a patient whom I treated. The patient was a forty year old woman. She developed obsessive compulsive neurosis. In the preliminary phase of my treatment, it was difficult to identify the origin of the problem. After informal conversation with her and her family members, I learnt that the problem she has now is almost a decade old now. So I decided to take her to regression through hypnosis in order to

have a fuller view of her life during the last ten years. When I took her to trance, she narrated an incident that has been haunting her. The incident was that a decade ago she gave birth to the fourth girl child. Family members expected her to give birth to a son. When their expectation did not materialise, the members of the family began to insult her. Even her husband told her that he would like to have a second wife to have a son. She was very much shocked and emotionally disturbed. So one day she decided to kill the four month girl child. She latched the door from inside and attempted killing the child by covering her face with a pillow and pressing it against her. In the meanwhile there was a knock on the door and she was compelled to suspend her action against the child and open the door. After this incident, whenever she looked at the face of the girl child, she developed an acute sense of guilt. Soon after that incident she began to repeat things, whether washing hands or cleaning utensils due to developed obsessive compulsive neurosis. Accordingly, after unfolding the story and secrets of her guilt-consciousness during the trance, I offered some clinical suggestions, keeping in mind her moral turpitude.

I said : "I have my sympathies with you. The sad step that you took was quite natural for any woman. Any woman would have done that. God helped you and saved you from this sinful and criminal act. You must be thankful to god, and just forget that you committed a blunder or sin. Now you should not harbour any thought in your mind because of which you suffered a lot. You must forget that incident. You don't fall back on that event. From today onwards, your mind will be in control. The repetitious activities will come to an end now. After you are back from sleep or trance to consciousness, you will never be able to know that such a sad thing happened to you. Now onwards you would feel happy and relaxed. Whenever you would see your daughter, your mind will be filled with happiness, joy and love."

I offered her these suggestions. The sense of guilt she had all these years got removed from her mental horizon. After 3 to 4 sittings, slowly she recovered and her compulsion was over. She became very much normal. I just tried to give an example from my practical experience. But suggestions can be different with different persons and different mental conditions. Once the origin of the disorder is detected, it would be good for the patient to have at least 4/5 sittings; to regain the normal mental status and behaviour.

Depression

Everyone, at some point or other, experiences depression. Depression is a condition of the mood. It is characterized by a feeling of sadness, dejection, self-devaluation, a frustrating sense of guilt, an obsessive apprehension, hopelessness, despair and a feeling of ennui. One feels extremely exhausted, both mentally and physically. It may be due to tension and anxiety. It may also intensify tension and anxiety.

Key Symptoms :

1. Inadequacy of perception
2. Poor concentration
3. Poor judgment
4. Absent mindedness
5. Illusion and hallucination

6. Pervading sense of guilt consciousness
7. Declining self-esteem
8. Shedding tears
9. Excessive anger and hunger for sex
10. Sleeplessness and excessive sleep
11. Recurrent thought of death
12. Multiple mental complexes

Directly or indirectly, the patients who visit doctors, suffer from depression. Because of a shock or grief, the patient begins to lose his/her mental strength, and realizes utter helplessness.

The shock or grief may be from frustration in love, loss of hope, loss of ambition, financial loss, loss of faith, death of dear ones, breakdown of relationships etc. These are two types of depression : Endogenous and Exogenous or Reactive, the one biological hormonal and the other acquired (conditionally or situationally) respectively.

Endogenous depression is caused by hormonal imbalance, menopause, reaction of medicine, hereditary factors, resulting in decreased cerebral function of the brain. This can also be detected by pathological tests like T₃, T₄, TSH, lithium level test. Head trauma, brain trauma, brain tumour also can lead to endogenous depression.

Exogenous or reactive depression is caused by a condition or situation. And hence it is most often acquired. The cause of this disease depends upon the detection or identification of the origin or cause of shock or grief.

Endogenous cases may be treated by maintaining a chemical balance, using hypnotherapy as an supportive treatment. Exogenous cases must be treated by hypnotherapy. I illustrate here a case of exogenous depressions-

A young boy, who was doing computer job work and DTP, fell in love with a girl. The affair continued for a long time. At the same, his professional achievement level became high. But one day, all of a sudden, he discovered that his own girl friend was in love with someone else because of which she stopped speaking to him and meeting him. The boy was shocked by the breakdown of the relationship and by the shocking and surprising behaviour of his girl friend.

He suffered from deep depression and he derailed from the professional career, which was almost destroyed. He was brought to me for treatment. I discovered that he was completely broken down. He used to cry frequently. He wanted to die as he was left with no aim worthwhile. Through case history, clinical observation, and counseling I could know in great detail everything about him. I felt that his self-esteem was broken because of the failed relationship. I also felt that this self-esteem was to be regenerated and revived for his survival. In the hypnotic trance I gave him the following suggestions :

"Quite and calm your mind. Listen to me with rapt attention. I know that you were deeply shocked for which you are so sad and anxiety ridden. I also know that the girl you loved betrayed you. Can you tell me her name ?"

The patient replied : "Her name was Rachna." "Did you love Rachna deeply ? He replied 'Yes' and began to cry. Consoling him I said "You are a very nice person. But Rachna does not seem to be good as because of the way she treated you. No good girl can behave that way. You also realise now that she was not good. Is she good or bad ? "She is a cheat, deceitful, she is not good", he replied –

"Yes, Rachna is a bad girl". I further said, "That is why you developed hatred for her. Whenever you would remember her you would be full of anger, hatred. You will have no desire to have her again. You forget her. Remove her from your mind completely. Have you forgotten her ?" He did not reply. I told him : "I shall countdown from 10 to 1, and by the time I would reach 1, you will forget Rachna. Concentrate on this suggestion". As I utter 1, you try to forget Rachna." I started countdown. 10 – 9 – 8 – 7 – 6 – 5 – 4 – 3 – 2 – 1, I asked him : "Have you forgotten Rachna" He replied spontaneously : "Yes".

I further gave suggestions : "From now onwards you will be calm. You will come back to your profession. You will reorganize yourself. You will fully concentrate on your job. There will be no negative thought in you". With three sittings, on three consecutive day, I discovered that from the forth day, he went to his work. Within 10 days he was fully absorbed in his work. On 15th day when I met him, I found him to be absolutely O.K., completely normal.

The therapist in such cases has to be sympathetic towards the patient. Therapist's objective would be always to restore the emotional balance of the patient. Such cases are very common. One may suffer many times from reactive depression.

Mind has its own strength to overcome such shocks. But when such shocks are deep, and mind fails to overcome it then clinical hypnosis is necessary. Often in such cases, one develops clinical tendency.

Anxiety/Tension

The human mind is never free from thoughts. But when thoughts intensify or continue to occupy the mind, longer they retain two clinical conditions, such as hypo and hyper. These are the two conditions of anxiety which can be treated. Hypo anxiety makes one excessively inactive so that one remains careless even to most urgent demands or works.

For example, a student who remains completely unaware of the impending examination can be said to suffer from hypo anxiety. Hyper anxiety makes one excessively active. It distracts one from achieving perfection or excellence. When it is causative, or when its origin has a definite cause, hyper anxiety gets subsided with the removal of the cause. At times, even without the origin or basis of a cause, one remains ridden by hyper anxiety. Such a phase takes one to the state of irrationality. It is very much critical in nature and very difficult to understand.

Key Symptoms :

1. Feeling of insecurity
2. Mental complex
3. Lack of self confidence
4. Phobias
5. Short breath
6. High palpitation
7. Excessive perspiration
8. Flushing
9. Drying up of lips and mouth
10. Numbness of muscles/body

11. Restlessness
12. Insomnia
13. Hyperactiveness etc.

Scope of the Treatment :

The hypnotic treatment aims at giving mental strength and developing positive attitude and balanced mental behaviour or the patience. It also tries to change the nature with which one has been conditioned. Because of the hypnotic treatment, one would be freed from the ingrained instinct of thinking. It would drive out phobia inherent in the individual. It would also strengthen one to think positively. Hypo and hyper conditions would demand different kinds of treatment, through diverse methods. A patient with anxiety would be treated differently to create a kind of confidence, within himself. A student with anxiety for examination can be treated so that he would be drawn towards it. Through hypnotic suggestions, he would be made to feel free and he would be asked to enjoy the examinations. He would be suggested that he would wait for the examination without any anxiety. After 5 to 8 sittings, the student appearing at the examinations would perform well and bag good results.

Hypo-anxiety is caused because of the slowing down of neuro-transmission or electrical signals and sensitivity. The primary aim of treatment would be to activate the slowing down of the signals and motivate the sensitivity through positive hypnotical suggestions. In case there would be any organic cause of such hypo-anxiety condition, then one should be given conservative or anatomical treatment.

Attempted Suicide and Suicide

There are some patients who have already attempted suicide; but these are others who retain suicidal tendency. All living beings are endowed with a natural desire to live. But in exceptional or unnatural cases people develop the tendency to commit suicide. Not where suicide is accepted as a right. According to IPC 309, suicide is a crime. Only when life becomes extremely difficult, or completely bereft of meaning, one can think of committing suicide. Cases of suicide reveal that when one experiences failure in love, failure in business, incurring heavy loss or when one realises that he/she is normally degraded, condemned in public or when one is left with no other choice, he/she commits suicide. Deep depression, shock, trauma and fear are inner causes which induce in individuals the suicidal tendency. Children develop suicidal tendency because of the absence of natural paternal/maternal care or affection. Fear of punishment and insult also drive them to suicidal tendency. In the case of youth, failure in love, examination, absence of basic necessities or when the future seems completely dark, can cause such a tendency. In case of the old, disappointment, incurable diseases, hopeless future may galvanize this tendency.

Key Symptoms :

1. Disappointment
2. Negative attitude
3. Shock/Trauma
4. Sense of isolation

5. Restlessness
6. Introversion
7. Lack of self confidence
8. Phobias

Scope of Treatment :

Hypnotic treatment would make attempts to drive out a patient's sorrow and sense of guilt – which often become instrumental to the suicidal tendency. In different stages, different causes excite suicidal tendency. But while treating such patients, one should bear in mind that the patient should be driven towards developing a positive attitude; the patient's shock responses be removed through suggestions.

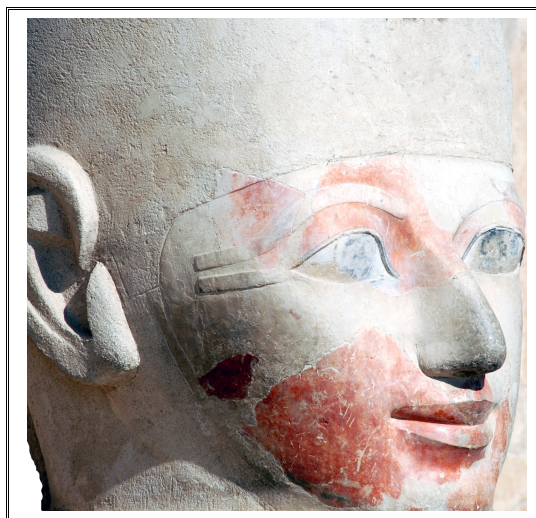


Fig. 25: Suicide

If a child who has lost his/her mother does not get proper attention of father or mother, the child is likely to develop suicidal tendency. The fault line of thinking in the child towards either father or mother should be removed. The child should be persuaded to accept that his/her way of thinking is wrong. The child should be advised to renew his attitude or way of thinking. This would definitely have a good result in the child. He/she would automatically get acclimatized to the step mother or the father.

Similarly in failed love the person has to be made to realise that he/she had a wrong choice; and that there are many other better opportunities when he/she can have a better companion.

The old people who have lost all hopes can be given suggestions that life is not already over and that the bleakness of present acts as a patch of cloud and covers the future in darkness.

Post-traumatic Stress

Even after a panic stricken condition, an individual's mind does not remain free from the stress. Without any verifiable reason, the stress continues to affect the individual. Fear of

the panic does not disappear. An accident, natural calamity, even operation, or someone's death may cause panic resulting in post traumatic stress.

Key Symptoms :

1. Phobia
2. Nightmare
3. Insomnia
4. Anxiety
5. Depression
6. Restlessness
7. Psychogenic pain
8. Perspiration
9. Short breath

Scope of Treatment :

While treating such cases, the primary aim would be to drive out the posited shock through good suggestion.

Example : A child saved from fire would be always afraid of fire and the nightmare of fire took place. The child is to be brought to hypnotic trance with the suggestion that the event of house-on-fire was an accident and it was over. He should be given suggestion that there is no fire now and that the night is quiet and cool. He would be asked to sleep. After this trance-like sleep, the child would be free from the fear of fire or night.

Hypno-therapy tries to remove the deep shock posited in the mind of the patient. Once the shock is removed, the patient behaves normally.

Phobias

Excessive irrational fear causes phobia. Unusually people who suffer from phobia remain dull. There are different kinds of phobia, yet a few of them are very significant : Phonophobia, algophobia, thanatophobia, xenophobia, zoophobia, cynophobia, schoolphobia, hydrophobia, aerophobia, halophobia, insectophobia, monophobia, claustrophobia, oclophobia, gynophobia, toxophobia, anthrophobia etc. Even if an individual is aware that he won't be afraid of anything, still he develops an unusual kind of fear towards an object or situation.

Key Symptoms :

1. High palpitation
2. High breath
3. Shivering
4. Perspiration
5. Loss of control and consciousness
6. Numbness
7. Disturbed physiological condition
8. Aphonia

9. Anxiety or depression
10. Restlessness
11. Loss of self confidence
12. Excessive excitement

Scope of Treatment :

Hypnotherapy is very much useful for the persons having phobia. Through hypnotic suggestions, the phobia can be cured. A child, who has experienced the fall of a cat on him, would develop phobia. Because of this kind of unwarranted falls can causes phobia. Whenever he would come across at, the child will develop the phobia.

The patient would be suggested that he/she was wrong. He should be given condition to realise that the cat is not really harmful as it a domestic one. With this suggestion, the child would look at the cat, not with a sense of fear but bereft of any fear. Thus it is evident that the element of fear has to be removed through suggestions. Then only the child will be normal.



Fig. 26: Phobia

One really does not know when phobia develops. A lady who has hydrophobia was treated. She would be asked to be regression in which she could remember the origin of such phobia. In a movie she saw a steamer met with an accident in a cyclonic storm. Many people and children died. This occasion, therefore, caused the phobia in her mind.

When she was given the suggestion that it was in the movie, and she should not fear it. Moreover she was suggested that now water is very much useful for human beings. After such suggestions during the hypnosis, the patient is likely to free from hydrophobia.

Causes of the phobia should be known through counseling and conversation, may be in a causal way. Once the origin of the cause is known, through right suggestion the patient can be treated to overcome phobia. When origin of the cause is not known, suggestions be given to familiar with different situations. Suppose, one has claustrophobia, he/she should be asked to mix with people, so that she can slowly overcome phobia.

Insomnia

A condition in which mind is preoccupied with certain thoughts continuously running or recycling in the mind. A particular thought continues to occupy the mind in such a manner that he does not get sleep. Sleep takes away our fatigue and restlessness. Sleep is a natural necessity for all. Mind and body require rest. Sleep recharges the physical, biological and mental energy.

Key Symptoms :

1. Fatigue
2. Restlessness/Uneasiness
3. Absent-mindedness
4. High breathing
5. Unsteady behavior
6. Drowsiness
7. Recycling of a particular thought

Scope of Treatment :

Two types of treatment can be given. First type of treatment tries to remove habit of insomnia and regain normalcy. Second type of treatment tries to fix a hypnotical induction to achieve deep sleep.

One who habitually suffers from insomnia, he should be advised to do some physical exercises which would be responsible for increasing his pulse rate and palpitation. Physical exercises also help in relaxing the body. At the same time hypnotic suggestion would be given that "When you retire to bed after the physical exercise, you shall have normal sleep." The sleep induction treatment on a child who has lost his mother will have good effect. The child remembers the mother and feels the absence of the mother so acutely that he does not get sleep. The treatment through post hypnotic suggestion when bell or alarm would be ringing and after it stops, he would have sleep. Such suggestions acclimatize the patient to the ringing of bell. Then automatically the child would go to sleep. The ringing of the bell has to be graded. At first it should ring for 5 second; then for 4 second; then for 3 or 2 or one second. Then the bell be made just a single ring. The child would gradually get normal sleep even without the ringing of the bell.

Attempts be made to reach the cause or origin of the patient's condition. Simultaneously the hypnotic suggestion be given. With the help of these dual treatments normal sleep can be available to the child.

Bipolar Affective Disorder

It is named so because of extremely fluctuating tendency of the mood, both higher and lower extremes. Higher extreme represents maniac behaviour of the patients. On the other hand, lower extremes lead to depressive mental condition. That is why it is also known as maniac depressive psychosis (MDP). On slightest depression, the behaviour of the patient becomes very innocent and simple and obedient. In this condition, the patient becomes sympathetic. But all of a sudden, because of no any sufficient reason, the patient's mood becomes violent, aggressive and destructive. High activation of the brain results in this kind

of a disease. Excessive neuro-transmission results in abnormal behaviour. But all of a sudden this transmission becomes very slow. In such a condition, mood begins to fluctuate. Reasons behind this condition are unknown. But physiologically it is a neuro-transmission related disbalance of an individual.

Key Symptoms :

1. Altering episodes of mania or depression
2. Suicidal tendency
3. Absence of self control
4. High or slow breathing
5. Slowing down of thought process
6. Irrational behaviour
7. Very much or less reactive
8. Patiencelessness

Scope of Treatment :

Patients often know about such episodes while disappeared. Mental conditioning and support through hypnotherapy may bring back self confidence. Patients with such diseases should be given suggestion to remove disbalance and to maintain consciousness during episode at beginning.

Hysteria

Hysteria can be caused by repressed desires and complexes. The unfulfilled desires can have its impact on the unconscious and subconscious. Mostly women suffer from this disease in adolescent period. Hysteric episodes do not occur in sleep and in loneliness. During the episode, one remains fully conscious.

Key Symptoms :

1. Excessive talkativeness tendency
2. Sudden spell of weeping or laughing
3. Incoherent talks
4. Irrational fears
5. Breathing and palpitation high
6. Aggressive in act and behaviour
7. Illogical argument
8. Increased muscle tone and power
9. Self-talking
10. Careless in every aspect, including dress
11. Exceptionally at times, intelligent
12. At times extremely conscious
13. Involved with maniac tendencies
14. Mania/madness
15. Attention deficit disorder
16. Hyper activeness

No treatment is possible during episodic condition. Only during the normal condition, hypnotherapy be used. Past history can be known through verbal counseling and conversation so as to identify the repressed desires. Through regression one can know the cause of repressed desired, which gets reflected in hysteria. Once the cause is known, the patient's complex posited in the mind should be removed. If the cause is not known suggestions should be given so that he/she can balance himself or herself.

Example : A young unmarried girl accompanied her parents visited to *Khajuraho*. After coming back, she developed hysteric bout. Neuro-surgeons and neuro-physicians were consulted. C T scan, MRI was done. Pathological tests were done. No anatomical disorder could be identified. Yet she got the hysteric feats. When I treated her, I found out the cause through regression. After viewing the sculptures, she developed sexual desire but it remained repressed. That is why she developed the hysteric feat. I asked her to forget those sculptures. I also told her that she should not remember her visit to *Khajuraho*. There was a lot of improvement. Instead of having ten feats, on the second day she had only one. In the next sitting, I suggested her that she has completely forgotten her visit to *Khajurao*. Ultimately, she was cured. Chronic hysteria leads to associated physical disorders or psychosomatic disorders. In such cases, both physical and psychological treatment can be rendered. Such cases which move from psycho to psychosomatic become complicated. That is why with the beginning of the psychic disease, the treatment should be started.

Schizophrenia

It is characterised by various types of mental problem. It does not permit one to maintain normal human relationships, both at the family level as well as at the societal level. It is accepted today that schizophrenia can be nine fold :

(i) Simple schizophrenia (b) Hebephrenic schizophrenia (iii) Paranoid schizophrenia (iv) Catatonic schizophrenia (v) Schizo effective (vi) Childhood schizophrenia (vii) Acute undifferentiated schizophrenia (viii) Chronic undifferentiated (ix) Residual schizophrenia.

Causes :

(i) Heredity (ii) Faulty and pathogenic family pattern (iii) Frustration (iv) Traumatic childhood experiences (v) Repression of libido or sexual power (vi) Disturbances in sex glands (vii) Mental conflict (viii) Inferiority complex (ix) Introverted personality (x) Brain injury (xi) Social and cultural factors (xii) Extreme defenses (xiii) Faulty education.

Key Symptoms :

1. Hallucinations: auditory, visual, factual, olfactory, taste
2. Anomalous behaviour: standing on one foot, squeezing of lips, gesture signs.
3. Emotional disorders: carelessness in daily chores, absence of cleanliness, lonesomeness or solitude, sudden laughter and crying; extreme form of dependence or difference
4. Dissociation of personality: absence of coordination in emotional, intellectual and motor activity; divided personality or split personality or intrapsychic ataxia.

Scope of the Treatment :

Identify the root causes which trigger off the schizophrenia. Hypnotherapy acts as a supportive treatment which enlarges and strengthens the mental status. A confidence in the patient is to be created that there is a possibility of cure.

Addiction and Bad Habits

Certain habits in extended form appear like diseases and at times they become diseases which require treatment. Twitching the eye or jerking the shoulders or swaying the hands in extreme form may be turned into diseases. At times one may feel that without drinking alcohol, without smoking or taking opium or drug, one can not function or perform any act. Such a condition makes one drug dependent. People may take intoxicants for many reasons. For some it is luxury; for some it is fashion; for some it is a sign of dignity; but for some it becomes a necessity.

Addiction e.g. : alcoholism, smoking, drugs, strong sexual desire.

Bad habits e.g. : spitting, jerking of shoulder, nail-biting, nose-rubbing, nose-touching, palm rubbing, finger twisting, yawning, sneezing, coughing, gambling etc.

Scope of Treatment :

Hypnotherapy is successful in saving one from addition and bad habits. Through hypnotical counseling, the bad effects of addition can be suggested to the patient's unconscious mind. The dependence on intoxicants can be removed through supportive hypnotical suggestions.

Case Study : A successful contractor became alcoholic. He suffered from many diseases: such as alcoholic dementia, alcoholic hepatitis, colitis. Even if doctors asked him to quit alcohol, he tried but failed and began to drink again, as he thought he should not do anything without drinking. Through hypnotic counseling it could be known that he experienced a very heavy loss in his contract work and hence in order to forget or overcome that loss, he started drinking. His drinking habits intensified.

Delusional Complexes

Delusion is a false, imaginary and baseless belief. But it affects strongly the behaviour and physiology of the person. As a result, certain types of mental complexes develop in any individual. Dr. N. Camerson has given a very illuminative definition : "Delusion is a fixed belief which persists even though social reality contradicts it."

Such complexes may be of various types, i.e. applicable to an individual or a collection of individuals such as a race, society or a nation. The classification and identification of the delusional complexes are, however, very complicated. Some commonly observed complexes are given below :

1. The delusion that everyone is looking at him/her.
2. The delusion that one is great or superior to everybody else.
3. The delusion that one is inferior to everybody else.
4. The delusion that one is constantly in contact with and supported by god.

5. The delusion that one can hear a divine message coming from heaven or some other planet (than the earth).
6. The delusion that something wrong is happening to him/her.
7. Hypochondria – the delusion in which the person believes himself/herself to be suffering from some disease/s.
8. Delusion of reference in which a person imagines others to be talking about him/her and hatching a conspiracy about him/her.
9. Delusion of persecution in which a person has fears that others will cause pain or distress to him/her.
10. The delusion of influence in which a person believes that he/she has some influences somewhere which will be misused by others through temptation.
11. The delusion under which one condemns oneself as a sinner, wrong doer, inefficient etc.

Scope of Treatment :

As I know, a delusion is a baseless belief, but it can strongly affect the physiology of the person. Generally, the causes behind a delusion are not easy to find out. However, it is possible to find out the causes by putting the patient under hypnotical trance. After finding the cause/s, the hypnotherapist can remove the complexes by giving the patient certain positive hypnotical suggestion to the patient. Once I treated a patient who was suffering from the delusion that she was being watched by others, and she was feeling very uneasy everywhere among people. Under the trance of hypnosis she suggested that now she felt very confident and easy in any gathering and did not become over conscious and nervous. After treatment she felt free and easy in any gathering.

□□□

CHAPTER : XIII

Some Common Problems of Children



Fig. 27: Children's Mind

Psychogenic Aphonia

Aphonia is a condition of inability to speak. The psychogenic aphonia develops in the children while they face some terrible fearful situations. It is caused by phobias or deep mental shocks. Children's mind is very soft and innocent, they are unable to maintain or threshold the shocks.

Key Symptoms :

- Inability to speak
- Restlessness
- Fearfulness
- Over conscious about sound or surrounding events
- Excessive dependence

Scope of Treatment – By using the time regression the cause may be found out. Under trance child can explain the situation in written if that is along with aphonic condition. He/she could write his history and experiences happen before. According to the cause of illness further treatment should be decided.

The fear and shock both may be removed by the suggestions under hypnotic trance. Then patient will be enforced to speak under maintained hypnotic background and suggested that he/she has already been forgotten everything such happened shocking, now he/she is unable to memorize that incidence, his/her mind has clean-up for the same, now you are ok everything is ok, you can speak easily... try to do it, you can do it of course.

School Phobia

The school phobia is a common problem of school going children. The schools are normally not appreciable by the children, they feel fear when they detached from the family members. They might not habitual to go outside of home; school going is his quite new and

stranger experience. Like these causes are responsible to grow the school phobia in the mind of children.

Key Symptoms :

1. Stomach pain
2. Disagree to go to school
3. Faintness
4. Sometimes loss of consciousness
5. Restlessness
6. Excessive dependency
7. Over sweating
8. Psychogenic pain, aphonia, tremor

Scope of Treatment – The Hypnotherapy can help to remove the psychological fear in the mind of child and make ease and familiar the mind of child with school. It may be suggested that he/she will feel happy and eager to school instead of fear or phobia.

Excessive Dependency

The children are habitually dependent with parents and other family members. But if it goes in extent then should be treated.

Key Symptoms :

1. Fearful facial expressions
2. Want to hold fingers and had of mother or father
3. Nightmares
4. Fear of darkness, night, alone
5. Tremor, faintness
6. Loss of self confidence
7. Psychogenic pain, phobias

Scope of Treatment – Excessive dependence is caused by fear and loss of self confidence. Hypnosis can help to find out the cause of fear and it could be removed by hypnotic suggestions. The self confidence also may be enhanced and grow by the positive hypnotic suggestions. The children suffering from excessive dependency they may be suggested to maintain his self confidence everywhere in his life and work.

Nail Biting/Thumb Suckling

The psychologists say any bad habit is caused by brain fag, where brain stops working for a certain moments and it reflect as a unconsciously drive any physical activity like touching nose, nail biting, thumb suckling etc. On the contrary habits are also developed by drilling, continuous practices of any same act or movement. Nail biting and thumb suckling are very common in children.

Scope of Treatment – The hypnotherapy can help to overcome these habits by imposing suggestions to grow consciousness along with. When child will start suckling thumb or biting nail his conscious will alert him then he could come out from habitual framing. His conscious always alert him and will not allow again doing the same.

Nightmares (Terrible Dreams)

Nightmares are also a type of phobia elongated sleep disturbance of the children. Sometimes child follows fear in the darkness; he imagines dragon or ghost beside. But in fact nothing is behind it except psychogenic illusion.



Fig. 28: Tender Minds

Key Symptoms :

1. Over alert about darkness and lonely places
2. Disturbed sleep
3. Nervousness
4. Unable to concentrate at a subject
5. Less self confidence
6. Exhausted

Scope of Treatment – The nightmares can be treated by hypnosis as like phobias. First try to search out the cause of problem, which had generated fear in the mind of child by using past time regression, then remove the terrible memories and suggest further to have familiar with night darkness without interference of any fear, give suggestion for comfortable sleep.

Speech Disorders

Some speech disorders are concerned with lack of confidence, fear, complex or excitement and some are concerned with habits. If cause is not physical disorder grows from only psychogenic reasons then hypnotherapy may be helpful.

Scope of Treatment – The real cause of certain grew complex or disorder may be traced out and removed by regression. On the other hand the self confidence may be enhanced to withdrawn the habitual incapability conditions.

Attention Deficit Disorder (ADD & ADHD)

The attention deficit disorder and attention deficit hyperactivity disorder is characterised by inappropriate attention with or without hyper impulsive activeness. The children those suffered from attention deficit disorders look restless and feel unable to keep his attention in any subject or work for a little bit as continuously, but they do not look hyperactive or impulsive. In case of attention deficit hyperactivity disorder they looks hyper active along with poor attention, sometimes may be over impulsive and destructive also.

Key Symptoms :

1. Often fail to give close attention in any subject or work
2. Learning disorders associated
3. Hyper in his activity
4. Impulsive mood disorders
5. Destructiveness
6. Over confident
7. Irrelevant talkative
8. Restlessness
9. Inappropriate attention due to divertiveness
10. Hyper breath and hyper tension

Scope of Treatment – The attention deficit disorder and attention deficit hyper activity disorder both are caused by irregularized neurotransmission generates and withdraws from the various sites of cerebral cortex within little bit where any one site of cerebral cortex is unable to keeps stability of regular transmission for a long time. Because of this factor child diverts his attention habitually and when brain generates over transmission it characterized as impulsiveness or destructiveness.

It is very difficult to hypnotise poor active and overly active children. Try to do it possible then impose hypnotic suggestion to make his mind stable and grow his confidence to keep attention in any work for a long duration. Also he should be suggested to maintain his impulsiveness while works among or with the other peoples or house holds or equipments.

Chapter : XIV

The Autohypnosis

The Samadhi and Hibernation is a Natural Phenomenon

The trance inducted by self is called autohypnosis. The autohypnosis or self hypnosis has often used here in India by the saints, monks or meditative persons for creation of the Samadhi and enlightenment. The Scottish physician Dr. James Braid (1805 – 1860) had visited in India and met with some insightful meditative person those were living in isolated caves of Himalaya without wearing clothes. He disclosed that these enlightened persons are using self hypnosis or autohypnosis to undergo the state of **Samadhi**.

The **Samadhi** is a hibernation like state that manifests very low need of metabolism rate, slowest breathing and silent heart functions along with capacity to use reserve body fat for living. The hibernating state is normal life phenomenon in bats, ground squirrels, European hedgehogs, terrapins, snakes, frogs and newts. The body of hibernating mammals contained with special kind of fat called 'brown fat', the brown fat is more vascularised, abundance of plenty blood vessels and mitochondria.

The brown fat bodies produce thermogenin, a form of protein, it helps glucose to turned into the basic energy molecules of the cells, named Adenosine Triphosphate (ATP). Therefore cellular respiration regulates body environment and temperature while hibernation. The physiology of hibernation of some animals has been prevailed and well known. But in the case of human being it seems not possible. The **Samadhi** may be recognized as hibernation.

The Life Span may be Extended in **Samadhi**

The **Samadhi** claims timelessness. While any person undergone the state of **Samadhi**, the certain duration will not count in his span of life. For example- if any one had undergone **Samadhi** for 50 years, then after he returned back in normal life. He will further carry on his normal life span without counting the exhausted those 50 years time while he had **Samadhi**. It is a great miraculous phenomenon and secret of nature which allows expansion the life span up to desired time limit beyond capture of death.

The death is very natural and an immortal truth of life. He who have taken birth he will have to die. But the **Samadhi** can give advantage to allow more longer life span. It has been prove when **Nobel Prize 2002** of medicine has given jointly to *Sydney Brenner* (Britain), *H. Robert Horvitz* (USA) and *John E. Sulston* (Britain) for discovery concerning Genetic regulation of organ development and programmed cell death. This discovery prevailed **Samadhi** like state of **Caenorhabditis Elegans (C.Elegans)** a worm that is 1 mm long and transparent in colour.

The scientists studied this worm. It is founded in the earth soil and leads three week normal life span. The discovery says that if larva of this worm did not get a suitable normal conditions such as adverse temperature or nutrition etc. it turns on hibernation or reversible vegetation and lead there upto two months. While this duration, if the conditions became suitable, the larva turns into a normal worm and lead his normal life span of three weeks, excluded two month of **sustained life**. In this way life span of *C. Elegans* has increased four times. If male and female both might have undergone of this laboratory controlled conditions then progeny will acquire the upgraded life span of 12 weeks usually, instead of 3 weeks.

The botanical kingdom also prevail hibernation similarly as animals. The seeds are undergone in the hibernation, it called dormancy. Seeds may be remained unaffected in the water or mud for few months while dormancy. After broken dormancy they yield as plant. The scientist has discovered some dormancy-breaker chemicals. The administration of certain chemicals cause sudden break of the dormancy, it may be resulted as severe damage or die.



Fig. 29: Samadhi- The hibernation on demand

The physiology of *Samadhi* and hibernation is almost same where body undergoes to live in lowest heart rate, lowest respiration and lowest metabolic rate, these things safeguards them from adverse climatic situations along with advantage of timelessness. The *Samadhi* may be acquired by human by practice on demand. But some particular animals and plants are naturally privileged for hibernation or dormancy.

The Physiological Facts of Hibernation and *Samadhi*-

- Samadhi is like a state of hibernation.
- During hibernation or *Samadhi*, life leads under lowest metabolic rate.
- Respiration and heart rate becomes decreased in slowest rate.
- Starts cellular respiration for maintaining body temperature and body environment.
- Restored fat converts into energy gradually as per demand.
- Timelessness observed –this duration does not count up in the life span.
- *Samadhi* or hibernation or dormancy prevents from the adverse effect of the unsuitable climatic conditions or changes.
- Physical activities become sustained.

The respiration and heart rate some time observed parallel to each other. Normal value of human heart beat is 70 – 80 per minute and respiration rate is 14 to 18 per minute. The excitement and depression creates parallel changes therein. It has observed the high breathing rate species are having shorter life span than lowest one. For example tortoise (breathing rate is 5 per minute and human rate is 15), so that tortoise leads 400 years life and human leads 100 years. The lowest rate of breathing signifies comparatively long life span.

Life Survives in Delta Frequency even after Brain Dies

On December 29, 2008 eminent painter *Manjit Bawa* died in New Delhi after continuing from irreversible coma from last three years. The brain death had diagnosed by

reflexes of brain stem test. After brain death he slipped into the vegetative state and survived with the help of ventilation machines in critical intensive care unit (CICU).

The Palestinian leader **Yasser Arafat** had suffered from brain death and more than three months he survived with the help of artificial life support systems.

Another well-known example of **Susan Anne Catherine Torres (Susan Torres)**, the 26 year old American woman, a researcher of National Institute of Health (NIH,USA) is notable here, she was pregnant and at that time carried 24 weeks matured foetus. She lost her consciousness after occurrence of a stroke. After stroke aggressive melanoma cancer spread to her brain and resulted in brain death. In spite of her brain death, doctors assured her husband she would be delivered healthy baby. Therefore she continued kept alive for three months on life support machines.



Fig. 30: Susan Torres

A website (www.susantorresfund.org) helped her husband Jason Torres to raise money for medical bills had estimated \$ 4,00,000 (USD). Eventually she delivered her healthy daughter on 2nd August-2005, after completion of three months vegetative state and nine months of pregnancy. There was no complication during delivery by caesarean section. Her daughter weighs was one pound and 13 ounces and was 13 and a half inches long, almost doing well. After giving birth of her daughter on 2 August 2005 Susan Torres had removed from artificial life support system on 3 August 2005 and finally turned remained physical death.

Syncope (Sudden Loss of Consciousness)

The Syncope is a condition that signifies a sudden loss of consciousness for a temporary period-little or long duration. It may be caused by some strong psychological component, cerebral ischemia, trauma, hypoglycemia or hypotension. Where brain sustains consciousness due to insufficiency of blood supply and frequencies could be turned in to delta range.

Brain needs always a sufficient quantity of oxygenated blood but blood insufficiency causes loss of consciousness. Syncope normally recovers automatically after sometime without any special medication.

Outlook of Autohypnosis Session

Relaxation – Sit or lay-down comfortably and try to relax your body and mind, take deep breaths, relax muscles, close eyes, feel comfortable and scan your entire body.

Entire Body Relaxation Exercise- Use step by step the following exercise for relaxing the entire body-

1. Concentrate your mind on your head and face, facial muscles are being relaxed. The brain is generating waves, toward the body parts and you are feeling well relaxed.
2. Now the muscles of the neck and shoulders are being relaxed.
3. Both arms up to palm and fingers relaxed.
4. Diaphragmic breathing (deep breath) started; consequently the chest, lungs and heart relaxed.
5. Simultaneously the abdomen, back, hips relaxed.
6. Both legs from thigh, knee, ankle, toes, and sole up to fingers are being relaxed gradually.
7. Therefore, the entire body has been turned in to the quite relaxed and comfortable condition.

Autosuggestion – This step is very important because you want to hypnotise to yourself. Now you are conscious. You start to give suggestion as per your goal. First give suggestions for body and mind relaxation then induction of sleep and trance. If you want to drop into the normal sleep after session, don't give awakening suggestion but if you want to come back conscious after the session give awakening suggestion as per your requirement. During trance you want to do what, that should be suggested also.

Induction of Trance – Use a suitable technique to induct the trance and enjoy the session with imagery and insight performed therein.

Come out from the Trance – The duration of trance may be depended as per deepness of trance or suggestions given at beginning. Usually you can either drop into the normal sleep or come back on the consciousness.

The Techniques of Autohypnosis

The Clinical Technique –The patients who are treated by the Hypnotherapist could be introduced for autohypnosis by imposing post hypnotic suggestion (PHS) during trance in the clinical sessions. When patient wants to get ride from the dependency of clinical sessions and continue further by self then the therapist may be allowed for the same. The therapeutic use of autohypnosis is having a great importance. Normally the hypnotherapist gives only five to ten sessions for any patient and then after he could introduce autohypnosis for continuing the further treatment. The post hypnotic suggestions may be followed as-

1. When you will gaze the power spiral (or any other target) you have to go automatically in the trance and may be able to perform practice and then after come out from the trance.
2. At 10 PM when you will prepare self for meditation, you have to drop into the deep trance automatically.
3. When you will gaze on the candle flame for 3 minutes continuously, you have to go into the trance.
4. When you will chant a particular *mantra* for 5 minutes continuously at evening, you have to go into the trance.
5. When I will call you over telephone and suggest you to go into the deep sleep, you have to go easily in the sleep and you will follow my suggestions well.

The Technique of Gazing – Fix any target like power spiral (fixed or moving) or any black point spot or candle flame, start gazing continuously without blinking. Within 2 to 5 minutes you will feel fatigue eyes. Then suggest yourself to undergo into the sleep for certain purpose and after completion of desired task return back to the normal consciousness.

The Technique of Blinking Eyes – This technique is also like gazing, use usually same targets. Fix your eyes on the target point, start blinking eyes to create tiredness and lethargy then proceed for appropriate suggestions.

The Technique of Yoga and Tantras –The technique has been used by the monks, sages, saints, ascetics called *yoga* and *tantras* technique. There are some historical evidences of Indian sages they performed penance and had undergone the *Samadhi* for a long duration while his body was covered with sand and soil. The *Samadhi* had manifested by *yogi* and *tantricks* initially inducted by autohypnosis and empowered by some *mantras* and mysticism.

The Computerised Techniques – Some computer software are available in the market for hypnotic induction, these multimedia audiovisual programs help to induct the trance. The computer assists the person for undergoing the trance through suggestions as step by step process, when he gazes at the monitor screen. The programs are associated with automatic arrangement of light, sound, psycho-drill and psycho-kinetic effects. The stand alone software versions may be helped you for autohypnosis session.

Moreover, many worldwide websites are also available in the internet. They help for training, active session, software CDs etc.



Chapter : XV

The Clinical Suggestions

The entire life of human being and creatures is guided by the suggestions. There are two kinds of suggestions- autosuggestions and external suggestions. Autosuggestions are mostly followed by everyone. But in the field of clinical hypnosis external suggestions are having a great importance and manifest the success of treatment process. The therapist time to time imposes different kinds of suggestions as stated below-

Kinds of the Suggestions-

1. **Post Hypnotic Suggestions (PHS)** – The post hypnotic suggestions are given in trance but those affects in normal conscious state of the patient. Sometimes the PHS overleaps the consciousness and drive the patient to do as suggested at all, while the patient could not be recognized the proper reason behind the compulsion of certain insistence.
The post hypnotic suggestion is a great phenomenon as it influences the subconscious. Suppose the therapist during the trance has asked the patient to meet him after a fortnight at a particular hour. When the patient comes back to normalcy he would not record this suggestion in the conscious mind. But because of its recording in the subconscious, the patient would be restless and eager to meet the therapist at the suggested time, even if the conscious mind would not be able to know the reason behind it. The subconscious becomes active and overcomes the conscious. That is why the patient is under a greater compulsion to meet the therapist at the suggested or appointed time.
2. **Autosuggestions** – In case of autohypnosis, the suggestions are given by the self and for the self are called autosuggestions.
3. **External Suggestions** – The suggestion imposed by therapist or any other person are called external suggestions.
4. **Insight Suggestions** – The suggestions those perform the extraordinary sense of perception (ESP) are called insight suggestions. While imposed insight suggestions the person performs works without using his sense organs like ears, nose, tongue, eyes, skin.
5. **Analgesic Suggestions** – The analgesic suggestions are used to give attainment of pain and stress. There are pain relievers.
6. **Anesthetic Suggestions** – The anesthetic suggestions produce sense loss in a certain part or entire body.
7. **Regressive Suggestions** – The regressive suggestions are used to recall scenario and time wise past time or past life memories of the person as live form at a standstill in present. While person behaves and plays his past life, usually as a replay of that particular required entire event or events.
8. **Trance-Inductive Suggestions** – Suggestions those induct the deep sleep or trance are called trance inductive suggestions. There are useful to induct the trance and relaxation of the entire body.
9. **Wake-up Suggestions** – The wake-up suggestions are to carry back the normal conscious of the patient from the state of created trance.
10. **Recalling Suggestions** – The recalling suggestions are administered to recall the past memories concerned with any event or reorganization of persons, places and items those have been forgotten.
11. **Illusive Suggestions** – The illusive suggestions creates illusion while perception of real information received from the sense organs like – ears, nose, eyes, tongue and skin. The

person will percept and act accordingly as he suggested by the therapist whether it may be rational or absurd.

12. **Defensive Suggestions** – The defensive suggestions are given to the patient for his support to develop confidence and about the state of trance when he is going to attempt at first.
13. **Rejected Suggestions** – The suggestions those not followed or accepted by the patient are called rejected suggestions. It may be either due to inappropriate deepening of trance or the suggestion is absolutely against his faith and tradition. The recurrence of rejected suggestions may cause termination of trance as sudden.
14. **Curative Suggestions** – The suggestions those are given to cure the certain disorders, called curative suggestions. These suggestions are used for clinical purpose to cure the disease or disorders.
15. **Cataleptic Suggestions** – The cataleptic suggestions produce a condition in which the muscles of entire body or limbs remain passive in any position, where observed sensory and muscular systems under full control of the therapist.
16. **Lethargic Suggestions** – The lethargic suggestions induce the sleep at the beginning of sessions. The rapid eye movements (REM) observe under effect of lethargic suggestions. Lethargic suggestions are given to induct the lethargy or intoxication in the mind of patient.
17. **Therapeutic or Clinical Suggestions** – The suggestions concerning with treatment and often used clinically are called therapeutic or clinical suggestions.

Do's and Don'ts for Effective Suggestions-

1. Be confident about your purpose and ideas before initiating the suggestions.
2. Always act in a natural and well decent manner with patient.
3. Always be sure about the meaning and effect of the suggestions.
4. Maintain a record of given suggestions to the patients as individually.
5. Always try to understand the intellectual and physical capacity of the patient along with the deepness of the trance.
6. Always give positive suggestions.
7. Avoid using negative sentences and wordings.
8. Always speak in normal understood able speed.
9. Always be helpful and attentive for the patient.
10. Try to understand all the discomforts and problems of the patient during trance and treatment.
11. Never leave alone a hypnotized patient.
12. Never appear as in a hurry, anxious, worried, confused or unsure before the patient.
13. The hypnotic trance is too easy or too difficult, it should not be disclosed.
14. Always be sure the patient is conscious and normal after the treatment.
15. Never impose the suggestions forcibly against believes, manner, tradition or comfort of the patient. Otherwise he will feel restlessness and may be come out from the trance or rejected the segmentations.
16. It should be kept in the mind there is no any hard and fast or uniform rule applicable for every patient as same way, it will vary-person to person, time to time and condition wise.