President’s Suggestions
by Peggy Trezona MS, RN, CS

As I sit by the fire writing this column—aware of the wall of cold just outside the window—I am reminded yet again of the power of association. I just finished reading a poem by Billy Collins, called Snow Day, that starts with the line, “Today we woke up to a revolution of snow, its white flag waving over everything…….” * This image wonderfully captures the surrender of the workaday world to the forces of nature. Take a moment to wonder what those two words—snow day—conjure up for you….. Maybe its the freedom of being cut loose from your schedule, the pleasure of watching the world grind to a halt, the silence of the streets, or the camaraderie of neighbors you may not have talked to for months.

As clinicians trained in hypnosis, we teach our clients to tap into their own internal resources and use the power of language and imagery to evoke association in the service of change. Several recent sessions with clients have left me shaking my head in amazement at the empowering effect of simple, brief, hypnotic experiences. These individuals appreciate the skilled help, but more importantly they walk out of my office knowing that this ability comes from within them.

In the last newsletter, I talked about the importance of readily available consultation in learning how to be hypnotic rather than ‘do’ hypnosis. One easy way to bring more consultation into your professional life is to join ASCH and become part of the hypnosis listserve. Responses to clinical questions come from people throughout the country and many parts of the world. The conversations are fascinating and enlightening. You could also call one of the ASCH-certified consultants listed in this newsletter.

Another possibility to consider is creating your own group of fellow colleagues who want to keep learning. I did this about three years ago after finishing yet another wonderful annual workshop. I realized that I would likely not fully utilize what I had learned without further study. I contacted some folks I thought might be interested, and, we’re still meeting once a month. We have evolved from a more traditional consultation model to one that focuses on experiential practice. Despite the challenges of starting at 7:30am, we all still marvel at the power of learning in this small group.

One surefire way to enhance your hypnosis skills is to attend Michael Yapko’s workshop this spring. We have the good fortune of three full days with him—June 10th through 12th. His teaching is so well-constructed that the invisible aspects of hypnotic work become visible, thereby creating the potential for fundamental changes in the learners’ clinical work.

I am really looking forward to this workshop and hope to see you there!

Peggy

*from Sailing Alone Around the Room: New and Selected Poems, 2001
“The house was packed” is a good way to describe attendance at MSCH’s workshop on a 60+ degree Saturday morning in November. The session drew members and non-members alike to learn more about treatment related to clinical hypnosis and sleep. Both speakers demonstrated skill, awareness, and high comfort level with this “sleepy” topic and ne’er did the audience fall into sleepiness due to the speakers’ humorous, intriguing, direct, indirect, and hypnotic approaches to this all-important topic.

After presenting briefly on the five stages of sleep (REM, etc.) and reviewing sleep disorder classifications, Dr. Shep Myers stressed that some patients will identify their primary presenting problem as depression, anxiety, etc., but in actuality sleep may be the main problem. Further, if professionals are able to help individuals experience improvement in sleep, other areas of concern for the patient will likely become less of a concern. Workshop participants were encouraged to assess for sleep with every patient. Even if a patient reports “good” sleep during the intake session, clinicians may best serve their patients by probing more deeply. Examples included querying about what does “good” sleep truly mean to a patient, since one patient may wake twenty times each night and consider this frequency as acceptable, relative to their previous sleeping history when they woke even more often.

Participants were informed approximately 20% of patients in medical clinics experience insomnia, with most insomnia caused by issues related to arousal. Arousal issues may stem from “sleep anxiety” during which patients experience worry about being able to sleep when attempting to sleep. Underlying conflicts cannot be forgotten (by neither clinician nor patient!) when evaluating sleep, because even though one may think he is not aroused or hypervigilant, arousal may be occurring at an unconscious level. As Shep Myers put this concept, “One’s soul is not at peace.”

Both presenters stressed the importance of consultation with Primary Care Providers to rule out medical causation of sleep issues. Further, workshop participants learned many problems with dementia may be related to sleep, and such problems can be exacerbated or ameliorated by improving quality and quantity of sleep. Equally important, the audience learned insomnia is a risk factor in psychiatric disorders. For example, persons with insomnia have four times the incidence of depression, two times the incidence of anxiety, and are 50% more likely to abuse alcohol.

After touching upon three identified forms of insomnia (initial, middle, and terminal), treatment approaches were discussed. These approaches included a brief review of CBT (cognitive behavioral therapy) techniques aimed at reduction of anxiety and increased relaxation. Targeted interventions for “sleep hygiene” identified nine specific points; these points were cleverly used near the end of the workshop as part of an induction/trance experience, demonstrating the practicality of presenting sleep hygiene techniques through the “vessel” of clinical hypnosis. “Sleep restriction” was also discussed, as it has been demonstrated to be approximately 80% efficacious with highly motivated, compliant patients. The presenters stressed that before using sleep restriction for treatment of sleep problems, clinicians should obtain specific training on the topic.

The practicality of the presentation was appreciated by participants. For example, as with most MSCH workshops, the presenters identified with participants by seeding continued next page
us for our next patient on the following Monday morning! This application of the here-and-now helped gently prod participants into implementing techniques learned in the workshop as soon as possible, likely before the techniques become forgotten. Likewise, after a complex case was presented participants were rhetorically asked, “Where would you start with this patient?” Actually, the question was not THAT rhetorical since participants provided ideas. The presenters welcomed and strengthened participant responses in order to provide a useful model for potential future cases. Participants were encouraged to always ask the patient for permission, particularly when working with a patient experiencing multiply complex sleep/medical issues (e.g., “Is it OK for me to help you with this?”). Such cases may have longstanding secondary gains that are likely unknown to both patient and provider, and require particularly delicate consideration.

Participants were encouraged to make their interventions long-lasting by using recording devices in order to send patients home with a portable CD or downloadable bytes. Take-home recordings may include PMR (progressive muscle relaxation), personalized interventions, and repetitive statements that fade in volume as the end of the recording nears (and the patient reaches deeper levels approximating sleep). “Going with the resistance” was stressed when dealing with patients facing sleep difficulty, as paradoxical suggestions may decrease resistance. By stating, “stay awake just a little bit longer” a few times as part of a recorded induction, the sleep paradox may be calmed because the more one tries to fall asleep, the harder it becomes to fall asleep. In addition, patients will likely be reassured when their clinician advises, “Its OK if you don’t get to sleep after 20 minutes…get up and do something else that’s a neutral activity…”

On the same note, participants learned patients often benefit when they give themselves permission to sleep. Such permission may be an active “ingredient” during a therapy session, as many patients have never given themselves permission to leave their typically guarded mind/body stance. Dr. Kevin Harrington stressed the importance of focusing on the patient’s whole day in order to teach the patient to “dial it down” throughout one’s day. Such practice allows the patient to calm himself so he is not chronically on “high alert.” By practicing “mini-breaks,” learning how to breathe (thank you, Delle!), using sleep hygiene (including monitoring caffeine intake), exercising, and using nutrition wisely, the body can learn to calm down and replenish itself naturally. Patients able to develop their own calming experience/s will be able to make long-lasting changes, improving their quality of sleep as well as their quality of life.

Kevin Harrington used metaphor to demonstrate how being on “high alert” throughout one’s day will inevitably interfere with sleep. By encouraging patients to track their energy throughout their day much like a car with many gears, patients may note what gear they are “driving” in; by monitoring one’s energy level, the patient trains himself to automatically pay attention to his thoughts (e.g., “what gear to I need to be in now? Should I ratchet it down? Why waste all of this energy? Do I need to be this busy/worried/etc?”). Patients may teach themselves to shift down a notch (or more) in overall arousal level while simultaneously learning to monitor arousal. Of course, being able to monitor one’s arousal level is naturally conducive to sleep. Another calming method presented entailed advising some patients to keep a sheet of paper and a pen at bedside in order to “leave” worries on the paper, thereby allowing the patient to turn down the vigilance and arousal typically created and “held” within.

I would personally recommend this workshop, and encourage all participants who attended the training NOT to “sleep on it,” but instead get out there immediately and use what you learned! Finally, I am suspicious of reviews that are 100% positive, so I will leave you with the downsides of the workshop: attendance was so strong we ran out of treats and handouts. That’s all I can come up with because the presenters and their materials were truly outstanding.

Cheryl Bemel, Ph.D., L.P., is in private practice in the Twin Cities. Dr. Bemel’s interests include trauma, chronic pain, and the connection between mind and body. She works with both children and adults, formerly specializing in childhood emotional disorders as a Nationally Certified School Psychologist. Her practice recently expanded to include treatment of adults and families.
Attending an international hypnosis meeting is actually a combination of experiences. To put it in Minnesota terms, it’s a family reunion up at Cragens, a continuing fireworks social event on Harriet Island and a super CEU orgy in a fancy hotel. There is something good for emotions, stomach and brain.

The reunion is with relatives in the hypnosis “family”. Some of them are from home, like Dan and Harriett Kohen. And some are out of town cousins in the ASCH family. George Glaser was there, and so was Linda Thomson. The four of us stayed in the same hotel, by the Bologna metro. We all had breakfast together and took the bus back and forth to campus for the day. But there was more family, people we see at ASCH and SCEH. Julie Linden, Peter Bloom and Rick Kluft came from Philadelphia. And of course people from all over Europe and the Middle East.

The social events were close to exhausting. Almost every night had something different to enjoy. For Monday, there was an opening concert and buffet. The big welcome to Rome cocktail party was Wednesday, at Piazza Venezia overlooking the coliseum. Later we strolled to a pizza dinner, networking and chatting on the streets of Rome. Turned out some of us walked 4.5 kilometers that night. Thursday there was a traditional Roman dinner at an outdoor restaurant. After guitar music, there was a farce theatre played out of the window in the courtyard. The speeches were Italian, but the baudy humor was easy to translate. Friday was the elegant dress up gala, where we all had a chance to socialize with new friends. I sat with Dan and Harriet and a charming sexologist from Sweden and a family therapist from Austria. The closing concert Saturday was the Magic Flute.

But what about the hypnosis? The workshops and seminars were of course what everyone thinks about when they consider going to an international meeting. Here are a few of my favorites.

Reinhild Draeger-Muenke and Max Muenke taught “Acupressure and Hypnosis: Healer Heal Thyself.” Reinhild is a psychologist practicing in Philadelphia. Max, her husband, is a genetics researcher at NIH and a practicing physician using acupuncture. Together they present a stunning mind-body workshop. Max start with a summary of some classical theory and acupressure points, and then Reinhild connects hypnosis. They are a good team, balancing didactic and experiential learning, with lots of hands on teaching. I had a surprising experience that I shared with the group. The workshop was 9:30 AM of my first day in Rome. I overslept, missed a good breakfast, and got lost on the way to the classroom. Add to that a bit of jet lag, and imagine my general level of alertness. In a sort of light trance way I went through the exercises designed to increase the flow of Qi energy. One was pressing on the soft tissue in the valley between my thumb and index finger. Very quickly I noticed, and told Max and Reinhild, that my fatigue was gone, and I was clearly back in the room, fully sound. Max just smiled! I’ve massaged that point ever since when I feel tired. Reinhild and Max will likely be teaching at the ASCH meeting in Nashville in March 2009. Highly recommended.

Katherine Rossi gave a talk about the “New Neuroscience of Self Creation”. She covered four steps of therapy: Sensation and discomfort, anxiety, the new ‘Aha’ awareness, and the change in life. Essentially Katherine is trying to explain how hypnosis guides gene expression to provide effective psychotherapy. People who were at the MSCH annual in 2008 heard Ernest Rossi present an earlier version. Members of ASCH can get a reprint at www.asch.net, by logging in as members, and scrolling down the left side of the page to BOOKS.

I liked the plenary speech by Peter Bloom, a former president of ISH, and a creative psychiatrist. He reviewed some findings of neuroscience evidence showing that suggestions are powerful in changing a person’s perceptions of pain. But he also presented clear empirical evidence that the effects are not just the result of suggestions. Induction, and the well formed hypnotic suggestions are necessary to get the desired changes. It was a pleasure to see Peter’s clear summary supporting the empirical basis of our work. I have his permission to forward power point slides. Just call me and ask.

There were of course many, many other presentations. Mike Yapko did an inspiring series on treating depression with hypnosis. Be sure you sign up for the Annual MSCH/U of M June 2010, when Mike will be our visiting faculty. Dan Kohen and Karen Olness, the MSCH Founding President, did a workshop on helping children and adolescents with chronic and recurrent pain. I did presentations on the research and clinical aspects of alert hypnosis. And of course there were dozens of other sessions, far more then I can summarize here. The next meeting will be in Melbourne, Australia, in 2012. Let’s start planning now.
<table>
<thead>
<tr>
<th>Name</th>
<th>Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td>David Alter PhD, LP, ABPP, ABPH</td>
<td>763.546.5797</td>
</tr>
<tr>
<td>Richard Duus, Ph. D</td>
<td>218.722.2055</td>
</tr>
<tr>
<td>Thomas Harbaugh Ph. D</td>
<td>651.484.4909</td>
</tr>
<tr>
<td>Wendy Lemke, MS</td>
<td>320.558.6037</td>
</tr>
<tr>
<td>Ralph McKinney, Ph. D</td>
<td>952.544.0433</td>
</tr>
<tr>
<td>Helen Paul, Ph. D</td>
<td>952.945.0401</td>
</tr>
<tr>
<td>Richard Studer MA, LMFT, LP, LICSW</td>
<td>651.641.1555 ext 105</td>
</tr>
<tr>
<td>Mark Weisberg, Ph. D, ABPP</td>
<td>612.520.9159</td>
</tr>
<tr>
<td>Elaine Wynne, MA</td>
<td>763.546.1662</td>
</tr>
<tr>
<td>Sandra L Nohre, MA, Ph.D., Sexologist, LP, LMFT</td>
<td>952.944.1585</td>
</tr>
</tbody>
</table>

Certified Sex Therapist, Certified in EMDR
This Fall I once again had the privilege of being part of the teaching faculty for what I am increasingly aware is a truly unique and wonderful teaching and learning opportunity. The 6th European Child Hypnosis Congress (6. Kindertagung “Hypnotherapeutische und Systemische Konzepte für die Arbeit mit Kindern und Jugendlichen”, Heidelberg, 29.10.-1.11.2009 = Hypnotherapeutic and Systemic Concepts for working with Children and Adolescents October 29-November 1, 2009) was held, as it has always been, in Heidelberg, and in the “Stadthalle” a wonderful old and huge “Congress Hall-Town Hall” situated adjacent to the Neckar River which runs through (and sometimes overflows into!) Heidelberg, both the new and the old city.

This year the attendance was…are you ready for this?...over 1800 participants! There were over 100 faculty. Workshops taught are typically 3 hours long, and there are a few keynote presentations during the 4 days of training opportunities (Prior to traveling to Heidelberg, I taught a ‘pre-Congress 2-day Pediatric Hypnosis workshop for the Ericksonian Society in the city of Krefeld (one of the homes of Leggos!) In Krefeld I taught with consecutive translation as, alas, I speak no German.

Most of the faculty taught 2@3 hour workshops, some taught one, and a few of us were invited to teach 3 workshops. I taught Intermediate/Advanced level workshops on (1) Hypnotherapeutic Approaches to Helping Children with Disorders of Elimination (Enuresis, Encopresis); (2) Hypnosis for Asthma in Children and Adolescents; and (3) Self-Hypnosis Training for Habit Problems (and Tics and Tourette’s) in Children and Adolescents. All were fully subscribed with 75-100 participants each and very favorably (positively/enthusiastically) received. I was very gratified. These workshops were taught in English without translation and it went very well. Most of the German therapists – psychologists, social workers, et al – and physicians speak and understand English very well.


There were many many workshop offerings in German, and a few in Italian.

A huge book display and ‘store’, an exhibition and sale of puppets and of a variety of other healing methodologies (meditation, bowls, etc.) complement the program.

This Congress is a great example of what CAN be in the field of Hypnosis in general and specifically for children. All of the faculty presentations’ powerpoints and other handout materials were provided to all participants on a CD they received upon arrival. We will be doing this for our 2010 MSCH/U of MN Annual Course again this coming year as we did last year. We believe it strongly facilitates learning by allowing participants to not feel ‘compelled’ to take notes when they know about themselves that they learn better or even best through the active participation of listening.
Beyond the joy of teaching, I participated in a number of workshops myself, learning from Claire Frederick who taught a workshop on Pain Management.

Having been to several of the previous Kindergatung Congresses (all in Heidelberg), we were delighted to again make the challenging but invigorating hike up the mountain to the CASTLE which sits high above the Neckar river and affords fantastic views of the river, the town, the castles’ gardens, et al. And, we also enjoyed the opportunity to visit favorite Thai and Japanese restaurants there in Heidelberg. The University of Heidelberg, the old city, the new city are all worthy of exploration.

All of this joy notwithstanding the most fun is meeting, working with, learning from, studying with professionals from around Europe (and South Africa, and the US too) who have the same enduring commitment toward helping children and families manage the problems that come their way. Hypnosis is truly a universal language.

So, if you have never YET considered international study/learning in Hypnosis, see Dave Wark’s article about the ISH Meeting in Rome earlier this Fall and consider the next ISH meeting – It will be in Melbourne, Australia in 2012. There is no date yet set for the next Kindergatung BUT the same planning group (Bernhard Trenkle, Ph.D. of the Milton Erickson Institut of Rottweil, Germany) is putting on the “Mentale Starken – Sporthypnose – Selbsthypnose – Mentales Training – Coaching” in Heidelberg next Fall…October 21-24, 2010; and Dave Wark will be teaching there…A chance to see Heidelberg!!! For information: Email: kontakt@megrottweil.de Website: www.mentalesstarker.de I’m sure either Dave or I would be happy to chat with you further about these venues…Let us know!

Dan Kohen, M.D.

News of Note

• The board is in need of volunteers. There are currently some board positions open and we would like to fill them.
  Board member terms run two years (traditionally July to June)
  Board meets the first Wednesday of each month (except August)
  We are in need of a secretary and other positions
This is a great opportunity to give back to your profession and to MSCH

• The Annual Workshops are just around the corner. Remind your friends and colleagues.
  June 10-12.
  Advanced workshops will be three full days this year
  Michael Yapko will be our presenter

• Note the change in workshops for February.
  Al Clavel MD and Mark Weisberg PhD., ABPP will be presenting on:
  Hypnosis and Low Back Pain.
## 2009 MSCH Board of Directors

<table>
<thead>
<tr>
<th>Name</th>
<th>Board Position</th>
<th>Preferred email address</th>
<th>Preferred phone number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mark Fastner</td>
<td>IMAGES Editor</td>
<td><a href="mailto:mfastner@comcast.net">mfastner@comcast.net</a></td>
<td>651-485-4360</td>
</tr>
<tr>
<td>Dan Kohen, M.D.</td>
<td>Director, Education and Training</td>
<td><a href="mailto:dpkohen@umn.edu">dpkohen@umn.edu</a></td>
<td>612-626-3014</td>
</tr>
<tr>
<td>Glenn Frisch</td>
<td>Treasurer</td>
<td><a href="mailto:drfrisch@qwestoffice.net">drfrisch@qwestoffice.net</a></td>
<td>763-784-5304</td>
</tr>
<tr>
<td>Peggy L. Trezona</td>
<td>President</td>
<td><a href="mailto:pltrezona@gmail.com">pltrezona@gmail.com</a></td>
<td>651-642-9317 x117</td>
</tr>
<tr>
<td>Delle Jacobs</td>
<td>President Emeritus</td>
<td><a href="mailto:dellejacobs@comcast.net">dellejacobs@comcast.net</a></td>
<td>612-642-9883</td>
</tr>
<tr>
<td>Kate Pfaffinger</td>
<td>Secretary</td>
<td><a href="mailto:kmp51@comcast.net">kmp51@comcast.net</a></td>
<td>651-646-1777 (cell)</td>
</tr>
<tr>
<td>Laurel Riedel</td>
<td>Nursing</td>
<td><a href="mailto:laurel.riedel@hcmd.org">laurel.riedel@hcmd.org</a></td>
<td>612-868-4116 (cell)</td>
</tr>
<tr>
<td>A. W. (Buddy) Atkinson</td>
<td>Member-at-Large: Medicine</td>
<td><a href="mailto:awamd@charter.net">awamd@charter.net</a></td>
<td>507-202-5408 (cell)</td>
</tr>
<tr>
<td>Shep Myers</td>
<td>President Elect</td>
<td><a href="mailto:Shepherd.Myers@Allina.com">Shepherd.Myers@Allina.com</a></td>
<td>651-241-9800</td>
</tr>
<tr>
<td>Andy Barnes</td>
<td>Physician-at-large</td>
<td><a href="mailto:DrBarnes@umn.edu">DrBarnes@umn.edu</a></td>
<td>612-834-7076</td>
</tr>
</tbody>
</table>