HYPNOTIC APPROACHES IN CANCER AND PALLIATIVE CARE

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HYPNOTIC APPROACHES IN CANCER AND PALLIATIVE CARE

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Previous publications have been dedicated to my wife, Marie and our daughter, Clémence. I dedicate this book to my youngest daughter, Alice, beauty of music shall always open your heart to the beauty of life.¹

Sylvain Néron

To Anne for her continued love and support, and to daughters Sarah, Becca, and Rachel who have taught me to love, to laugh, and to take life not too seriously. I also dedicate this work to the many teachers who have called me their doctor.

Daniel Handel
Read Me First
This book provides examples of and teaching related to hypnotic interventions on behalf of patients facing advanced or terminal illness. To do so, it uses numerous features such as hypnosis session video recordings, audio, video, and written commentaries and analyses, and a glossary. It also suggests several ways to steer through the information so each reader can adopt a preferred sequence of consultation. Here are a few tips to help you navigate through this particular learning environment.

Navigating Through Chapters and Pages

For navigating from page to page, swipe one finger from one side to another of the screen.

For navigating between chapters and pages, tap on your iPad screen once. A drop-down menu will appear at the top of the screen. Tap on the icon next to the “Library” button and tap on “Table of Contents” to access to the navigation view. You can also swipe fingers from opposite corners to the center of the screen to access directly to this view.
Tap on the dots at the bottom of the screen to navigate between chapters or swipe your finger to move from page to page and then tap on the desired one to access it.

See also the section named Contents to access to a particular section of the book. You just need to tap on the links provided (text in blue underlined).

Consulting the Glossary

Tap on an underlined term to see the related article in the glossary. To consult the glossary directly, tap on your iPad screen once. In the drop-down menu, tap on the icon next to the “Library” button and tap on “Glossary.” To navigate in the glossary, tap on a letter on the left side of the screen or swipe your finger up and down on the list of terms and tap on the desired term to access to the article related. To close the glossary, tap on the “Done” button in the upper right corner of the screen.
Taking Notes and Highlighting Terms

Double-tap on a word to select it. You can extend your selection by dragging the blue bars that appear at the beginning and at the end of your selection. Tap on the “Highlight” button to highlight the selected text. Tap on the “Note” button to add a note. To consult your notes, tap on your iPad screen once. In the drop-down menu, tap on the second icon next to the “Library” button. Swipe your finger up and down to navigate through your notes. To close this view, tap on the “Done” button in the upper right corner of the screen.

Following Links

Words in blue underlined are links. If you tap on them, you will jump to another part of the book or to the Web. Be careful when navigating to another part of the book to remember the page you are currently reading if you wish to return to it. There is no “Back to” button in eBooks on iPad. For returning to the book after accessing to Web, double-click your iPad Home Button, then swipe left or right and tap on the eBooks app.
Watching Videos of Hypnosis Sessions

This book proposed a case-based learning experience. All the material is oriented to video clips demonstrating several ways of incorporating hypnotic modalities at several points of the illness trajectory and in different contexts of the treatment continuum. For watching those videos, the YouTube app must be installed on your iPad (install this app).

Two types of videos are presented in this book: videos of full hypnosis sessions or extracts of those sessions. For watching a full session video, tap on the video’s thumbnail. The video will open in the widget Bookry. To close the video, tap on the “X” button in the upper left corner of the screen. For reading the complete verbatim of the video, tap on the Verbatim icon. To return to the video, tap on the “Back to complete video” button. The extracts of sessions are accessible by tapping on the associated links (text in blue underlined) to YouTube. To return to the book after watching an extract of a session, double-click on your iPad Home Button, then swipe left or right and tap on the eBooks app.
Watching, Listening or Reading
the Authors’ Commentaries and Analyses

The videos of sessions are followed by commentaries and analyses from the authors in video, audio, and/or written forms.

To watch a video commentary, tap on the video’s thumbnail. The video will open in the widget Bookry. To close the video, tap on the “X” button in the upper left corner of the screen. To read the complete verbatim of the video, tap on the Verbatim icon.

To listen to an audio commentary, tap on the Audio commentary icon. To read the complete verbatim of the audio track, tap on the Verbatim icon.

Néron and Handel’s written commentaries are identified by two different icons. Simply tap on those icons to read them.

To learn more about how to use the app eBooks on your iPad, visit wikihow.com or about.com. To read this book on your Mac computer, the operating system OS X v10.9 Mavericks must be installed.
Foreword
On behalf of the multidisciplinary professional members of the Louise Granofsky Psychosocial Oncology Program at the Jewish General Hospital in Montreal, I am delighted to support the innovative work that you will find in this unique multimedia eBook. In providing clinical, teaching, research, and academic activities in a tertiary care McGill University-affiliated hospital, our mission is to provide cutting-edge, evidence-based services to our community. Dr. Néron’s efforts in developing clinical programs in psychosocial and palliative care settings over many years have been outstanding.

Dr. Néron and his colleagues have worked tirelessly over many years to develop an intuitive approach to teaching and training in the area of non-pharmacological symptom management through hypnosis and other techniques, and the results are nothing short of remarkable!

The videos you will see are profound, moving, inspirational, and yet didactic at the same time. My sincere hope is that learning through this new multimedia approach will bring many clinicians to an understanding that can usually only be obtained in the best face-to-face clinical workshops with master clinicians that are so rare these days.

One of the unique aspects of this eBook is the collaboration of Dr. Sylvain Néron and Dr. Daniel Handel, past hospice and palliative medicine fellowship director at the National Institutes of Health and current Chief of Palliative Medicine at Denver Health Medical Center, who bring their collective expertise in palliative care to the teaching of future generations of students. Their collaborative psychological and medical perspectives and style are a unique aspect of this special interactive format.

I am delighted, pleased, and thrilled to introduce this novel approach to teaching and training in oncology and palliative care. The work that you are about to review and to engage in is a work of great passion and great pride, not only for the authors, but also for the institutions which they represent: the Jewish General Hospital in Montreal and the Denver Medical Center in the United States.
With their enthusiasm and personal touch, the authors have honoured our donor, Mr. Granofsky, and the memory of his late daughter, Louise, for whom our program in Montreal is named. We look forward to many more opportunities where we can create books that will meet the needs of many practitioners in different areas of psychosocial oncology.

The patients as well as the families of deceased patients have graciously allowed us to use these last days of the patients’ lives for this presentation, and we are most sincerely grateful for their cooperation.

Our profound thanks go to all of the collaborators that have contributed to this interactive, didactic work. It really speaks to novel, integrative ways of teaching and training in the twenty-first century. I know this is an effort that will provide the reader and the learner with an experience that will not soon be forgotten. With Dr. Néron and his colleague Dr. Handel, you are in the hands of master clinicians and teachers.

Zeev Rosberger, PhD

Director, Louise Granofsky-Psychosocial Oncology Program
Segal Cancer Centre, Jewish General Hospital

Director, Psychology Division
Institute of Community and Family Psychiatry, Jewish General Hospital

Associate Professor, McGill University
Acknowledgments
Our gratitude goes out to many individuals who, over the years . . .

. . . Helped the authors honour the memory of Louise Granofsky.

First and foremost, we express our everlasting gratitude to Mr. David Granofsky for his benevolence, generosity, and humanism, which inspired this project to blossom into what it is today. Additionally, thanks to the Louise Granofsky Psychosocial Oncology Program for its generous financial support.

I, Dr. Néron, wish to acknowledge all the encouragement given to us over the years from Dr. Gerald Batist, Director of the Segal Cancer Centre of the Jewish General Hospital (JGH), and Dr. Zeev Rosberger, Director of the Louise Granofsky Psychosocial Oncology Program.

. . . Honoured the authors with friendship and wisdom.

I wish to express my warm gratitude to Mr. Bruno Fortin, psychologist, and Stanley Blicker, MD.
Our gratitude goes out to many individuals who, over the years . . .

. . . Weaved the words, thoughts, images, sounds, and sensations of hypnosis (rendered visible).

We would like to express our appreciation for the excellent work of research assistant Samara Perez and her team of volunteers for their work in 2010–2011, and the team of volunteers in 2012. We warmly thank Ms. Tamraa Greenidge for her help over the last few years. We particularly acknowledge the enthusiasm, insight, and commitment of Mr. Michael Noory throughout his work on this project.

. . . Painted a picture worth a thousand words.

Years of intermittent collaboration with the Audiovisual and Information Technology services of the Jewish General Hospital were essential in the development of the concept, especially the contribution of Mr. J. Martinez and P. Mbayo in 2011.

. . . Shaped audio and visual features into an eBook about healing suffering using hypnosis.

We express our deep appreciation to Mr. Claude Langlois, a specialist in multimedia production. From your personal experience of caring for your sick friend, you understood our commitment to teaching professionals how hypnotic approaches can prevent suffering during the illness trajectory.
Our gratitude goes out to many individuals who, over the years . . .

. . . Carved our creative sides through the poetry of thought.

I acknowledge the deep influence that late French poet Charles Baudelaire and the author Isaac Bashevis Singer, a Nobel laureate, have had on my hypnosis language. This excerpt of Beaudelaire’s poem, “Correspondences,” is a source of my inspiration:

All Nature is a pillared temple where,
At times, live columns mutter words unclear;
Forests of symbols watch Man pass, and peer
With intimate glance and a familiar air.
Like distant, long-drawn calls that seem to be
Obscurely, deeply blended into one—
Vast as the dark of night and day’s bright sun—
Sound, perfumes, hues echo in harmony.
Singer’s moving story, “Ole and Trufa,” inspired the utilization of my “imagistic correspondences” and metaphorical language as applied to many individuals, including their loved ones, at the end of their lives. This story is about the journey of two leaves confronting their existential pain upon facing their inevitable separation: “For some reason unknown to Ole or Trufa, they had survived the rains, all the cold nights and winds, and still clung to the tip of the twig. Who knows the reason one leaf falls and another remains?”

. . . Graciously and generously shared their experiences of utilizing hypnosis throughout the illness trajectory. They will remain our teachers. Dr. Handel and I express our everlasting gratitude to:

Mr. BE, Mr. DEL, Mr. MC, Mrs. TA, Dr. Z, Mrs. Broco, Mrs. LAP, Mr. Mike, Mrs. W, Mrs. Zel, Mrs. C, Mrs. M, Mr. Sea, and Mrs. Wild Creek.
Disclaimer
1. Any rights or financial rewards gained from this educational material will go to the Jewish General Hospital Foundation. Neither Dr. Néron, Dr. Handel, co-developers, co-authors, nor anyone else appearing in the videos will receive any financial remuneration from the sales of this eBook.

2. The content of this eBook is only for educational use and is intended for health care professionals. The presented techniques and interventions should be limited to their professional domain of practice; therefore, any individual using these techniques assumes liability for any consequences associated with their use. The authors will assume no liability for any consequences associated with their use.
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Chapter 4

Symptom Relief, Emotional Containment, and Spiritual Enrichment
The soul is the essence of a human being, and the sufferer is the focus of palliative care. Since physiological function, sensory perception, and the meaning of bothersome symptoms have been shown to be influenced through hypnosis, this psychological technique is increasingly being employed to palliate the symptoms of advanced disease. The hypnotic language of mental imagery, dreams, fantasies, metaphors, and meanings can affect bodily functions, quality of life, and the search for soul healing.
Background

Mrs. C is both an inspiring and inspired individual.

A 52-year-old single lady, she works as a professional home caregiver. Her mother and siblings live in the country she has left 30 years ago. She perceives her mother as a less than protective figure, and the title of this case refers to her need for a protective mother figure.

However, the gospel songs, prayers, and her father’s singing are recalled as sources of affective nurturing and protection.

Context

Mrs. C’s Illness and Treatment Trajectory

Mrs. C was diagnosed with stage 4 breast cancer. She underwent a lumpectomy, chemotherapy, and radiotherapy. Psychiatry was consulted and a treatment for clinical depression was initiated. The patient developed metastases in her brain and had surgery for a right frontoparietal craniotomy; as a result, she developed limb myalgia and numbness. Furthermore, the metastases in her cerebellum make her susceptible to falls.
The Context of the Session Presented in This eBook

Mrs. C was admitted to an active oncology ward of our cancer centre, initially receiving advanced cancer care from ward staff. After some time, the goal of care changed to palliative end-of-life care. This is when the consultation-liaison supportive care team was consulted in order to provide palliative care to Mrs. C until she passed away. Dr. Néron, a member of the team, was consulted because the ward staff wrote: “Patient is tearful, she wants to die, depression.”

The Initial Session at Bedside

In short, at the first session, it was 5 p.m. and I had previously reviewed her chart. I knew that she had had a partial response to antidepressants. She was neither suicidal, nor was her mood affect-reactive.

Bedside Interventions

- Mrs. C was seen 4–5 times/week at bedside for quite different lengths of time (10-90 minutes).

I connected right away with a core meaning in her inner life by asking with a critical choice of words:

Dr. N: “How is your soul today?”

Mrs. C: “I want to be in my Lord’s arms.”

The “Lord’s arms” became a major theme of our sessions.
• First for symptom relief: On the initial session, I proceeded with the first hypnotic induction for adjunctive analgesia (Lord’s arms imagery).

• Second for hypnotherapy (clinical hypnosis and existential psychotherapy):

  1. She told me, “**Even a hen protects her chicken under her wings and fights the snakes**” in order to explain that she did not perceive her mother to be a protective figure.

  2. On the other hand, her late father had been a nurturing figure, **and she feels the beat in her body, listening to him singing gospel.**
Session Presented
in this eBook

This session was recorded about 5 weeks prior to her death.

It was recorded in a studio across the street of the main hospital building. Mrs. C had to use a wheelchair due to increased weakness and abdominal pain in the hours preceding the session, a session she refused to cancel. We offered her the only sofa available in the studio, so she could lie down.

Focus of Session

An illustration of hypnotic suggestion for:

a. emotional containment;
b. suggested pain relief;
c. spiritual enrichment.
Learning Objectives

a. How to formulate suggestion.
b. The use of suggestion.
c. The utilization of patient language. Discern the “kernel of truth” then offer its reply.
d. To better understand the use of suggestion in advanced illness that simultaneously addresses physical, emotional, and spiritual dimensions of care.

Multimedia Instructional Material

A) Educational Objectives

This material is presented explicitly for educational purposes and not for experiential practice. The learner is invited to use these recordings to examine and inform his/her own practice and is encouraged to do such examination in an active and alert learning state.

B) Transcribed Verbatim from Complete Video

42-minute session (1 session: Part 1 and part 2).
## Video Clips

15 video clips (1–15) were extracted from the full 42-minute session.

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<thead>
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<th>Video Clips Titles</th>
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N = Néron  H = Handel  L = Linden
The Case of Mrs. C
Complete Video
The Case of Mrs. C
Transcribed Verbatim from Audio

N: Well in some ways, to some degree, like talking but talking with your hands . . . These wonderful hands.

C: [Laughter] The French people too . . . they talk with their hands . . .
N: Yeah!
C: They talk with their hands . . .
N: That’s right! Well . . .
C: I always express . . . very strong . . .
N: Uh-Huh . . .
C: As part of me so . . .
N: Yeah . . .
C: So . . . I will use it.


“It is certainly the case that ‘hypnotic’ procedures can provide the cement for the structure of an eclectic programme of therapy, allowing one to move fluently between the different levels—cognitive, behavioural, emotional and physiological” (p. 284).

N: Well, this is what we’ve done in our sessions, you know, working in hypnotic trance with parts of you . . . okay?

C: Uh-huh . . .

N: So as now you get ready to go in your trance . . . rolling your fingers . . . and . . .

[Laughs]

N: Rolling your eyes . . . [Laughs]
N: We can joke... you know...

C: Of course!

N: And rolling your eyes as you do usually... and close your eyelids, and you don’t even know which part... if your upper lids or, you know, your lids, which one are heavier...

C: Uh-huh...

N: They just connect together.

And as you breathe... as you take... breathing... and exhale... you relax your eyes...

And deeper and deeper...
N: Well, you know very well how it’s done, your body knows.

Your body . . . your hands, knows.

N: As your inner mind expresses itself in every part of your body . . .

Now, breathing easier . . . and deeper . . . and easier . . . and deeper . . .

Mm . . . Wow . . .

N: You’ve done this all your comfortable life! Just like walking on the beach . . .

Just like . . . exactly . . .
N: And all these images, all these senses . . . from your inner self, rocking yourself back and forth, back and forth . . .

Yeah . . . Like this . . . and like this . . . exactly . . . mmm . . . There is this wonderful healing beat from a kind of bodily gospel.

It might come from your father . . .

Certainly from church and communities . . .


References


