

# HYPNO-ONCOLOGY

Solid Gold 2018

The Rev. C. Scot Giles, D.Min., BCC, DNGH OB

# PRESENTATION AVAILABLE

[www.CSGiles.org](http://www.CSGiles.org)

[www.NGH.net](http://www.NGH.net)  
CompMed



MY PRACTICE

# MY BACKGROUND

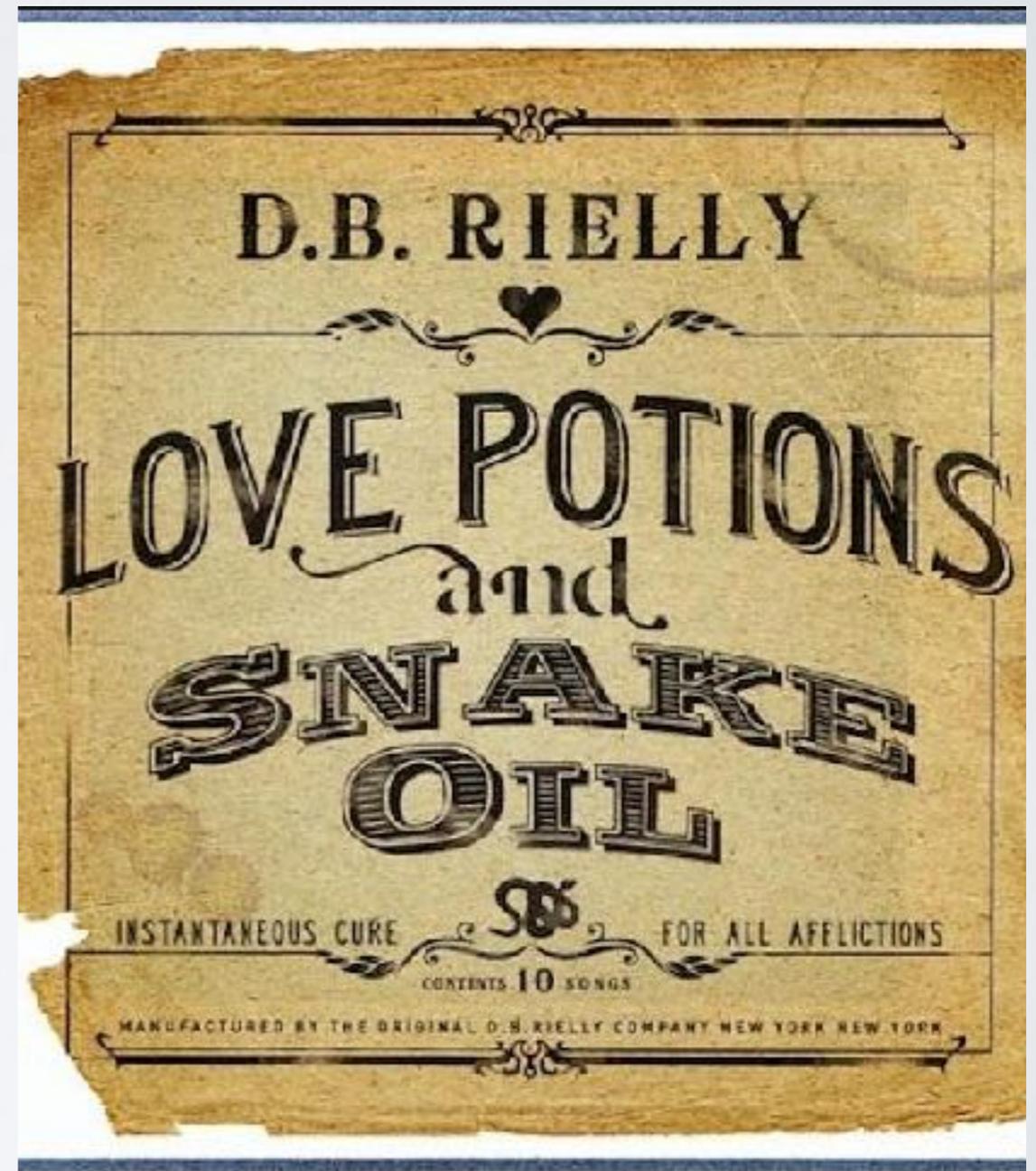
- BA., MA, D.Min., BCC, DNGH, OB
- Trained in the Ericksonian Tradition
- Exceptional Cancer Patients Organization (ECaP)
- HeartMath Certified Coach

# VENUES

- In practice as a Consulting Hypnotist for 27 years, specializing in Complementary Medical Hypnotism.
- Free Clinics at Little Company of Mary Hospital, Edward Hospital, Wellness House and Wellness Beyond Walls
- Research program at AMITA LaGrange Memorial Hospital
- Home Office: 20-25 private clients/week

# HOW BAD IT WAS

- Decades ago, Consulting Hypnotists were a laughing stock in the medical world.
- Exaggerated and intemperate claims still abound and make us look like amateurs.



# DO NOT...

- Claim you can cure cancer.
- That you can do cancer work single-session. It's a very complex hypnotic project.
- Imply the unconscious mind of the client caused the cancer, or that the patient "needs" the cancer.

# RESEARCH

- Pettingale, K.W., "Mental Attitudes To Cancer," *The Lancet* 1985.
- Spiegel, David, "The Effect of Psychosocial Treatment on Survival of Patients with Metastatic Breast Cancer," *The Lancet* 1989.
- Goodwin, Pamela, "The Effect of Group Psychosocial Support on Survival in Metastatic Breast Cancer," *The New England Journal of Medicine*, 2001.

# HYPNO-ONCOLOGY

- **Complement** to Allopathic Medicine
- Helps with **issues related to cancer**
- Goal is to build client **Resilience** in the **Four Domains of Resilience**, and
- To find **meaning** in the cancer journey

# INTRO TO MATERIALS

# HYPNO-ONCOLOGY NOTES

- 14 single spaced pages
- Extends and amplifies presentation.
- Giles Fellow Paper

*Hypno-Oncology, Page 1 of 14*

## **Hypno-Oncology**

By The Rev. C. Scot Giles, D.Min.  
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Certified Instructor, National Guild of Hypnotists  
Diplomate, National Guild of Hypnotists  
Council, Order of Braid  
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### **Introduction**

This essay can be thought of as an addition to the Complementary Medical Hypnotism Certification program of the National Guild of Hypnotists. It is intended to expand the training offered in that program to include the specific techniques to use when working with persons living with cancer. Therefore, all persons receiving this training are encouraged to also take the actual Complementary Medical Hypnotism Certification. Wherever possible I have avoided duplicating materials that are part of the Complementary Medical Hypnotism certification program.

The techniques shared in this curriculum are those developed as part of the I Can Act Now (ICAN) Program at LaGrange Memorial Hospital in LaGrange, Illinois. Founded in 1991, it was the first hospital-based, medically approved program in America for the hypnotic treatment of cancer. I have been the director of that program since its beginning.

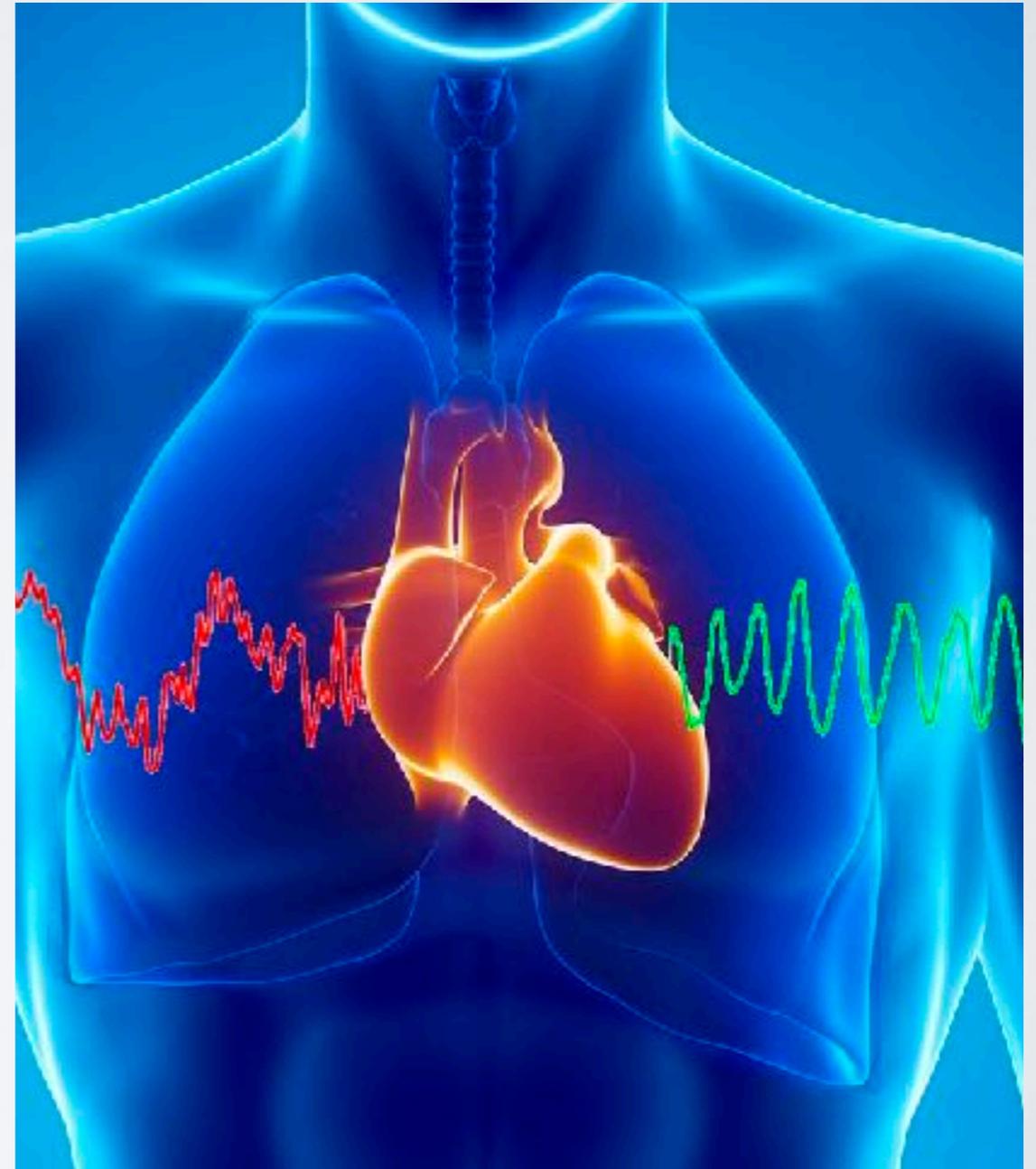
When some hypnotists seek out a training program such as this, what they are hoping to obtain is what amounts to a "spellbook," a collection of scripts they can read to clients with specific disease conditions. That is not what this program is about. Script creation is not a difficult task and every hypnotist should be able to create his or her own material. Knowing what to say in such scripts is what is important. This curriculum will teach you how to analyze the core issues of a client with cancer and show you how to help a client deal with those issues. Improvement in the quantity and quality of life nearly always follows in the wake of such interventions.

As we begin this journey I want to remind all hypnotists about two rules:

- The Golden Rule of Hypnotism: Do No Harm
- The Silver Rule of Hypnotism: You Cannot Take Your Client Where You Have Not Gone.

# RESILIENCE MATERIALS

- The HeartMath Institute
- Depletion to Renewal Grid
- Resilience and the Emotional Landscape



# RESEARCH ARTICLES

- [www.nih.gov](http://www.nih.gov)
- Benefits in Breast and Thyroid Surgery
- Personality Does *Not* Influence Cancer
- Pre-Surgical Hypnosis for Breast Cancer
- Reduction of Hot Flashes in Breast Cancer Survivors
- Cancer Care for the Whole Patient

HOW IT'S DONE

# FIRST

- Have a good basic grounding in hypnotism. There shouldn't be any glaring holes in your skill set.
- Don't set yourself up for failure.
- The Gold and Silver Rules

# THE CANCER CULTURE

- “Persons living with cancer (PLWOC)”
- Complementary v Alternative care
- Understanding the basics of cancer care
- Anecdotal Evidence v Controlled Research
- Medical Pessimism and Hexing

# THE CANCER PROFILE

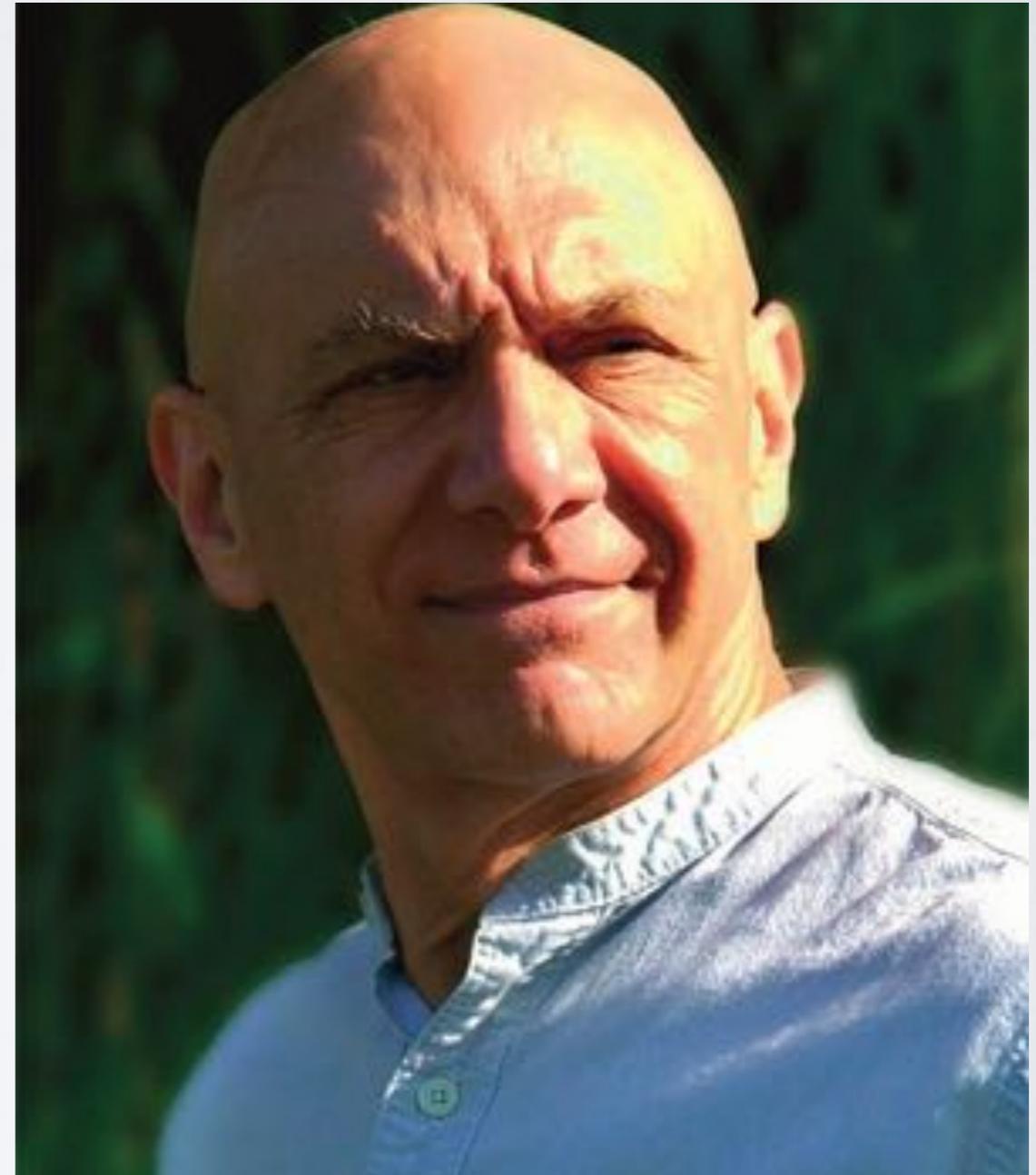
- It is normal for a PLWOC to be sad and worried. That does not mean they are depressed and anxious.
- Chemotherapy crosses the blood-brain barrier leading to cognitive issues.
- PLWOC are an infirm constituency and the hypnotist must adjust for this.

# THE CANCER PERSONALITY

- Tend to be the care-taking, over functioning members of their families who put everyone else first and themselves last.
  - May not feel worthy of spending money on their care.
  - Some may use cancer as the solution to a life problem.

# BERNIE SIEGEL, M.D.

- Studied PLWVC who beat the odds.
- They had personal characteristics in common and these could be taught.
- Hypnotism is a great way to do that teaching.



# CURE

- **C**- Crazy. They maintain a strong sense of humor
- **U**- Unconventional. They are open to options
- **R**- self-Referencing. They have self-interest and know it is not selfishness. They keep the locus of control even where medical system tries to remove it.
- **E**- Exceptional. They maintain a Positive Expectancy

# UNDERSTANDING CANCER

# DEFINED BY

- **Site**- location where cancer first occurred
- **Stage**- degree of spread, if any (usually 4 stages with sub-stages)
- **Type**- Subclass of cancer; Some cancers are aggressive other are not.
- **Grade**- Degree of aggression of the cancer in a particular patient

# TREATED BY

- Prevention/Early Detection
- Surgery (only for early stages)
- Chemotherapy/  
Radiotherapy



# AND BY

- Genetics
- Monoclonal Antibodies (immune stimulation)
- Vaccines (made from patient's own tumor cells)
- Antiangiogenesis (Thalidomide, Angiostatin, Endostatin)
- Hormone Suppression

# OUTCOMES

- Five Year Statistical Break Point
- Most people survive cancer at five years
  - Childhood Cancers- 70% response
  - Adults- 54% response

# CAUSES

- Genetic
- The Oncogenic Theory. Our body can control cancer unless inhibited.



# INHIBITION

- Environmental Factors
- Behavioral Factors
- Genetic Factors
- Emotional Factors (telomeres)
- and....

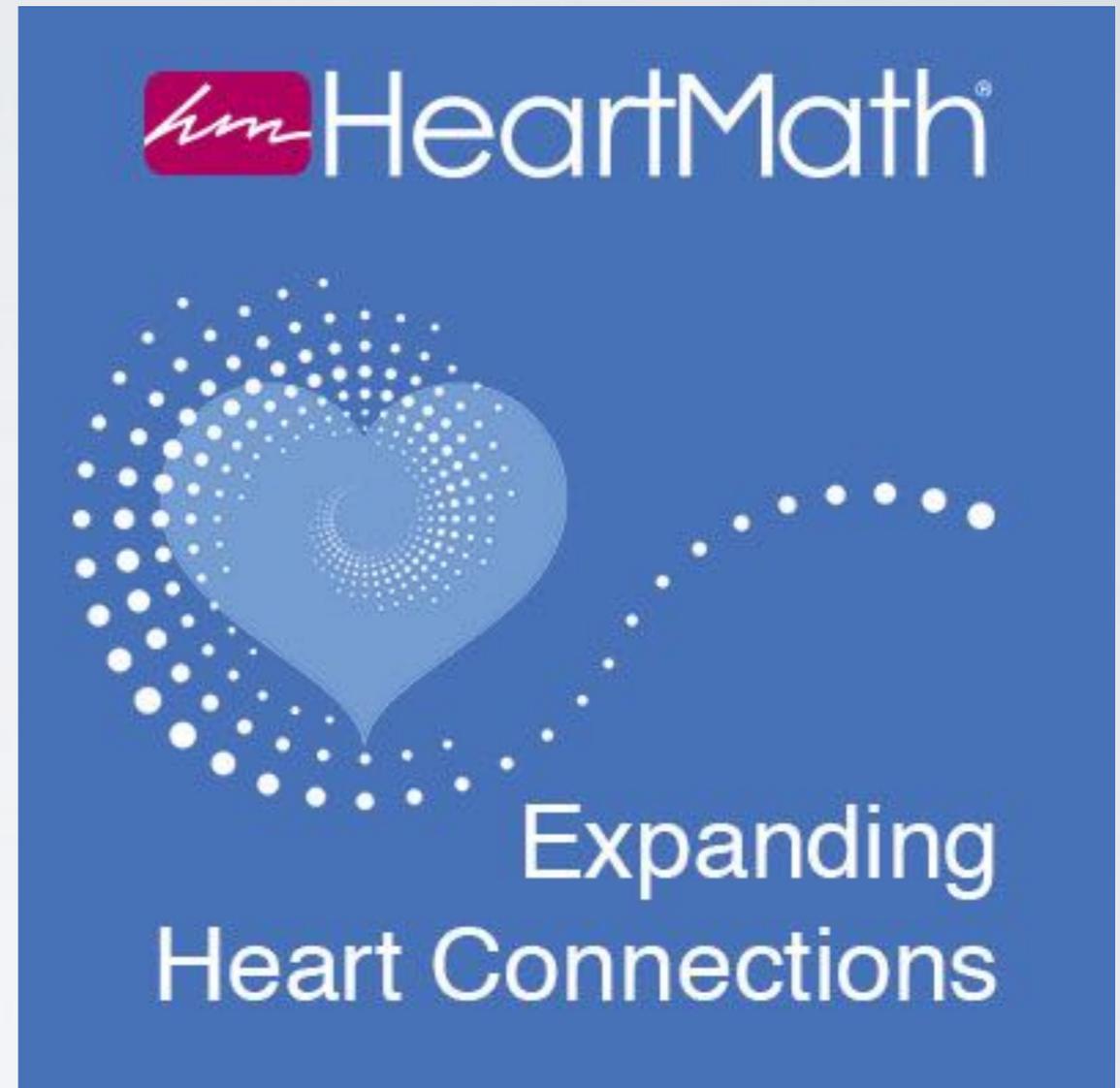
# ACE FACTORS

- Adverse Childhood Experiences Score
- Centers for Disease Control and Prevention (CDC) [www.ACEstudy.org](http://www.ACEstudy.org)
- Score between 0 and 10
- Correlation is not Causation.

# RESILIENCE

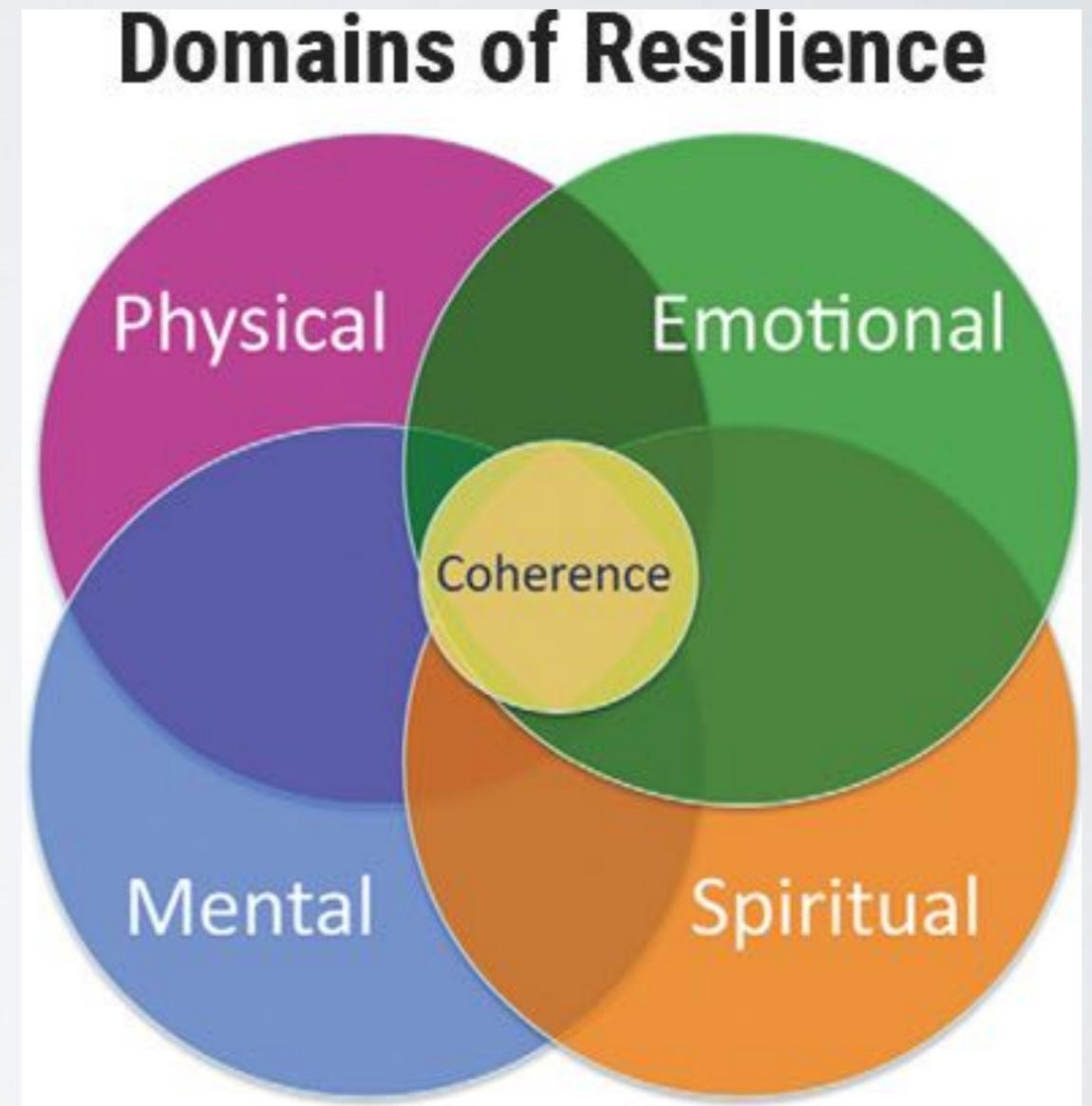
[www.Heartmath.org](http://www.Heartmath.org)

[www.Heartmath.com](http://www.Heartmath.com)



# DOMAINS OF RESILIENCE

- Physical
- Mental
- Emotional
- Spiritual
- Domains Interconnected



# THE BIG IDEA

- You must stay mindful of where each client is with regard to their Four Domains of Resilience.
- Your goal is to improve resilience in any area of deficiency.
- You can improve resilience by hypnotism to boost a particular domain, or if a domain is very weak...
- ...You can strengthen other domains to compensate.

# EXAMPLES

- Improve memory and focus
- Improve morale and instill calm (mood elevation)
- Enhance philosophy/spirituality (blueprint)
- Control physical side effects (comp med)

# DEPLETION TO RENEWAL GRID

MEANING MAKING

# MEANING

- The mind creates meaning as a primary function.  
What meaning does the cancer have for the PLWC?
- You can correct or improve that meaning hypnotically and the client's body will respond.

# RELATIONSHIPS

- “I was so upset at my divorce that I got sick.”



# FAMILY TRADITIONS

- “Every man/woman in my family has died from cancer, so that’s how I am going to go too.”



# CARE-TAKING

- “I’ve been so busy taking care of \_\_\_\_\_ that I never had time to take care of myself.”



# HYPNOTIC APPROACH

- Work through issues of divorce, perhaps with forgiveness or insight work.
- Imagery of bonding to ancestors in a healthy way instead of via cancer.
- Use future-pacing to program good self-care habits.

# THE BLUEPRINT HYPOTHESIS

# BERNIE SIEGEL, MD

- Blueprint, True Will, Personal Legend, Daemon, etc.
- The unconscious mind contains a blueprint for who the patient was supposed to be.
- Encourage self-reinvention, large or small

# DREAM ANALYSIS

The Natural Ally of the Consulting Hypnotist

# THE SAME BIOLOGY

- Dreams come from the same place trance comes from.
- Dream logic is the same as trance logic.





# THEIR VALUE

- The sum total of a client's dreams over time almost always points toward the client's blueprint.
- You hypnotically encourage the client to find a way to implement their blueprint. That is, to reinvent themselves.

# GUIDELINES

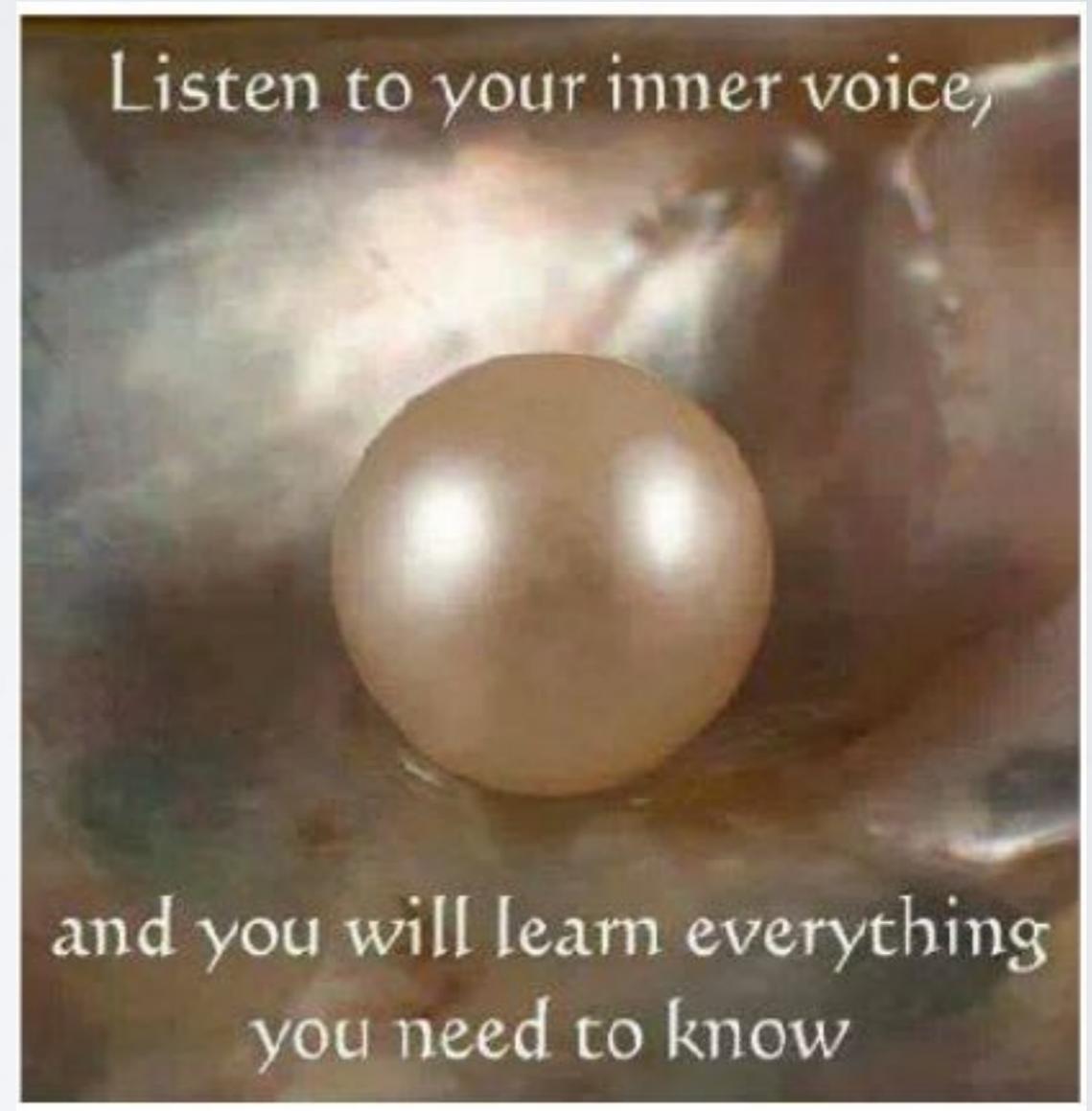
- Mostly we do not pay attention to our dreams
- Have recording method handy
- Never dismiss a dream as trivial
- Record as fully as possible
- Relate to events in previous day, if possible

# SAMPLE DREAM

- Why does she feel awful on awakening?
- What is the plot of this dream?
- What is her deeper mind trying to tell her?
- Is the timing of the dream significant?
- Who is Billy? How can you tell? Is there something about his condition that is relevant?
- What has this dream come to tell her?

# INTERPRETATION

- Always consider the literal meaning first.
- The feelings of the dream are always the feelings of the dream.



# COMMON DREAM THEMES

- The Lost Opportunity (final exam for a class you didn't attend)
- The Secret Saboteur (events conspire to thwart)
- Loss of Body Parts (often teeth)
- Houses/Buildings (reevaluation)

# ASSEMBLING THE BLUEPRINT

- What are the common dream themes?
- What sort of dreams produce the most positive feelings?
- What images show up in the dreams?
- You have it right when the client agrees.

# ENHANCE THE BLUEPRINT

- Direct Suggestions/Encouragement
- Future Pacing/Time Line Work
- Affirmation/Visualizations
- Heart Holographing

# WAKING HYPNOTISM

# TRANCE AND SUGGESTION

- Hypnotism is usually a combination of trance and suggestion.
- The goal of hypnotism is for the subject to comply with the suggestion or suggestions.
  - Suggestion can be direct or indirect.
- Waking hypnotism is suggestion without the use of trance.

# WORKS THE SAME WAY, BUT WITH CONVERSATION

- Build Rapport
- Create a Yes Set
- Direct Client's Attention
- Insert Suggestions



# HYPNO-ONCOLOGY

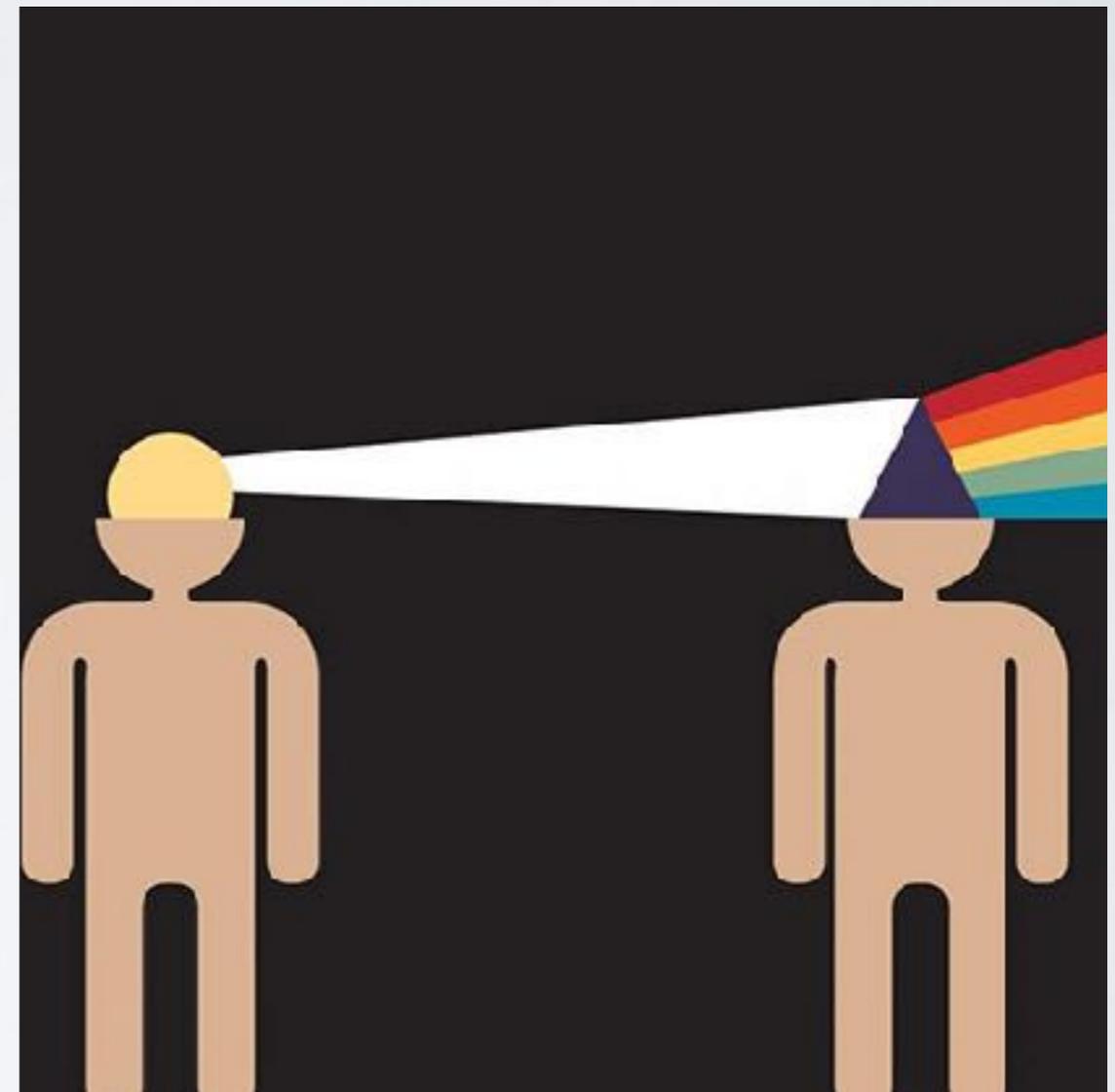
- Makes extensive use of Waking Hypnosis.
  - Allows work outside of consultation room (in a hospital/chemo room, with others present, etc.)
  - Maximizes your effectiveness as you seek compliance with suggestion 100% of the time you are with a client.

# CONTROL THE NARRATIVE

- Suggestion in service to building a Positive Expectancy.
  - Martin Seligman's Explanatory Style
- Encourage PLWC to explain the world to themselves in a positive way in all Domains of Resilience.

# EXAMPLES

- Victor Narrative
- Compassion Soak
- Future Pacing
- Boundary Setting
- Energetic Economy
- Absolute Yes and No Lists



# OPTATION

- Optation isn't Optimism. It means hopefulness.
- Encourage a decision to remain hopeful in an appropriate way. Always possible.
- Optation is a choice to tell the inner narrative in a certain way (Mastin Poem).

# TRANCE HYPNOTISM

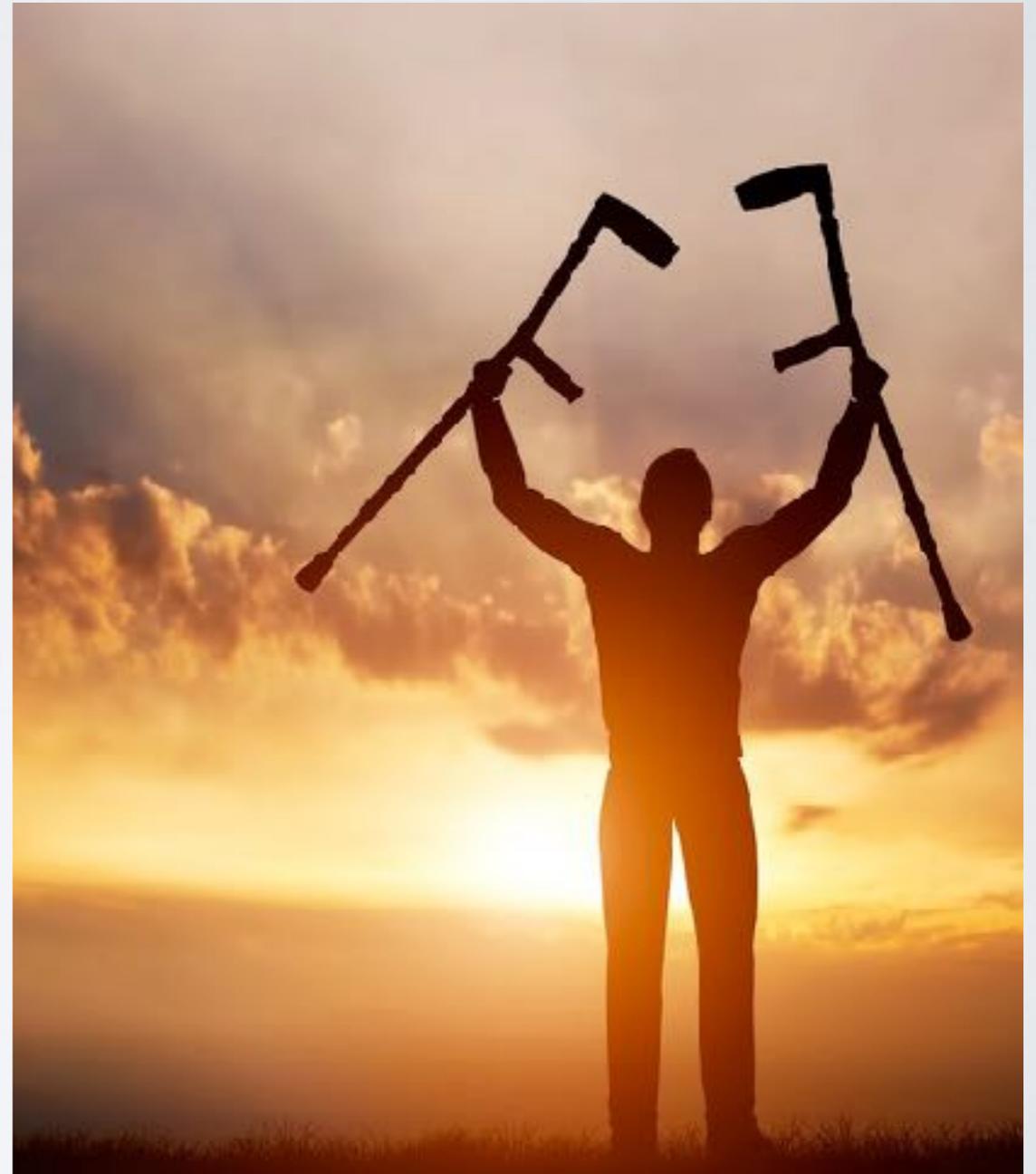
# SIMONTON VISUALIZATIONS

- O. Carl Simonton, M.D.  
(1942-2009)
- Getting Well Again, 1992
- The Healing Journey, 2002
- General v. Specific



# NON-VISUAL IMAGERY

- Imagined Sensations
  - Intense heat is often felt as healing.
  - Cooling can be pain relieving.
- Remembered Wellness



# ILLNESS AS A METAPHOR

- Boundaries
- Blessing In Disguise
- Appropriate v Over Care



# PARTS WORK

- Our Personality has Parts, each of which has a job.
- Inner Family Dialogue
- Inner Voice Dialogue
- There can be a healing part and a sick part.



# FUTURE PACING

- The mirror image of regression hypnotism
- General success and effectiveness work can be framed for this purpose.



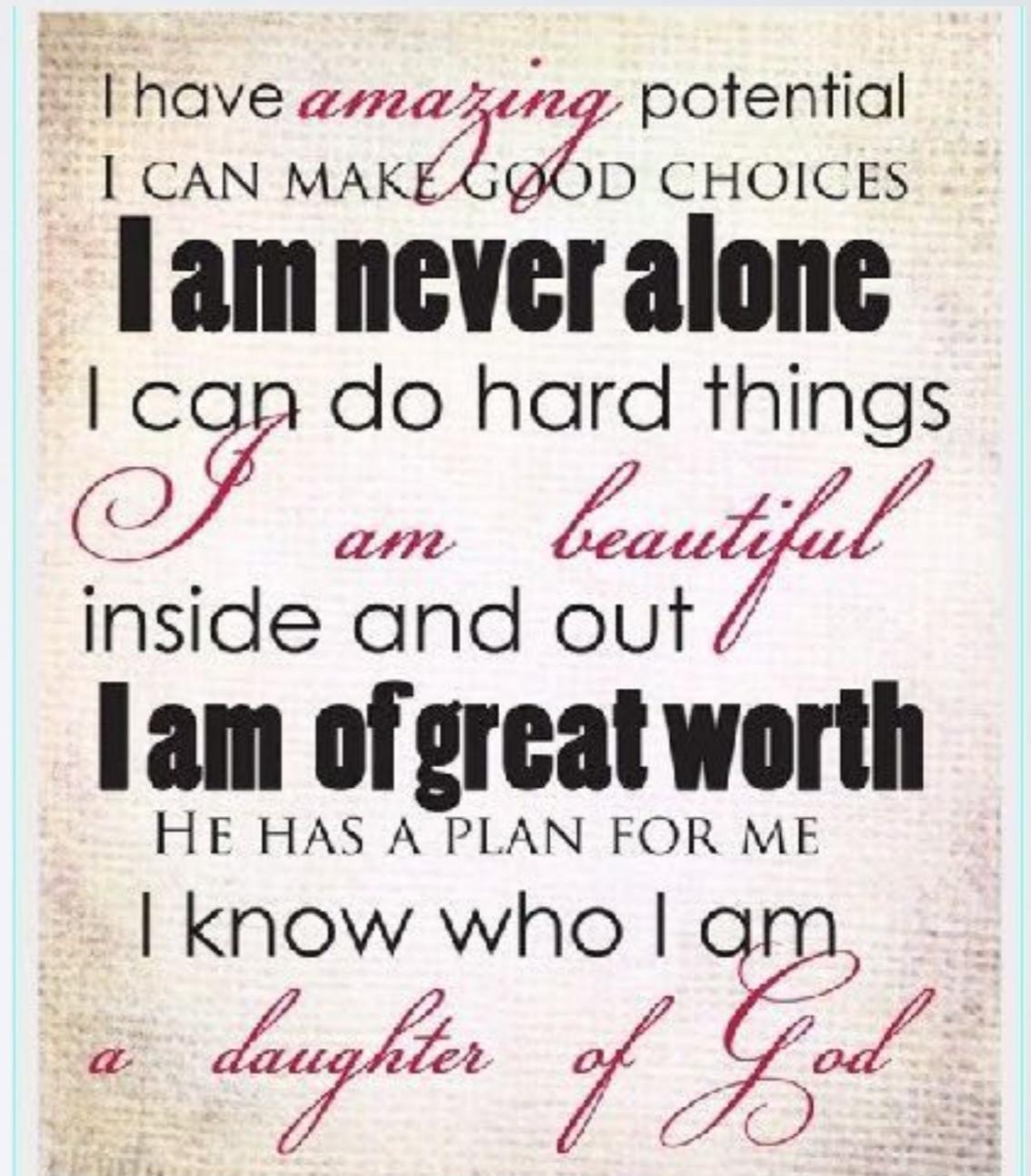
# TIME-LINE

- Thadford James, 1990s
- Exploits the subconscious spacial metaphor for time.
- Overview of DX, TX and PX



# AFFIRMATIONS

- Simple, direct declarative statements expressed as if the desired result has already happened.
- The “Farsing” of NO. Keep Affirmations positive.



# OVERWRITE THE MEDICAL HEX

- Regress to time of PX
- Substitute your voice for the physician's
- Lay down positive expectation



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THANK YOU!