

LESSON THREE – *Hypnosis, the basics.*

We are now going to commence our study of hypnosis. It is not the intention to turn you into a general practice Hypnotherapist. This is something that you might want to do after gaining experience of PLT. The intention of this part of the course is to introduce you to hypnosis and provide you with sufficient information to enable you to induce a hypnotic trance state sufficient for you to conduct past life regression.

One of the things that I hope this lesson will do is to dispel some of the fallacies you may have heard, and thus the misconceptions that many people may have, concerning hypnosis.

Hypnosis is a natural state. Although you may not be aware of it, you will have experienced the hypnotic state many times. In fact you experience it twice a day at least. It is that interim period as you gently change from wakefulness to sleep, and the reverse as you wake up in the morning. In addition to this, there is the state of mind that you experience during a period of reverie or daydreaming.

I would like to quote a world famous Hypnotherapist [Dr. Michael D. Preston](#): *“Hypnosis is not dangerous.... No one has ever died from being hypnotised. The same cannot be said about any other form of medicine. There is no modality less dangerous than hypnotism. No therapy is safer.”*

The use of hypnosis in past life therapy brings this therapy into the orbit of Hypnotherapy. Therefore we may consider PLT to be a sub-modality of Hypnotherapy. Generally speaking, Hypnotherapy, is one of a number of treatment modalities within the orbit of Complementary Medicine; that is to say it is a complete therapy within its own right, practiced by properly trained professionals.

What is hypnotherapy? Since we are considering PLT as a sub-modality of Hypnotherapy it behoves us to pay some attention to Hypnotherapy as general treatment modality. Hypnotherapy is the combination of hypnosis with therapeutic treatment (in our case the specific therapeutic treatment of PLT); that is to say, hypnosis is a technique within which the subconscious mind is utilised to achieve a therapeutic end.

The earliest references to hypnosis come from ancient Egypt and Greece, furthermore, references have been found in texts from ancient China and in the Hindu Vedas.

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The father of modern Hypnosis may well have been [Frans Anton Mesmer](#), who lent his name to the term “mesmerised”. Born in 1734, Mesmer graduated in medicine at Vienna.

James Braid, a doctor practising in Manchester, coined the term ‘hypnosis’ in the 1830s (from the Greek word ‘hypnos’ which means ‘sleep’). He later regretted his choice of word, because hypnosis does not involve sleep, but by then the term was in common usage.

A British surgeon, [James Esdaile](#), used hypnosis as an anaesthetic and performed many well-documented operations using the technique. However, the discovery and use of medical ether in the 1840s effectively ended the use of hypnosis as an anaesthetic. Notwithstanding this, Hypnotherapists refer to the deepest levels of Hypnosis as the “Esdaile state”.

No discussion of the history of Hypnotherapy, however brief, would be complete without mention of [Emile Coue](#). Emile Coue was a French apothecary who pioneered the method of self-hypnosis called autosuggestion during the 1920s.

Essentially, Coue in his work emphasised the role of positive thinking in self-improvement. In this way he proposed bridging the gap between behaviour and cognition, a concept offered over 250 years earlier by Blaise Pascal. Coue is famous for the mantra “*Every day, in every way, I am getting better and better.*” But can reciting a mantra involving positive thoughts improve ones outlook? There is now much evidence that it can.

The British Medical Association (BMA) has only recently changed its attitude to complementary therapies, including hypnosis. Although the BMA formerly opposed non-medical treatment, they now accept the efficacy of some properly regulated complementary therapies, and have advised doctors to seek more information to help meet public demand for treatment. As a result, many doctors now refer patients directly to qualified hypnotherapists.

At this juncture it might be sensible to try and answer the question “What is Hypnosis?”. My answer might surprise you. The first thing to state is what hypnosis is not. It is not some form of mind control imposed upon the subject by the hypnotist. In fact it is not possible for anyone to hypnotise anybody else. A suitable description of hypnosis is:

“Hypnosis is a state of awareness dominated by the subconscious mind.”

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There is in fact no such thing as hetero-hypnosis. It is completely impossible for me, you, or any body else to “hypnotise” another person. What actually happens is that the hypnotist acts as a catalyst or facilitator of hypnosis. He or she creates an atmosphere for the subject, which, when coupled with guidance from the hypnotist, creates in the subject the conditions that enable the subject to enter the hypnotic state. It is in this induced hypnotic state that either beneficial suggestions can be made, or the process of psychoanalysis may proceed, or the regression of the subject to the recall of a past life experience.

The Hypnotic State. A hypnotherapy session usually proceeds in four stages, namely

- 1) Induction
- 2) Deepening
- 3) Therapeutic Intervention (Past Life Recall and Analysis)
- 4) Release (often termed “awakening”).

Hypnotherapists use the terms “sleep” and “awakening” even though they completely understand that the subject is not “asleep” and therefore does not in reality need “awakening”. He or she is already awake albeit in an altered state of consciousness. It is just that hypnotherapists find it convenient to use terms such as “sleep” and “awake” when dealing with the subject.

Throughout the therapy session the subject is completely aware and can release his or her self from the hypnotic condition should they so wish. Since this is the case it is clear that no one can be made to perform any act that they did not wish to perform just because they are in hypnosis.

One of the most important debates in hypnotherapy circles concerns the definition of the hypnotic state. There is one school that believes that there is no such thing as a unique hypnotic state. All that occurs is that hypnotic induction does no more than reduce conscious attention in the subject and increase the accessibility of the subconscious mind. I must state that although this position is perfectly valid, and such an hypothesis in no way diminishes the ability of a hypnotherapy practitioner to assist a subject to enter the hypnotic state, it still leaves the question as to why this is at all possible. My own view is that it is because of the way in which evolution has structured the human brain, and because certain types of activity are carried out by different parts of the brain, that the hypnotic state can be induced. I do not wish to go into any depth concerning the structure and working of the brain except as is necessary to explain this view.

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The human being possesses what has been described as a triune brain. That is to say we have a composite of three brains inside our skulls, linked and interlinked, all with their own special function. The newest part of our brains, called the neo-cortex, is split in two halves the right hemisphere and the left hemisphere. These halves can communicate with each other because they are linked by a *corpus callosum*, which might be described as a multi channel cable linking the right brain and the left brain. Research over the years has shown that the right brain is the part that deals with imagery, creativity, imagination, and emotion; whereas the left brain is our calculating, logical facility. It is the part of the brain that deals with language as written and as the spoken word.

What may well be happening during the hypnotic induction process is that something analogous to a switch is pressed that permits the right brain to dominate over the left brain. The result of this is that logical consciousness is superseded by imagination, emotion, and the ability to use symbolic and visual imagery. The hypnotic state is therefore a particular state of awareness dominated by the right hemisphere of the neo-cortex.

Induction. So how does the hypnotherapist assist his client in entering the hypnotic state? This is done by directing the focus of conscious attention and while consciousness is directed elsewhere, making suggestions to the subconscious mind to relax. Now you are sitting reading this lesson, your consciousness is focussed to the subject we are discussing. Your left hemisphere's critical faculties are functioning. You can therefore choose to read, think about something else, or doze off. Now the subconscious mind does things in a different way.

Under normal circumstances the subconscious mind takes direction and suggestion from the conscious mind only. It therefore makes the assumption that any suggestion or directive it has received has been processed and accepted by the conscious mind and may be acted upon. In fact it must act upon the suggestion – it is a rule that a suggestion accepted by the subconscious mind must manifest itself in motor action. Once the subconscious mind has accepted a suggestion it will act on it. Thus the essence of suggestive hypnotherapy is to get the subconscious mind to accept the therapist's suggestions without the intervention and rejection of the conscious mind.

An induction usually commences by sitting the subject in a comfortable chair and directing the focus of their conscious attention to a spot on the wall, perhaps just above the level of their line of sight so that a little bit of strain is involved and thus the focus of consciousness is further assisted. In this state the hypnotherapist makes continuous suggestions to the subject to enter a relaxed (or light hypnotic) state. The net result of this when successful (and it usually is) is that the subject is relaxed and ready to accept further suggestion.

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It is worth noting at this point that anyone who is of sound mind may be hypnotised. In fact, the more intelligent and imaginative a person is, the easier it is for them to enter hypnosis; and the deeper the state that they can entertain.

Deepening. At the point at which the subject evidences the symptoms of light hypnosis such as lassitude, slight flushing of the face, regular, but shallow breathing eyes rolled upwards in the head to name but a few, the hypnotherapist gets the subject to use visual imagery to allow him or her self to accept the hypnotherapist's suggestions to enter a deeper level of hypnosis. It is important to understand that even though we talk about a "deeper level of hypnosis", the subject is fully conscious but is in a much heightened state of awareness. Conscious attention is minimised and although the subject may appear as if asleep, that is no more than the external visual effect of reduced consciousness and increased internal activity. One would only have to indicate that there was a danger (such as a fire) for the subject to instantly return to the world of conscious activity.

Therapeutic Intervention. Once the subject has achieved a deepened state of hypnosis the hypnotherapist can start to make beneficial suggestions, which are immediately accepted by the conscious mind. This is the therapeutic intervention phase of a hypnotic session. However, this has to be done in a very particular and precise manner otherwise unwanted side effects can result.

Let me give you an example. We will assume that a client has come to me specifically to be helped with his smoking problem. No matter how much will power he tries to apply to his habit he is unable to give it up. The more he focuses on the habit and keeps saying to himself "I will not smoke another cigarette", he falls foul of one of the laws formulated by the great therapist Emile Coue. One of his laws is known as the Law of Reversed Effect. What this law says in effect is that "the harder you try, the less you succeed". I am quite sure that all of you can remember a circumstance when this affected you. (Remember that time when however hard you concentrated on your tennis serve the worse it became?)

This law is of great importance because if the hypnotherapist phrases his suggestions in ignorance of this law then not only will he fail to achieve his ends but he may also cause internal psychic stress. I use the word psychic in the sense of psychology and mental processes, not in any mysterious or paranormal sense.

If my subject is in a deepened state of hypnosis and I make a suggestion such as "You will not smoke anymore" the law of reverse effort will kick in and the subject may well increase his smoking and at the same time experience psychic stress because at the same time he is trying to carry out the suggestion that he or she will not smoke anymore.

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Suggestions given in hypnosis must be carefully couched so that they can be accepted by the subconscious mind and not invoke any of the various known laws of mental behaviour. A much better suggestion, for example would be “Smoking a cigarette leaves a dirty taste in you mouth. ”, “The smell and taste of tobacco makes you feel unwell.” When preparing suggestions for use in hypnotherapy it is of crucial importance to avoid direct negatives, vagueness, and imponderables. Only positive, direct suggestions will succeed.

Release from the hypnotic condition. Once the hypnotherapist has completed his suggestions it is necessary to release the subject from the hypnotic condition. This is usually done by saying something along the lines of:

“That completes our session. I am now going to count from 5 down to zero. I will count 5 - 4 - 3 - 2 - 1 - 0. At each number counted down you will find yourself becoming more and more awake and when I count zero you will be wide awake and feeling thoroughly refreshed and alert.

Five – starting to wake up

Four

Three – feeling more awake

Two

One – eyes open

Zero – fully awake and you now feel refreshed and relaxed.”

Autosuggestion. In the case of suggestion therapy, hetero-suggestion, the treatment process can be augmented by repetition. In this case the hypnotherapist can prepare audio tapes or CDs to enable the subject to sit quietly at home and enjoy a treatment session without attending the hypnotherapist’s consulting room. Such tapes are made more effective when they are specifically prepared for the individual client.

Another way in which the hypnotherapist can assist his or her client is by teaching them self hypnosis. And the way in which they can apply auto-suggestion. This technique is very successful when used in character building and confidence building situations because they can be used on a regular basis. Reinforcement can be carried out at intervals by the hypnotherapist.

Analysis. What I have just been talking about is the better known use of therapeutic intervention during hypnosis – that is to say suggestion therapy. Suggestion therapy is a very effective way of helping a subject to solve their problem but it does have its limitations.

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Using suggestion therapy might well cure my client of smoking, and undoubtedly he or she feels that the treatment was worthwhile. However it is possible that the tobacco habit has been replaced by another habit such as sweets or chocolate, or perhaps an increase in alcohol consumption.

Suppose that the client had been suffering from claustrophobia and after suggestion therapy he or she went round saying something to the effect of "*Gosh, I have no problems going into lifts or small spaces anymore.*" Unfortunately they are now quite apprehensive of going out into large spaces, or have developed a fear of crowds, or some other phobia completely unconnected with claustrophobia has taken root. The subject of course makes no connection with this new phobia and the removal of his or her old phobia. So, what went wrong?

In matters of the mind as in physical mechanics the law of cause and effect applies. The original phobia or habit had to have a root cause. In the case of smoking it may have been no more than the effect of peer group pressure and the fact that "everybody smoked". It therefore became the social thing to do. This is likely to be true for many, many cases but not all.

In some cases the smoking habit, this 40 cigarette a day consumption, may be the outward manifestation of an inner symptom. This inner symptom may be described as an unreleased head of steam, an internal pressure, or, in the language of psychoanalysis, a repressed memory. Thus the presenting problem may be caused by a repressed memory from childhood. This internal stress, or repression, manifests itself as the excessive consumption of cigarettes. Or the inability to get into a lift, or a bad stutter, or an asthma attack. If the repressed memory can be released then the external symptom will disappear.

The technique used to uncover the repressed memory is hypnoanalysis. In hypnoanalysis the hypnotherapist induces the subject into the hypnotic state and then encourages the subject to describe what he or she is thinking. The first session proceeds along the lines of free association and is often referred to as "shaking the tree". In the case where the subject exhibits the manifestations of free-floating anxiety then, in the hypnotic state, the cause of that anxiety, that repressed memory is actually not that far from thought.

By getting the subject to describe his thoughts and mental images the repressed memory will, after several sessions, be brought to the surface and released with the appropriate abreaction. This is the classic technique of psychoanalysis. When this happens the subject is freed of the repression, understands his or her situation and will no longer exhibit the anxiety symptoms previously demonstrated.

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In Conclusion I think that you now have a good overview of hypnotherapy. I also think that having the general overview helps you to place PLT in its correct context. Hypnotherapy is a valuable treatment modality suitable for many conditions and has been of enormous help to many thousands of people worldwide.

So it is by means of the hypnotic induction technique, that is to say by the complete inward focussing of attention and the elimination of outside stimuli, that the subject gradually and gently makes a transition from conscious awareness to subconscious awareness, thereby entering the state of hypnosis.

A deepening process is then administered, causing the subject to physically relax and to be mentally removed from the critical faculty of the conscious mind that analyses words and events. In the case of suggestion therapy, therapeutic suggestions are then made in words and phrases readily understood by the subject.

Acceptance of these suggestions by the subject is based upon his or her needs, desires, and beliefs. Mental images are created in the mind of the subject by the language and suggestions of the hypnotherapist. The subject then makes his body conform to the subconscious image that he or she has of his or her self. The subconscious mental image then becomes the energy and driving force within, and the end result is that the body emerges as a product of our imagination.

In the case of PLT the suggestions are framed to cause the subject to regress to teenage years, then to childhood, and then to a time before birth. In the next lesson we shall continue to study hypnosis in more depth.

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QUESTIONS ON LESSON THREE

Please answer the following questions using no more than 75 words for each, unless stated otherwise. Incorporate the questions within your answers (e.g. the number of days in the year is 365)

- 1) What are the four stages of a hypnotherapy session?
- 2) Give a brief description of hypnosis. In other words: “What is hypnosis?”
- 3) What is the difference between “suggestion therapy” and “analytical therapy”
- 4) What does the term “Esdaile state” mean?
- 5) Who were James Braid and Emil Coue?
- 6) What was Coue’s famous mantra?

Return your answers to either
selfstudy@naturalhealthcourses.com

or

tutored@naturalhealthcourses.com

whichever applies.

Do not send any attachments, just type your answers into the body of the email. Please complete the subject line of every email thus:

Full Name – Past Life Therapy (Tutored or Self Study) - Lesson 3

Leave at least one blank line between each answer.

Don’t forget to keep a copy for your own records

Recommended Reading:

http://www.naturalhealthcourses.com/Recommended_Reading.htm