



President's Suggestion

Shep Myers, PhD, LP

Hypnosis as a Replicate

Many of you are aware that hypnosis is the most efficacious treatment of Irritable Bowel Syndrome (IBS). Research that investigated the essential ingredients of hypnotic interventions with IBS patients discovered that imagery and suggestions that replicate physiological correction of the disease process were likely the most important components. For example, the River Metaphor is a common intervention where IBS patients imagine free flowing water to correct the constipation type of IBS, or feelings of comfort in an idyllic scene being transferred to one's gastrointestinal tract.

This research may be generalizable to other conditions and provides an understanding of how to facilitate mind-body healing. I now strive to include physiologically based hypnosis in most of the medical conditions I address with my patients. With individuals with chronic pain the most common hypnotic interventions are aimed at lowering muscle tension, an important area to address since muscular tension and inflammation are strong contributing factors to chronic pain. An area of equal importance that is prominent in the literature is abnormal firing of signals in pain neurons in the spine or periphery which is called central sensitization. In addition, dysregulation of the autonomic nervous system may also contribute to pain. Consequently, I include suggestions such as imaging comfort and healing in muscles, calming

IMAGES

and slowing or blocking of nerves in the area of pain and in the spine, and metaphors of balance (especially of balancing arousal, activity, and rest).

As part of a multidisciplinary transplant team I have been using physiologically based hypnosis to help patients prepare for surgery. Many of the suggestions included in the hypnosis are based on preparation and elimination of possible complications or annoyances. For example some of the difficulties patients experience are post-operative pain, sleep being disrupted by hospital staff during the night, inflammation, infection, anxiety from "setbacks" due to complications and inappropriate expectations, and reestablishment of healthy gastrointestinal functioning. Corrective suggestions include tolerance of pain, viewing pain as an indication of healing, preventing a guarding response, remaining just awake enough to cooperate with nursing staff as they are poked and prodded at night and then returning to a deep sleep, having a strong immune response, imaging a balloon deflating to correct inflammation, and time projection to image healthy GI functioning. We do not specifically know all of the benefits of the hypnosis but since Dr. Al Clavel and I have been providing pain and psychological services, the duration of hospital stays are significantly lower.

(Continued on Page 2)

Inside This Issue

President's Suggestion	1
News of Note	2
Review of Rochester Workshop	3
Michael Yapko Book Review	4
Receipients of 2013 Awards	5
2013 Introductory Workshop	6
2013 Intermediate/Advanced Workshop	7
Meet New Board Members	8
Learning To Blow: About Being Hypnotic	9
Learning To Blow - Continued	10
2013-14 Continuing Education Schedule	11
Upcoming Workshops	12
Board Members and Contact Information	13



Shep Myers, PhD, LP

The research may have important implications for the creation of hypnotic suggestions and inventions not only with medical conditions but also for creating desired effects in other clinical situations. When the goal is addressing anxiety, depression, interpersonal difficulties, or performance, hypnosis can be based on creating the desired physical, emotional, cognitive, and behavioral state or outcome. Can you imagine or co-create with your patients what they desire? Then break it down to smaller steps, translate the steps to suggestions and that's the healing power of hypnosis.

Now imagine your desired learning state as we begin to explore the outstanding slate of upcoming MSCH workshops. Wendy Lemke, MS will be presenting on *Clinical Hypnosis for Affect Regulation* on September 21. Wendy is a nationally recognized expert on the treatment of dissociative disorders. The Rosenthal Retreat on October 13th will feature Mark Weisberg Ph.D. and Sheryl Daniel Ph.D. from North Carolina presenting on *Powerful Healing in Integrative Medicine: Developing Characteristics and Strategies for Success*. Drs. Weisberg and Daniel are internationally recognized as experts in mind-body healing and

hypnosis. These events are for MSCH members only, so please remember to renew your membership. In addition, the Pediatric Hypnosis Workshop sponsored by The National Pediatric Hypnosis Training Institute (NPHTI) and cosponsored by MSCH will be held October 3rd through 5th. We have another great line-up of workshops this year and I hope to see you there.



Shep Myers, Ph.D.

News of Note

As you may recall Stephen Parker presented on Yoga Nidra: learning the Technique of Conscious Deep Sleep and Its Relationship to Hypnosis at our January 2012 monthly workshop. Recently he had an article published in the International Journal of Yoga Therapy, No. 23 (1) 2013. Defining Yoga-Nidra: Traditional Accounts, Physiological Research, and Future Directions. He has also had a CD professionally produced by AHYMSA Publishers on the Yoga Nidra practice. It is available on CDBaby.com for \$9.95. The proceeds all go to support the mission of Stephen's teacher.

We'd like to extend a warm welcome to our 25 newest members: Trish Anderson, MA; Albert Asper, EdD PsyD; Caryl Boehnert, PhD; Pathamas Chantaracherd, DDS MS; Mary Conroy, MD; Benjamin Hatfield, MSW; John Henrich, PsyD; Susan Janicke, FNP; Jeffrey Jones, MSW; Lisa Kastgenbauer, MS ED; Sue Kaufmann, MS; Scharlemann Klapste, MA LMFT; Edith Lamboy, LMFT; Paula Lindhorst, MD; Barbara Lowe-Fierke, PsyD LP; Isaac Marsolek, MD; Brenda Oian, MS; Robin Ricard, MA LMFT; Pamela Schroeder, MSN; Ruth Spiegel, MA MFT LADC; Peggy St. Clair, MSE; Jeremy Stapel, MA; Linnea Swanson, PsyD; Debra Tastad, MA RN CNS; Caitlyn Winchell, MSW.

The MSCH Social Committee treated the June Intermediate/Advanced Workshop attendees to a lively skit. Using the power of SUGGESTION, IMAGERY, METAPHORS, SENSORY INPUT, and HUMOR, the skit gave workshop participants a sense of mastery to attend upcoming Happy Hours, Dinners, and (for cyclists) bike rides. (Editor's note: I love that Dr. Elvira Lang, our presenter, is also enjoying the skit.)

The skit also showed off MSCH's sharp, attractive new SHIRTS that are available to all members. Note: Shirt ordering opportunity has been extended to September 14th, 2013. For ordering instructions, contact c.bemel@comcast.net.



Review of Rochester Chronic Pain Workshop

by Betsy Shryer Boyle, PsyD

Three of MSCH's esteemed members led a workshop on "Management of Chronic Pain." Buddy Atkinson, MD, of Rochester, orchestrated the all-day event that also included a lunchtime tour of the Chapel and a brief history tour of the Spirituality Center, founded by Sisters of St. Francis in Rochester.

Dr. Shep Myers, Dr. Al Clavel, and Dr. Suzanne Candell each discussed an aspect of treating patients with chronic pain and discussed ways in which they have enhanced their treatment methods through the use of hypnosis. More and more frequently, studies are revealing that hypnosis is a helpful treatment approach for many therapeutic issues, as it certainly is for treating chronic pain.

Dr. Candell's presentation, "Addressing the Lingering Effects of Psychological Trauma" addressed the need for patients to understand how psychophysiological dysregulation can result from trauma and chronic pain. Trauma's effects can be cumulative, so it is difficult for the patient to adequately self-regulate these multiple memories. Depending upon the type and severity of the trauma, especially the adequacy of response from parents in the aftermath of the event/s, the patient might not develop healthy coping strategies. Studies are replete with connections, for example, a high comorbidity of trauma and chronic pain, with elevated risk of irritable bowel syndrome (IBS) and endometriosis. Adult survivors of childhood trauma use more medical care and women receiving Medical Assistance tend to more often report pelvic pain than those covered by traditional health insurance plans. In Suzanne's calming and informed voice, it is easy to see that a patient working with her would feel more able to tackle the difficult task of unbundling one's trauma experience and reducing its effect and entanglement with chronic pain.

Dr. Clavel presented information on assessment of trauma in chronic pain patients. He deftly translated to the audience how to interpret behaviors and patterns in this population, delineated the pathway to help understand how very activated and unregulated patients can become from long exposure to pain. After a long time, they become hypervigilant to pain sensitivity as they experience what feels like unending pain leading to the transition from acute to chronic pain. Due to the

central nervous system's neuroplasticity, the brain can undergo structural remodeling and these former states of pain become traits. He then discussed central sensitization, visceral hypersensitivity, and then many treatment strategies for effective chronic pain management. Chronic pain patients would love to be rid of their pain forever. It is our job to help them learn modulation of their autonomic dysregulation around events that activate them where they then get stuck in an "off" cycle and they withdraw as they feel defeated in fighting pain.

Dr. Myers provided insight into "Addressing Sleep Disorders as a Contributing Factor in Chronic Pain." He helped the attendees understand how sleep disorders must be addressed in the treatment of chronic pain and vice versa. Estimates are that 80 to 90% of chronic pain patients have sleep problems with pain being experienced as neurological arousal. Sleep is necessary for physical and emotional restoration. Maintaining calm and daily functioning is hard enough for many pain patients without loss of sleep. Ironically, sleep deprivation itself may result in pain, especially in conditions such as fibromyalgia. The impact of insomnia has been found to be independent of depression and anxiety in the chronic pain population and, worse yet, poor sleep actually may increase the perception of pain. Feeling stressed about pain, medical conditions, and thought processes about pain, all have significant and often very negative outcomes of insomnia, un-restful sleep, and sleep disorders. Shep discussed how pain medications impair quality of sleep, he described different kinds of insomnia, and then presented several methods of treating insomnia.

Dr. Clavel spoke about "Chronic Abdominal Pain and Visceral Hyperalgesia." He discussed peripheral and central mechanisms of visceral pain. He then discussed the benefit of creating novel hypnotic interviews for treating patients by engaging multiple neuronal systems, thereby facilitating neuroplasticity and healing. As we learn to construct hypnotic interventions aimed at treating patients with multiple problems that involve multiple neuronal systems, we can facilitate neuroplasticity to our advantage and provide more helpful healing experiences.

Al also provided information about the increase in current knowledge about treating chronic abdominal pain syndromes, which were estimated to have risen to 100 million cases in 2010.

Hypnosis has become an empirically supported treatment method for many medical conditions.

Betsy Shryer Boyle, PsyD
Licensed Psychologist
Private Practice in St. Paul



Dr. Betsy Boyle has a private practice located within HealthPoint Oriental Medicine Clinic in St. Paul. She often says to her patients, "My favorite thing to do is to be hypnotized. My second favorite thing is to hypnotize somebody else." When she isn't working with her diverse clientele, she is enjoying life as a grandmother to her young grandsons who frequently have "sleepovers" with Pop and Grandmama, and who are now just old enough to run circles around her. Look out for her as she rides her shiny new orange bike through town

Book Review

Michael Yapko's Mindfulness and Hypnosis

By Scott Cruse

In his recent book, Mindfulness and Hypnosis, Michael Yapko, PhD, examines mindfulness interventions from his perspective as a well-known and respected teacher of clinical hypnosis. Yapko makes it clear that one of the main purposes of his book is to clarify that goals and suggestions are an integral part of mindfulness based therapeutic interventions.

Over the past several years there has been an explosion in the use of mindfulness practices and interventions by psychotherapists and lay teachers. Jon Kabat-Zinn in his book Full Catastrophe Living, initially codified mindfulness as a means to deal with stress and physical

discomfort, almost 30 years ago. His book, rooted in Buddhist meditation and psychology, and the practices he taught in his eight-week course, Mindfulness Based Stress Reduction, were wildly successful. The world of psychotherapy soon adopted and adapted mindfulness practices and today many therapists advertise themselves as providing "mindfulness therapy."

Yapko acknowledges the contribution of mindfulness and clarifies its distinctions from other forms of therapeutic intervention. He straightforwardly accounts for why mindfulness as a treatment tool is so popular: "because it works." But he challenges the conventional wisdom that mindfulness techniques are not goal-oriented, intentional, or suggestive. He begins his work with a wonderful and concise explanation of hypnosis. He pays particular attention to the efficacy of focused attention and suggestion.

Yapko does a commendable job of demonstrating his larger point that mindfulness interventions, particularly guided mindfulness meditations, are suggestive and intentional. His commentary and analysis of guided meditations by Tara Brach and Rick Hanson compare the structure of guided meditation with the structure and style of hypnotic suggestions. Yapko asks the reader to consider how these meditations are a specific means to an intended end.

I had an opportunity to speak to Dr. Yapko a few months ago about his book. I asked him if he thought that in the future there would be a further convergence of mindfulness interventions and hypnosis. I was surprised when he told me that a number of the nationally known mindfulness teachers and practitioners did not share his views. However, in my personal experience, as a long time teacher of Kabat-Zinn's Mindfulness-Based Stress Reduction program who later came to study and practice hypnosis, I find mindfulness interventions and hypnosis to be a relatively easy fit. As Yapko's book so clearly explains, the confluence of the two fields already exists. I recommend you read Michael Yapko's Mindfulness and Hypnosis and join the conversation.

I work at Regions Hospital Cancer Care Center where I provide psychotherapy, support group facilitation, crisis counseling, and psychosocial case management.

I support world peace and the last good movie I saw was "Blue Jasmine." - Scott Cruse, MSW, LICSW

See Photo of Scott on Page 6

Teena Moy, PhD

Recipient of the 2013 Daniel P. Kohen Outstanding Clinician Award

by Ewa Peczalska

I met Teena when we were competing for the same job at HealthPartners in 1989. She got the job, I went into labor and got my son. Lucky for me, I reapplied and got into the Heath Psychology group at HealthPartners two years later. We did have tremendous fun working together and with other Health Psychologists for the next 17 years.

Teena was a star of TMJ Clinic and inspiration to us all in dealing with complexities of mind-body connections. The “mystery,” as she called it, of health, illness and the unknown. Her work is mysterious as well as full of unexpected transitions, delightful images and creative strategies. Her colleague Peggy said: “She has a remarkable capacity for creating novelty in her hypnotic interventions, turning a difficult situation into one of surprise and delight”.

Her strengths are her powerful intellect, elegance, sense of humor and ability to work very hard. She is full of contrasts – humble but rarely vulnerable, strong and fragile. Our boss, CJ Peek, used to warn clinicians working with Teena that she is like an iron fist in a velveteen glove. Teena is serious about her work but also delightfully funny, loyal but also very eager to pull your leg without much provocation. Another colleague, Chuck, said about Teena, “She is a good friend, a great psychologist, and a wonderful person. (But ignore her sense of humor.)”

To sum up, let me use a quote of St. Francis of Assisi:

“The woman who works with her hands only is a laborer. The woman who works with her hands and her head is a craftswoman. The woman who works with her hands, her head and her heart is an artist.”

Teena is an Artist.



Teena Moy (left) reacts to the kind words of Ewa Peczalska as she presents the Daniel P. Kohen Outstanding Clinician Award to Teena.

Kate Pfaffinger PhD

Recipient of the 2013 David M. Wark Outstanding Teacher Award

by Peggy Trezona

Kate Pfaffinger teaches from her heart and her head. I mention heart first, because she brings a compassion and generosity of spirit to her teaching that invites the learner into a shared experience. With this invitation, also comes a ticket into a world of wit, silliness, memorable stories, and a profound ‘knowing,’ courtesy of what Kate has learned from life and her child patients over the years.

Many of you know how much time it takes to put together a workshop, and Kate has done that innumerable times: teaching for the MSCH monthly education series, for the annual workshop, for the National Pediatric Hypnosis Training Institute, for community groups, and for forgiveness training workshops.

As with any dedicated teacher, she is committed to pursuing her own learning and this includes a range of interests from Michael Yapko’s intensive training in San Diego to Buddhist meditation retreats. She embodies what Robert Frost once said, “I talk in order to understand; I teach in order to learn”.

Her teaching is focused, well-organized, and full of stories that stick in your brain, helping you not only remember the concepts but also remember compassion for yourself as a learner and the people you will be helping with your newfound knowledge.

One of Kate’s colleagues who has taught with her on a number of occasions made the following observation: “From watching and listening to Kate, it seems to me that a patient must immediately know that when they are with Kate that nothing else matters but them-- what they say, how they feel, what they need. Her sense of commitment to healing is patently clear when she teaches and this, of course, is endearing and infectious.” Those of us who get to learn with and from Kate feel lucky to ‘catch’ some of this infectious joy and wisdom.



Peggy Trezona (left) presents the David M. Wark Outstanding Teacher Award to Kate Pfaffinger.

2013 Introductory Workshop in Clinical Hypnosis

Our reviewer has been unable to complete the review prior to our publication date. We hope to be able to publish it in the next edition of Images.

I had the pleasure of acting as Coordinator for the Saturday afternoon portion of the workshop. Sitting in for a bit on the breakout sessions as I shot a few pictures, I could listen in on the presentations. I was struck again by what a wealth of talent we have in our midst, people who have been generous over and over again with their knowledge and time. I wondered how many of the workshop attendees realize what a gift it is to have an opportunity to learn, often in quite intimate settings, from these great teachers.

Here a few photos from that last afternoon.

Carol Rogers-Tanner, Images Editor



Teachers clockwise from top right: Greg Heberlein, Dan Kohen, Teresa Quinn, Scott Cruse, Al Clavel and Ralph McKinney.

Review of Intermediate/Advanced Workshop:

Elvira Lang, MD - Comfort Talk

June 6-8, 2013

by Beverly Richardson

I attended this year's workshop with my friend Luci Schueller. Both of us have attended before, have enjoyed it and learned a great deal. We have always been struck by the commitment of the attendees and presenters to the use of hypnosis and to learning as much as possible about new methods and new thinking in the field.

Listening to people talk about their work is always interesting but this group of people seem to be passionate about what they do and how they do it. People share freely about their experiences in group discussions and during the breaks. The presenters have all seemed to be enthusiastic and knowledgeable. We met new people this year and saw many who were familiar from past conferences. People were friendly and many of them seem to be very active in promoting hypnosis in a variety of settings.

The focus this year was on how to do rapid inductions to give comfort and relief to people who are undergoing medical procedures that can be stressful and anxiety provoking. The technique was intriguing but a bit difficult to imitate. Having a script to read helped but having a few more might have been useful. There were a number of chances to practice in small groups. We never seemed to have enough time to practice, of course, but I think that is always the way it is when time is short and there is a lot of material to be gotten through. We got enough time to get a taste of what we needed to do and watching others work was also good.

Dr. Elvira Lang was extremely personable and obviously devoted to her craft. She told us she gave up a lucrative career in radiology to focus on teaching hypnosis and that that was both exhilarating and frightening for her. She was charismatic and open to discussing how her career has progressed. She used humor often and her grasp of the material was such that she was comfortable with any question that anyone asked.

What she told us was generally practical and very useful. Listening to her was never boring as she mixed things up enough to engage our interest for two full days. With a long workshop like this, having someone who is animated and fun to listen to is very helpful.

I am retired from Mayo clinic where I worked for many years as a psychiatric nurse. I continue to work as a psychologist at the Center for Effective Living in Rochester where my friend Luci Schueller also works as a psychologist. Hypnosis is something I use a great deal in my work where I find that people can often make excellent progress with hypnosis. I am always looking for new uses and information. Luci is easing into using hypnosis in her practice.

Beverly Richardson



Presenter Elvira Lang fields a question from Delle Jacobs.



Our reviewer on the right, Beverly Richardson, with her friend Lisa Schueller in the middle, and another attendee on the left.

Meet New Board Members

Nancy Arikian, PhD, LP

I had the opportunity to participate in the MSCH Introductory Workshop as a graduate student through a practicum at the VA Medical Center in 1994. I found hypnosis intriguing, but didn't pursue it further at that time. After starting my private practice in 2003, I consulted with colleagues who happened to be very skilled in hypnosis and I began attending MSCH workshops regularly; these helped build my skills, comfort, and confidence in using hypnosis. I decided to pursue certification in hypnosis by ASCH and earned my certification in 2012 with a focus on performance enhancement. In my practice, I work with adult clients struggling with a variety of issues, including anxiety, depressed mood, physical health issues, and performance challenges; seeing the results of hypnosis with clients has been very powerful. The MSCH annual workshops have been a professional highlight of the year for me because of the high quality of the training and also because of the wonderful people who participate. I had decided that I would like to get more involved with this great group of people, and then I was approached to be on the board. I was thrilled at the opportunity and am looking forward to continued learning, helping to produce excellent educational offerings, and connecting with colleagues.

Benjamin Wolf, MSW

As with most things in my career, my exposure to hypnosis came about in an unintentional way. I realized with only a few months left that some of my CEU's did not count towards my licensure renewal, and I quickly needed to find something that would fill those requirements. This is how I stumbled upon the NPHTI training last fall. Mere moments into the workshop I was hooked. The faculty were warm, knowledgeable and, most importantly, they were open to teaching their craft. Since then I've tried to attend as many MSCH workshops as possible.

As a new member of the board, I am excited to work on the web site and social media projects that MSCH has been working toward, so that these forms of media can be useful tools for both our members and the public. I also am looking forward

to meeting with and learning more from others about how useful hypnosis can be.

I started in solo practice in 2011, working with adolescents and adults focusing on eating disorders, and trauma. I am also certified in EMDR, and enjoy using this and hypnosis in my practice. When I am not at work, I can be found at home wearing my favorite hat, that of dad to my two kids who are currently 2 and 5.

Susan Heitzman, MS

My interest in hypnotherapy began after hearing Dan Kohen speak at our hospital's Child/Adolescent Behavioral Services Grand Rounds several years ago. Dan described using hypnosis with a child who was experiencing nocturnal enuresis. It was fascinating to learn about a clinical intervention that was so empowering—with the added benefit of not requiring a medication.

Awhile later, I attended the fall conference sponsored by the National Pediatric Hypnosis Training Institute and joined MSCH. It has been one of the best decisions in my career. Being on the list serve was a wonderful opportunity to learn how hypnosis is being used by experts from all over the world. And the workshops and conferences are fantastic.

I'm looking forward to serving on the Board and continuing to learn and share this great opportunity with others.



New board members

Nancy Arikian, Benjamin Wolf, and Susan Heitzman

“Learning to Blow: About Being Hypnotic”

by Richard (Dick) Studer

I came across this piece the other day. It has been languishing on my computer for about 10 years. It is simply a description of an approach that developed out of necessity. I make no claim that it is original, even though it certainly was new to me at the time.

As Clinical Supervisor/Director, for what then was a dual-diagnosis day treatment program, I had clinical responsibility for all that went on within the program. I had accepted that, however, there were those times when the opening over at the Super America Station Store looked awfully attractive.

On one day in particular that was very true.

I was in the midst of a therapy session when there was a frantic knock on my door, in seeming disregard for my Do Not Disturb sign. I assumed it was one of the clients, who seemed to regularly ignore it. So I ignored the knocking as well. The knocking continued and when the group leader from next door poked her head in, just the look on her face was enough to tell me it was time to “assume the position.” She told me that one of her group members, C., had dissociated and was unresponsive. “I don’t know what to do!” she said. My first reaction was something like, “Join the club!” Fortunately, this thought stayed within the confines of my head, allowing me to look more confident than I was beginning to feel.

I asked her a couple of questions, getting my bearings, made sure my client was in a place where we could take a break, instructed the group leader to take a break with the rest of her group and proceeded down the hall. On entering the room, sure enough, there was C. I thought, “This isn’t a practical joke after all.” I closed the door. I sat down near C. and spoke to her, trying to make some sort of contact.

So there I sat, looking at C., glancing at the interesting things stuck on the walls, written on the whiteboard, strewn about the floor and pondering, “What do I do with this?” It was up to me to handle it since I was “the man.”

As I sat there I figured it was a good time to see if the ideas I try to use and to teach others are really good for anything in a pinch. I relaxed, took a couple of breaths, gazed at C., and waited. I verbally assured her that she was safe, I would not leave her alone, and that it was OK. I let my mind wander as I concentrated on just looking at C., beginning to feel more at ease with the situation, more confident that I somehow knew what to do. I assumed C. was “in there, somewhere.” I just had to find her and bring her back.

I watched and relaxed, thinking, “This looks a lot like a hypnotic trance, and I do know something about trances.” Her eyelid twitched. I automatically said, “That’s right.... and you’re breathing comfortably..... sitting... quietly.... safe.” We sat some more. Her eye twitched again. “That’s right....

gooooo.... you’re listening... and getting ready.... breathing comfortably.... safe.... listening to my voice... getting ready.... coming back.” I proceeded along these lines for a while, gradually elaborating and focusing more and more on awakening. She was responding, twitching more, adjusting her breathing, her eyes opening more and more. (Note: This is a very abridged version of what actually transpired.)

By the time the crisis response team arrived, having been called by another staff following our usual policy, C. had re-emerged and was becoming more and more alert. The team did their part, after which C. declined their offers of transport and convinced them she was all right and was just going to go home. C. wasn’t about to be locked up. I had lost track of time but discovered that from the time I entered the room, up to the time the crisis people arrived, had been about thirty minutes.

A few days later C. asked to speak with me. I invited her in and she asked, “How did you do that?” “What do mean?” “How did you get me to wake up? No one’s ever been able to do that before.” I responded, “I don’t know, it just seemed like the right thing to do at the time.”

A week or two later there was another knock at my door. C. was gone again, in the same group. I thought, “What’s going on in there? This could get old.” I approached the situation much more confidently this time. I used the same basic approach and the result was successful but it was a much tougher go this time, taking about fifty minutes to bring her back from wherever she had gone. At one point I had to remove a sucker from her mouth to insure she didn’t choke, and at another time had to sit her up in the chair so she wouldn’t fall on her face on the floor.

A week later, another dissociative client, who’d been known to “leave” during group but who’d always been fairly easy to bring back, really went away. I was called, and the same approach proved successful again. It seemed I was on to something. That was about 10 years ago. I’ve not had to deal with any other such situations since then.

I had thought about writing this up several times but didn’t, assuming most people probably know it anyway, and not wanting to expose my ignorance. However, lately, I’ve been re-thinking it and decided that there are probably at least a few people in the field that might learn something from my experience.

I’ve believed for a long time that, even in the depths of unconsciousness, a person is able to listen and hear. I demonstrated this to my satisfaction, and most dramatically, when my mother had a major stroke in

January of 1991, but that is another story. In this situation it simply had to do with trying to make contact, assuming that C. was there, somewhere, and able to hear and respond.

Everything I did in this example was grounded in what I then called thinking hypnotically. (Later, I realized that the notion of "being hypnotic" seems to fit better, as it *puts the thinking into action.*) After learning many techniques and approaches, hearing others' ideas and having had a fair amount of experience "doing hypnosis," a lot has faded into the background.

Overall, for me, this fading into the background seems to be more comprehensive and broadly useful. But it has its weaknesses. For example, it is not a pleasant experience to attend a workshop only to walk away frustrated with how much I had forgotten I knew, you know? That's about the lack of detail, of not thinking about what something is called, of forgetting what so and so said you ought to do in this situation, while trying to pay attention to the person and situation at hand. I'm not recommending my disability to anyone else. You've all got your own problems.

The idea has more in common with learning to play jazz. Somehow, along the way, you just start to play. Your focus is on the music, on just "blowing." If need be, you could get technical about it, but that's not really the point. The point is to play the music and not over think it. This takes time and experience and not all heads are wired to do things this way.

Being hypnotic, like playing jazz, is improvising from well-established principles, techniques and approaches. It seems to require a broader frame of reference in order to organize what you're doing in a consistent way. I don't know if it matters what that specific frame is. I think there does need to be something to give it shape and make sense out of what you're doing, a theory or model. Things will vary depending on where your head is, but the main point is that you've got something to hang on to, so you can learn to "blow."

The late great Milton Erickson had some way of organizing what he was doing, a way of thinking, a theory, although he never copped to any such thing. But you know, watching his work, that he was way beyond just tying techniques together. He was "blowing" all the time.

In the example, I used what I knew, even though I didn't know exactly what I knew that was usable. But, just as it is when thrown into a new piece of music, or with a new band, with a good foundation in the basics and enough experience, you can do a competent job. You can blow.

Learn all about hypnosis, the basics. Don't get too lost in details. Start to make sense of it in a bigger way. You may already have a framework, or you may need to discover one. I don't think you'll regret it.

Richard J. Studer, MA, LMFT, LP, LICSW was Clinical Supervisor/Director for Pathways Counseling Center's Adult MI/CD Day Treatment and Psychiatric Rehabilitation Programs in St. Paul, MN for 14 years. He served on the Board of Directors for MSCH for 7 years. He is an ASCH Approved Consultant in Clinical Hypnosis and an AAMFT/MMFT Approved Supervisor in Marriage and Family Therapy.



Richard (Dick) Studer in 2012, when he received the MSCH Outstanding Clinician Award from Delle Jacobs.

MINNESOTA SOCIETY OF CLINICAL HYPNOSIS 2013-2014 Program in Continuing Hypnosis Education

NOTE: ALL MSCH Continuing Education Sessions are MEMBERS ONLY unless otherwise indicated.

Date/Location	Focus/Title	Speaker
Saturday, Sept 21, 2013 8:30 a.m. – 12:00 N Carondelet Center 1890 Randolph Ave St. Paul, MN 55105	Clinical Hypnosis for Affect Regulation	Faculty: Wendy Lemke, MA.,LP
October 3-5, 2013 Oak Ridge Hotel and Conference Center Chaska	Pediatric Hypnosis Workshops Introductory-Intermediate-Advanced <i>sponsored by NPHTI</i> <i>National Pediatric Hypnosis Training Institute</i> <i>MSCH & U of MN Dept of Pediatrics</i>	Internationally and Nationally- recognized Faculty
October 3-6, 2013	SCEH 64th Annual Workshops & Scientific Program	Info: www.sceh.us
Sunday, Oct 13, 2013 8:30 a.m. – 4:30 p.m. Carondelet Center	18th Annual Rosenthal Retreat Members Only Powerful Healing in Integrative Medicine: Developing Characteristics & Strategies for Success	Guest Faculty: Mark B Weisberg, PhD, ABPP & Sheryll A Daniel, PhD North Carolina
October 31 - Nov 3, 2013 Heidelberg, GERMANY	"Kindertagung" 7th European Child Hypnosis Congress	Info: www.meg-rottweil.de
Saturday, Nov 16, 2013 8:30 a.m. – 12:00 N Carondelet Center	Applications of Age Regression in Therapeutic Hypnosis	Faculty: Delle Jacobs, MSW
Saturday, Jan 25, 2014 8:30 a.m. – 12:00 N Carondelet Center	The Other Trance: Dissociation	Faculty: Noel Larson, PhD Meta Resources
Saturday, Feb 15, 2014 8:30 a.m. – 12:00 N Carondelet Center	Strengthening Mastery: Helping Children to Develop Mindfulness & Self-Hypnosis Skills & to Teach their Parents	Faculty: Lynda Richtsmeier-Cyr, PhD & Kevin Harrington, PhD
Saturday Mar 15, 2014 8:30 a.m. – 12:00 N Carondelet Center	Counting Sheep: Hypnotic Approaches to Treatment of Insomnia	Faculty: Ewa Peczalska, PhD
March 21-25, 2014 San Diego, CA	American Society of Clinical Hypnosis (ASCH) 56th Annual Scientific Meeting & Workshops	Info: www.asch.net
Saturday, April 26, 2014	Special Rochester Workshop To Be Announced	Faculty: To Be Announced
Thurs-Sat, June 5-7, 2014 Oak Ridge Hotel & Conference Center Chaska	43rd Annual MSCH/U of MN Introductory and Advanced Workshops in Clinical Hypnosis	Guest Faculty: Dan Handel, MD Director, Palliative Medicine Division-Denver Health Past-President, ASCH
Thurs-Sat, June 4-6, 2015 Oak Ridge Hotel and Conference Center Chaska	44th Annual MSCH/U of MN Introductory and Advanced Workshops in Clinical Hypnosis	Guest Faculty: Stephen Gilligan, PhD
Thurs-Sat, June 4-6, 2016 Oak Ridge Hotel and Conference Center Chaska	45th Annual MSCH/U of MN Introductory and Advanced Workshops in Clinical Hypnosis	Guest Faculty: Mark Jensen, PhD University of Washington

Minnesota Society for Clinical Hypnosis
Presents a Members Only Workshop

Saturday September 21, 2013

8:30 a.m* to 12:00 N

*Registration is from 8:30-9

Cost: \$15 | Register at the Door

Carondelet Center | 1890 Randolph Avenue | St. Paul, MN 55105

CLINICAL HYPNOSIS FOR AFFECT REGULATION

WENDY LEMKE, M.S.

Emotional dysregulation is a symptom of many psychological disorders especially those with anxiety and/or a history of trauma. Clinical hypnosis is an effective tool to assist in teaching affect-regulation skills which are crucial during the first phase of trauma treatment. This workshop will benefit anyone who wants to learn ways to assist your client with anxiety and affect regulation.

WORKSHOP OBJECTIVES:

- Describe the relevance of affect regulation in the treatment of psychological disorders
- Demonstrate several hypnotic techniques for affect regulation
- Explore the limitations of DBT and ways to address those limitations through an ego state therapy approach



Wendy Lemke M.S. is a Licensed Psychologist with a Clinical and consulting practice in Clearwater and Brooklyn Park, MN. She is a part-time faculty member at St. Cloud Technical Community College. She is a former MSCH Board Member, currently serves as ASCH Vice-President and is an ASCH-Approved Consultant. She also is a Member and Fellow of the International Society for the Study of Trauma and Dissociation.

MINNESOTA SOCIETY OF CLINICAL HYPNOSIS

presents

18th ANNUAL ROSENTHAL MEMBERS RETREAT

Sunday, October 13, 2013

8:30 am – 4:30 pm

Carondelet Center – St. Paul

Powerful Healing in Integrative Medicine: Developing Characteristics and Strategies for Success

Sheryll A. Daniel, Ph.D., and Mark B. Weisberg, Ph.D., ABPP

Description:

Participants in this workshop will increase their ability to think and practice from an integrative, mind-body approach. Drs. Daniel and Weisberg will update participants on the underpinnings and latest concepts of the rapidly growing field of psychoneuroimmunology (PNI). They will discuss how knowledge of PNI and specific brain structures and functions can inform our understanding of many illnesses and pain conditions, and how participants can develop more precise formulations, treatment plans, and hypnotic strategies based on this knowledge. They will address ways in which characteristics of the clinician powerfully affect the efficacy of hypnotic interventions, and will teach specific areas to be addressed by clinicians toward optimizing their function. They will also demonstrate how treatment outcomes are profoundly affected by the clinician's beliefs regarding what they think is – or is not – possible or treatable with hypnosis. The presentation will blend didactic material, case examples, and experiential learning.

Learning Objectives:

- Participants will obtain current updated information about psychoneuroimmunology (PNI), and will be able to describe at least two ways in which an understanding of PNI can inform more effective hypnotic interventions
- Participants will identify at least three brain structures that mediate mind-body interactions, and will be able to describe how to create hypnotic interventions based on this information
- Participants will learn at least two hypnotic approaches that are useful with treating patients with complex chronic pain including headache, low back pain, TMJ and orofacial pain, and autoimmune conditions.
- Participants will identify at least three components of an integrative treatment approach for Irritable Bowel Syndrome, including the integration of hypnotic strategies

- Participants will identify the five essential considerations for clinicians to perform more effectively within a mind/body orientation
- Participants will be able to describe at least two ways in which the clinician's beliefs affect the efficacy of a treatment.

Mark B. Weisberg, Ph.D., ABPP

Dr. Mark Weisberg is a Board-Certified Clinical Health Psychologist in Minneapolis, Minnesota. He is Adjunct Community Faculty, Academic Health Center, University of Minnesota. He is a Fellow of the American Psychological Association, American Society of Clinical Hypnosis, and American Academy of Clinical Health Psychology, as well as Past President of the Minnesota Society of Clinical Hypnosis. He has been involved in clinical practice, teaching, and consultation in integrative mind-body medicine for over 25 years, and lectures nationally and internationally. He has many publications in the medical, dental, and psychological scientific literature. Dr. Weisberg is the co-author of *Trust Your Gut*, (Conari Press, 2013), a consumer book on integrative treatment of digestive disorders.

Sheryll A. Daniel, Ph.D.

Dr. Sheryll Daniel is a clinical psychologist with Family Psychiatry and Psychology Associates in Cary, North Carolina. She is a Fellow and Past President of the American Society of Clinical Hypnosis, and an Associate Editor of the American Journal of Clinical Hypnosis. She is also a Past President of the North Carolina Society of Clinical Hypnosis. In 2013 she received the Thomas P. Wall, DMD Award for Excellence in Teaching Clinical Hypnosis. She has been involved in teaching clinical hypnosis nationally and internationally for over 20 years. Her particular interests include integrative mind-body medicine, communication to patients by health professionals and its impact on expectancies and course of illness or treatment, couples' therapy, and the integration of hypnosis and self-hypnosis into these fields as well as psychotherapy.

ROSENTHAL REGISTRATION

Complete and Mail with \$50 Check:

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