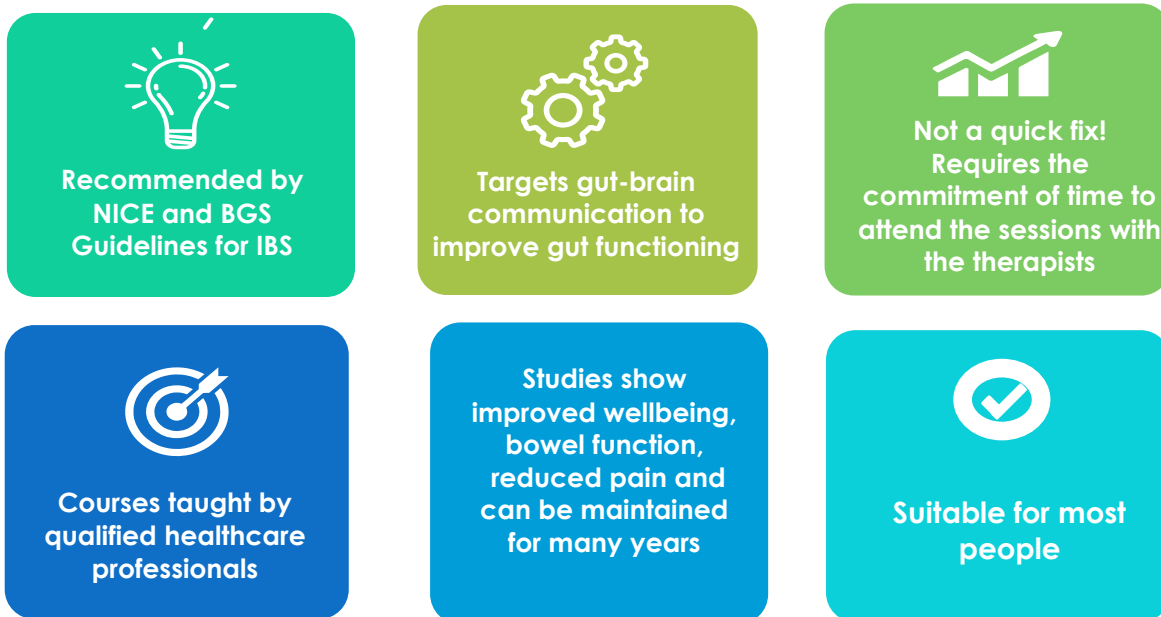


Information for Healthcare Professionals



Hypnosis and 'gut directed' hypnotherapy – what are they?

There is no universally accepted definition of what hypnosis is, but it can be viewed as 'a waking state of awareness (or consciousness), in which a person's attention is detached from his or her immediate environment and is absorbed by inner experiences such as feelings, cognition and imagery (1).

Hypnotherapy is defined as using hypnosis to help a person relax and focus their attention, creating an increased willingness to respond to suggestions given by the therapist. Techniques used in hypnotherapy might include progressive muscle relaxation, guided imagery and use of metaphor.

Gut directed hypnotherapy (GDH), refers to suggestions that focus specifically on gut function, ie suggestions around slowing down or speeding up gut motility, to help the person gain control of physiological responses that are not usually under our conscious control. This can help to normalise gut function and reduce gut hypersensitivity.

IBS and the Gut-Brain connection

IBS is classified as a disorder of gut brain interaction (DGBI) and therapies that target the gut-brain axis functioning have been found to be effective treatment strategies (2).

Using fMRI scans, a team at Stanford University discovered that distinct areas of the brain showed altered activity and connectivity whilst in a state of hypnosis. Specifically, there was increased connectivity between two brain regions, the dorsolateral prefrontal cortex and the insula, described by the researchers as the brain-body connection that helps the brain process and control what is going on in the body (3).

This could help to explain the mechanism of how hypnotherapy can be used to affect physiological states. Hypnotherapy has been shown to be effective for lowering blood pressure, improving symptoms of IBS, changing the pain response and a myriad of other physical conditions.

The National Institute for Clinical and Care Excellence (NICE) and the British Society of Gastroenterology guidelines for IBS have recommended that psychological interventions (including hypnotherapy) should be considered for people with IBS whose symptoms have not improved with medical management after 12 months (4, 5).

GDH Research

Evidence supporting the effectiveness of GDH has grown significantly since the first paper published by Peter Whorwell and colleagues in Manchester in 1984(6). Since then, research has shown that GDH is a highly effective treatment for improving IBS symptoms, non-colonic symptoms, wellbeing and anxiety and depression and the benefits can be maintained for many years (7, 8). The two main protocols are the Manchester Protocol involving up to 12 sessions and the North Carolina Protocol (NCP) in 7 sessions (7, 9). Telemedicine has also expanded GDH accessibility enabling more patients to access this therapeutic approach (10-12). It has also proven effective when delivered in groups using the NCP (13, 14).

The Contented Gut courses

In 2022 we trialled a course using the NCP with 12 participants via Zoom (with 7 in smaller groups, and 5 seen individually). Nine (75%) of the 12 participants recorded improvement in their gut symptoms even though they reported higher stress levels during that time; overall anxiety and depression scores improved and other symptoms also improved such as headaches, fatigue, muscle/joint pain and heartburn. Quality of life scores improved in 11 (92%) of the participants and visceral sensitivity index improved in 10 (83%). All participants found that it helped them to relax and some have reported that they have since been able to introduce more foods back into their diets. Although it was only a small trial, we found no clear difference in effectiveness between those who took part in groups versus those who were seen individually. We are now running online group courses (with up to 6 in a group) which are going well (a few testimonials are on the next page).

How do I introduce the concept of hypnotherapy to my patients?

Some people may only be familiar with hypnosis in the context of stage hypnosis which could easily put someone off trialling hypnotherapy, so how we explain the concept can be a make or break! So, you could explain that there is a two-way communication between the brain and gut via the nervous system and gut microbiome called the gut-brain axis (an example being feeling 'butterflies' in the stomach when feeling nervous). The brain and nervous system have got into the habit of responding in a certain way - an analogy you could use is like a well-trodden path through a field, but the 'pathway' ie response can be changed to go in another direction by the hypnotherapy so the brain then pays less attention to the signals.

Alternatively, you could suggest that they think of the brain like a computer, each side is programmed differently. The left side is programmed for logical, rational and critical thinking but doesn't 'do' emotions. The right side is good with emotions, feelings and imagery and it also has more connections with the body's control centres e.g. heart rate, breathing, appetite and bowels. Hypnosis helps you to 'log-in' to the right brain to encourage better control over the body's functions.

Can I refer my patients to The Contented Gut?

Yes! We now accept referrals from health care professionals. If you have patients with:

- a diagnosis of IBS
- or who have coeliac disease or inflammatory bowel disease with ongoing symptoms despite medical and dietary management

You can refer via this link: <https://thecontentedgut.com/index.php/hpcs/>

Or ask the patient to email us at: hello@thecontentedgut.com.

Testimonials

- *'This course has been such a brilliant asset to me and my health, both physical and mental. It has helped me a lot overall with anxiety and stress from both everyday occurrences and related to my gut health. The sessions and the practice have helped me become more aware of my whole body inside and out and allowed me to take time to completely relax and listen to my body. (It) has helped me immensely to not panic and make my flair ups and symptoms worse. I've spent so many years feeling like I've been losing control of my own body and this has truly helped me regain so much of that control.'*
- *'I thoroughly enjoyed the sessions. Hypnotherapy gives me a wonderful feeling of calm. I love that I can take myself off to thoroughly relax when I acknowledge that I am in a bit of a tizz. I often do it in the evening to wipe away the day's anxiety. I feel more relaxed about the IBS and try not to let it become a 'thing'.'*
- *'It helps me to relax, feel less stressed, (be) able to introduce more foods and sleep better'.*
- *'I thought the course was excellent and has helped me to be more relaxed and less hard on myself about my symptoms. My gut is still very sensitive but I feel less stressed about that.'*

References

1. Heap M. Hypnotherapy - a handbook. 2nd ed. Milton Keynes: Oxford University Press; 2012.
2. Black CJ, Thakur ER, Houghton LA, Quigley EMM, Moayyedi P, Ford AC. Efficacy of psychological therapies for irritable bowel syndrome: systematic review and network meta-analysis. *Gut*. 2020;69(8):1441-51.
3. Jiang H, White MP, Greicius MD, Waelde LC, Spiegel D. Brain Activity and Functional Connectivity Associated with Hypnosis. *Cereb Cortex*. 2017;27(8):4083-93.
4. National Institute for Health and Care Excellence. Addendum to NICE guideline CG61, irritable bowel syndrome in adults : diagnosis and management of irritable bowel syndrome in primary care. NICE guideline CG61 1 [Internet]. 2015 29 March 2021:[1 online resource (PDF file (319 pages)) p.]. Available from: <http://www.ncbi.nlm.nih.gov/books/NBK550725/> NLM Bookshelf Books.
5. Vasant DH, Paine PA, Black CJ, Houghton LA, Everitt HA, Corsetti M, et al. British Society of Gastroenterology guidelines on the management of irritable bowel syndrome. *Gut*. 2021;70(7):1214-40.
6. Whorwell PJ, Prior A, Faragher EB. Controlled trial of hypnotherapy in the treatment of severe refractory irritable-bowel syndrome. *Lancet*. 1984;2(8414):1232-4.
7. Vasant DH, Whorwell PJ. Gut-focused hypnotherapy for Functional Gastrointestinal Disorders: Evidence-base, practical aspects, and the Manchester Protocol. *Neurogastroenterol Motil* [Internet]. 2019 08 PMC6850508]; 31(8):[e13573 p.]. Available from: <https://www.ncbi.nlm.nih.gov/pubmed/30815936>.
8. Palsson OS, van Tilburg M. Hypnosis and Guided Imagery Treatment for Gastrointestinal Disorders: Experience With Scripted Protocols Developed at the University of North Carolina. *Am J Clin Hypn*. 2015;58(1):5-21.
9. Palsson OS. Standardized hypnosis treatment for irritable bowel syndrome: the North Carolina protocol. *Int J Clin Exp Hypn*. 2006;54(1):51-64.
10. Hasan SS, Pearson JS, Morris J, Whorwell PJ. Skype hypnotherapy for Irritable Bowel Syndrome: Effectiveness and Comparison with Face-to-Face Treatment. *Int J Clin Exp Hypn*. 2019;67(1):69-80.
11. Hasan SS, Vasant D. The Emerging New Reality of Hypnosis Teletherapy: A Major New Mode of Delivery of Hypnotherapy and Clinical Hypnosis Training. *Int J Clin Exp Hypn*. 2023;71(2):153-64.
12. Noble H, Hasan SS, Simpson V, Whorwell PJ, Vasant DH. Patient satisfaction after remotely delivered gut-directed hypnotherapy for irritable bowel syndrome during the COVID-19 era: implications for future practice. *BMJ Open Gastroenterol*. 2022;9(1).
13. Gerson CD, Gerson J, Gerson MJ. Group hypnotherapy for irritable bowel syndrome with long-term follow-up. *Int J Clin Exp Hypn*. 2013;61(1):38-54.
14. Lövdahl J, Törnblom H, Ringström G, Palsson OS, Simrén M. Randomised clinical trial: individual versus group hypnotherapy for irritable bowel syndrome. *Aliment Pharmacol Ther*. 2022;55(12):1501-11.