

Hypnosis goes to the heart

Hypnosis Goes Straight To The Heart of the Problem – Bruni Brewin

Probably the best way that I can allow people to gain an understanding of the capabilities of Clinical Hypnotherapy is for them to read the below article that was published in a magazine called 'Natural Bloom' in 2004, which is about one of the Clients that came to see me. Will, (not his real name) and I wished each other a Merry Xmas in December 2007 and I am pleased to report that all is well with him still. As with every therapy, it is the combination of level of training of the therapist, rapport, general life skills and interaction between client and therapist that develops the outcomes in therapy. This story started when the client, who I'll call "Will", came to see me about a problem with his heart.

Will's story

Will's heartbeat fluctuated from 30 beats per minute to 200 beats per minute. (A normal range is somewhere between 70-80 beats per minute.) His doctors had strongly advised him that he should have both a cardiac restrictor and a pacemaker inserted into his chest to control his arrhythmia because sometimes only the top half of his heart did the work, while at other times only the bottom part of his heart worked. However Will was a bit reluctant to do this...

Will's cardiologist also suggested he needed to do more exercise so he started with gentle exercise and increased it slowly until he was able to do quite a lot of bike riding along with some other cross training such as walking and weights. After further questioning from his cardiologist Will also became aware that his eating habits were not helping his problems either – he used to skip breakfast and eat too much at night – so he changed his eating habits and followed his cardiologist's diet to the letter.

However after a number of visits to the hospital when his heart had again been beating 200 beats a minute, Will's cardiologist told him that "It was all in his head." Well, in Will's book that meant there was only one person that could deal with this type of problem, and that was a hypnotherapist. Hence his visit to me.

Will's initial concerns

During his first session with me Will explained he had a couple of concerns:

that someone (me, as the hypnotherapist) might have total control over his mind, and that he could not be hypnotised.

However, Will felt completely at ease when I told him that it was not really possible for me to have complete control over his mind, and anyway I had no intention of doing any such thing. Just to reassure him, I mentioned that if I said anything that was against his ethics, his belief system, or his religious beliefs, his subconscious mind would simply ignore me.

His second concern was the result of another occasion when someone had attempted to hypnotise him, but he did not feel it had worked. So, could I give him some sort of proof that he was hypnotized? I did a simple susceptibility test by suggesting that as my hand was going down his right arm that it would feel heavy and at the same time, the left arm would become lighter and lighter. Both of which happened, and no further convincing was necessary.

Will's belief system

During his first visit Will explained that he had had a heart attack but that the blockage had been cleared with angioplasty treatment. Although this proved to be successful, it was after that, that the arrhythmia started and that that now made him a candidate for a stroke. He explained that as a preventative measure he now took tablets to thin the blood and to prevent it from clotting, however this had resulted in some unpleasant side effects.

Will explained, "When you have a heart attack you have to deeply consider why you had it. Bad luck doesn't come into the equation. Let's be honest, there has to be a reason. Hereditary factors could be part of it, but is a long way from being the sole answer. Saturated fat in my diet, smoking and lack of exercise were possible other contributing factors".

Between the hospital visit and coming to see me, and to get a better idea of his problem, Will studied up on electro-physiology and the result of catheter ablation. He learnt all about the hearts electrical circuiting. Then during one of our hypnosis sessions Will believed that the subconscious was showing him that his heart's electrical circuit was going haywire. This led him to further research, which then led him to believe that there were two things wrong with the electrical circuit of his heart – supraventricular tachycardia and an atria flutter.

The supraventricular tachycardia he felt was easy because he was able to control that after just one session. The atria flutter he explained he found much harder to get rid of because it interfered with many circuits. He felt that these two were the problem because, in hypnosis when he concentrated on the electrical circuits in his heart, that was what he felt. (It is important to state here, that whatever the client feels, that is what is dealt with. Whether it is accurate or not, that is their reality for the purpose of hypnotherapy.)

Will surmised that; when the heart beats faster it goes into red alert like you have just done a very exerting exercise, or you are having something life threatening happening to you. This made self-hypnosis a tough job for concentration because that anxiety attack would not go away until he had changed the electrical circuit.

Breathing

During our first session Will found out that his breathing was very radical. He also found that he was bouncing his breath on the way in as well as on the way out. (When he breathed in, his breath would stop suddenly, then start again and the same would happen when he breathed out.) He also found it difficult to correct this, because a strong feeling of anxiety would come over him. This was due to a strong feeling when he breathed in that he needed to quickly breath out again. And when he breathed out, a strong feeling of anxiety came over him because he was scared he would not be able to breathe in fast enough.

So to counteract this I asked Will to work on breathing like an opera singer. This technique involves breathing in through the nose gently and taking the breath into the stomach (bypassing the chest), and then only when the stomach is full of air, continuing to gently breathe in until the chest is also full up, thus changing the dynamics of breathing. When the body was full of breath, he would gently release this by breathing out of his mouth, tightening the stomach muscles to release the air from the stomach and then continuing to release from the chest area. By practicing this during self-hypnosis at home between sessions, Will was able to get a gentle easy rhythm going.

Will saw this as a start to getting his heart to go on another electrical circuit that did not have that extra beat in it. However Will felt that he had to still check his breathing on a regular basis. He checked it for being slow, smooth and continuous as well as deep enough. He noted that as a rule his arrhythmia normally happened at a set time. We also instructed his subconscious to check his breathing whilst sleeping and to wake him up sufficiently to get his breathing back in order should that become necessary.

Self hypnosis or self talking

When the heart was beating in good rhythm Will repeatedly said to himself, "This is the electrical circuit I need to be on". Then he would try to concentrate on the feeling of the electrical circuit in his heart. At other times when he felt the heart going out of rhythm, he would tell himself, "Find another circuit" and he would keep repeating this slowly until the heart found a good circuit to follow. Then he would say to himself, "That's good, that is where you should be".

Will felt that checking the breathing was something that requires 24/7 attention, to make sure these bad habits didn't come creeping back. Will noted that by using self-talk and talking slowly and calmly (during self hypnosis) telling himself that everything was all right, and that there was no threat, he managed to calm the breathing down. At other times just telling himself to change the circuit and repeating that instruction, and then thanking the subconscious for the good job done seemed to work as well. He would remind it to repair that bad circuit. He then coupled that with thinking of something

like the clouds floating by, or other things that he found calming and peaceful to his mind. This all helped to stop the red alert and feelings of anxiety.

Therapies used

- Tracking – going back in time to the first time a particular emotion or feeling came into being, then working with this to a point where negative feelings no longer hold anxiety and can be filed in the mind as not important.
- Ideo-motor questioning – using finger levitation for some of the work that is best done in trance at a deeper level without involving the conscious part of the mind.
- Anchoring, Reframing, and Metaphors were also used.
- Additionally some trauma release therapies were used. Such as Eye Movement Desensitisation and Reprocessing (EMDR) (Shapiro 1995), Traumatic Incident Reduction (TIR) (Gerbode, 1989) and Emotional Freedom Techniques (EFT) (Craig & Fowley 1995).

Whilst all these individual therapies are valid in their own right without formal hypnosis, it is my observation and knowledge over the past 16 years, that when carried out during hypnosis they work much faster and get right to the crux of the matter, taking substantially less time to release trapped emotions.

Of course, the most important part of all therapies, is knowledge, caring, empathy and a good rapport with your client.

In summary

Let's summarise Will's problems here:

- Heart attack, then arrhythmia.
- Cure: Get rid of saturated fat from the diet. Stop smoking. Do gentle exercises and build on these.
- Heart beating too fast.
- Cure: Self hypnosis and slow deep breathing for 5 minutes, if still a problem take a tablet for slowing the heart.
- Heart beating too slow (shallow breathing).
- Cure: Self hypnosis and deep breathing.
- Bouncing breath or stopping before completely out.
- Cure: Self-hypnosis and controlled deep breathing. Go for repetition rather than trying for too much control, otherwise anxiety will take over.
- The heart going excessively too fast or too slow can cause clotting (stroke).
- Cure: Take ½ aspirin or warfin (under the direction of his doctor).
- Panicky subconscious.
- Cure: Self hypnosis together with controlled breathing and concentrating on something, which is peaceful to you.
- Post trauma
- Cure: Saw a hypnotherapist to get him through it.

Will acknowledged that the cures that he used are by no means the answer for everyone, although it has been the answer for him and also for some other people suffering from similar problems.

It is now 12 years since Will had his heart attack, but he still keeps in regular contact. He has no pacemaker, no cardiac restrictor and only occasionally relies on medication such as a ¼ – ½ of an aspirin when he feels the need for a bit of extra help. He still takes some warfin (as directed by his doctor). He feels that he has his arrhythmia problem 95% under control and he no longer suffers from anxiety attacks. Will continually states to whomever will listen that he is more than happy with his outcome and prognosis for the future.

Bruni Brewin is the president emeritus of the Australian Hypnotherapists' Association. She has a thriving practice in NSW.