



Hypnosis and physiotherapy



Hypnose et kinésithérapie

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SUMMARY

Hypnotherapy is now a validated evidence-based science, demonstrated on brain imaging, especially thanks to modern techniques of medical imaging. Imaging studies further enabled the hypnotic state to be described as a specific state of consciousness, differentiating it from other states of consciousness. This state of consciousness is primarily characterized by a state of mental permeability or suggestibility, showing an increased ability to produce desirable changes in motivation, habits, lifestyle, health, perception and behavior as well as modifying physical sensation. Its usefulness is interesting for physiotherapists since hypnosis has higher levels of evidence than many other conventional tools used in physiotherapy. The basic techniques of hypnosis are: the interview which seeks to put the patient at ease, eliminating all preconceived misconceptions about hypnosis and creating treatment expectations that are as positive as possible; suggestion which is the most powerful technique in hypnosis: direct suggestion, indirect suggestion, post-hypnotic suggestion, and self-suggestion; induction which is the process of transition from the usual waking state to the hypnotic state; visualization which consists in a virtual experience of a specific event proposed by the therapist. It is often used by physiotherapists in traumatologic, rheumatologic and neurologic rehabilitation, where efficacy is improved by hypnosis. Hypnosis affects the subconscious, which is the center of emotions, habits and automatisms. The subconscious transmits commands to the unconscious mind, which in return translates these emotions into somatic feelings and reactions. In parallel, the neurophysiology of hypnotic suggestion is currently well-defined, as is the brain permeability associated with increased regional cerebral blood flow in the attentional system of the brain. Furthermore, positive expectation and labeling of "hypnosis" seem to have remarkable effects on the efficacy of the procedure. Clinical randomized controlled studies have shown efficacy on pain in general, tension headache and migraine, temporomandibular pain, chronic low back pain, osteoarthritis and bone and joint pain, fibromyalgia, regional pain syndrome, phantom limb pain, sports rehabilitation, irritable bowel syndrome, stress and anxiety, and many other pathologies. Hypnosis is a powerful and very useful tool in everyday physiotherapy.

Level of evidence. – NA.

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RÉSUMÉ

L'hypnothérapie est désormais une technique scientifiquement validée, démontrée par imagerie cérébrale, surtout grâce aux techniques plus modernes d'imagerie médicale. Les études en imagerie médicale ont aussi permis de décrire l'état hypnotique comme un état de conscience spécifique qui le différencie des autres états de conscience. Cet état de conscience se définit surtout par un état de perméabilité mentale ou suggestibilité. Celle-ci est caractérisée par une capacité accrue à produire des changements souhaitables aux niveaux de la motivation, de

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L'habitude, du mode de vie, de la santé, la perception, et le comportement, ainsi qu'une modification des sensations physiques. L'hypnose intéresse le kinésithérapeute dans la mesure qu'elle comporte un niveau de preuve plus important que bien d'autres des outils conventionnels utilisés dans la kinésithérapie. Les techniques de base de l'hypnose sont les suivantes : l'entretien vise à sécuriser le patient, en éliminant toutes les idées fausses préconçues à propos de l'hypnose et créer une attente la plus positive possible ; la suggestion : c'est la technique la plus puissante de l'hypnose : suggestion directe, suggestion indirecte, suggestion post-hypnotique, autosuggestion ; l'induction : c'est le processus de passage d'état d'éveil habituel vers l'état hypnotique ; la visualisation consiste à vivre virtuellement un événement précis proposé par le thérapeute. Elle est récemment et fréquemment utilisée par les kinésithérapeutes dans la rééducation en traumatologie, rhumatologie et neurologie, où efficacité est améliorée par l'usage de l'hypnose. L'hypnose agit au niveau du subconscient, le siège des émotions, des habitudes et des automatismes. Le subconscient transmet la commande à l'inconscient qui à son tour traduira ces émotions en réactions somatiques. En parallèle, la neurophysiologie des suggestions hypnotiques est actuellement bien définie, ainsi que celle de la perméabilité cérébrale qui est associée à l'augmentation du débit sanguin cérébral régional au niveau du système attentionnel du cerveau. D'autre part, l'attente positive et l'appellation de « l'hypnose » semblent avoir des effets remarquables sur l'efficacité de la procédure. Les études cliniques ont démontré une efficacité sur les douleurs en générales, les céphalées de tension et la migraine, les douleurs temporo-mandibulaires, la lombalgie chronique, l'arthrose et les douleurs ostéo-articulaires, le syndrome douloureux régional, la fibromyalgie, les douleurs du membre fantôme, la rééducation sportive, la colopathie fonctionnelle, le stress et l'anxiété, et bien d'autres pathologies. L'hypnose est un outil puissant et utile pour la pratique quotidienne des kinésithérapeutes.

Niveau de preuve. – NA.

Editor's Note

This article is part of an indivisible whole pub-bound as a folder named "Hypnosis: act on the unconscious for a comprehensive rehabilitation" and consists of the following texts:

- Gedda M. Hypnose : agir sur l'inconscient pour une rééducation intégrale. Kinesither Rev 2015;15(162).
- Moreni A, Barber A. Origines et histoire de l'hypnose. Kinesither Rev 2015;15(162).
- Wehbe J, Safar Y. Hypnose et kinésithérapie. Kinesither Rev 2015;15(162).
- Ansel B, Mareau C. Hypnose en rééducation pédiatrique : de la suggestion hypnotique à l'hypnose conventionnelle. Kinesither Rev 2015;15(162).
- Théron JN. L'hypnose peut-elle être un adjuant à la rééducation des dystonies de fonction et des amputations de la main ? Kinesither Rev 2015;15(162).
- Barber A, Moreni A. Place de l'hypnose dans le traitement des syndromes douloureux régionaux complexes. Kinesither Rev 2015;15(162).
- Cercleron F. Hypnose, douleurs et kinésithérapie : données de la littérature et réflexions. Kinesither Rev 2015;15(162).

Hypnosis exists since the beginning of humanity and is an integral part of our daily life. It is a complement of great importance and usefulness to techniques and treatments available for all health professionals.

Hypnotherapy is a procedure by virtue of which the professional proposes to patients suggestions resulting in changes at both physical and psychical levels. It can eventually have desirable changes at the following levels: motivation, self-image, habits, style of living, health, perception, way of thinking, behavior, in addition to a modification of physical sensations [1,2].

This article will in the first place bring up the classical definition of hypnosis as well as the neurophysiological and neurovascular changes under hypnosis. Then, it will treat in details the

basic techniques and the principles of hypnotherapy. Finally, it will consider the various fields of application where hypnosis may represent an added value to the practice of physiotherapy. At the beginning of 1990s, the neuronal mechanisms related to the hypnosis were only identified by electroencephalogram (EEG).

The introduction of the most modern medical imaging, such as the Functional Magnetic Resonance Imaging (fMRI) and the Positron Emission Tomography (PET) in the neurosciences field, has allowed the functional and morphological study of the brain [3–5].

Such measurement tools have brought elements of understanding at the level of hypnosis phenomenon as well as at the function of the brain under hypnosis. They have allowed establishing a parallelism between the subjective impressions a patient under hypnosis feels and the visible physical changes that appear at the different cerebral regions. The studies of medical imagery have allowed in their turn to describe the hypnotic state as a specific conscious state distinguishing it from other states of consciousness, such as sleep, wakefulness, and meditation [3–6].

The number of scientific articles and publications related to medical applications of hypnosis are multiplying and their quality is improving day after day.

The goals of hypnotherapy are generally:

- a better life quality;
- a better health;
- a better function;
- a reduction of pain.

It is also worth mentioning that sophrology was born from hypnosis. In 1932, Doctor Alfonso Caycedo founded the sophrology called Caycedian inspired by oriental techniques, therapeutic hypnosis, and progressive muscle relaxation of Jacobson method. Sophrology was officially represented as a new profession in 1992 [7].

Therefore, why not consider hypnotherapy as a new discipline, integrating and associating it to physiotherapy?

There is no consensus defining hypnosis [8], however, there are many definitions of hypnosis in the bibliography. Selecting the definitions in this article was not easy, even the definition of the American Psychological Association (APA) is criticized by various schools of hypnotherapy [9,10]. There are even literature reviews solely about the definition of hypnosis or

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