

Health, Hypnosis and Psychotherapy

by

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In this paper, the male pronoun will apply to either gender. The plural pronoun will apply to both authors. The nominal pronoun will apply to the first author.

The body of issues that relate to Health extend far beyond what is encompassed in Medicine. Some people in the health field take a very proactive stance. They seek to identify and create the conditions for people to be healthy. We respect this approach very much. This paper, however, is about what can be done for people when they are not. Matters about health, good health or ill health encompass domains of considerations that go beyond what is formally in Medicine. Thus, a person can hate another for an indeterminate time. He is in our view in ill health. Emotions can be the condition for ill health. In a standard text book on Psychiatry, you will not find one chapter on Hatred, Frustration or Anger. Ill health can also stem from false-to-fact beliefs, past life issues and possession. Such matters are not considered in Medicine. In the matter of beliefs, changing them may be the only basis for the change from ill health to good health. However, there are some beliefs that have to be accepted as they are, and, one has to work within their boundaries to secure a well-formed outcome.

*We dedicate this paper to our friend,
Professor George Woo,
a man of sagacity and circumspection.*

In August 2001, at the 50th Annual Conference of the National Guild of Hypnotists during a formal presentation, Jennifer spontaneously uttered this observation that the world of the therapies (Hypnotherapy and Psychotherapy) is associated with the "weird and wonderful." Having never thought of it that way, I was quite surprised and charmed by her utterance. This, in turn, set her and I on the business of reviewing the path that we have taken over the 22 years of our conjoint clinical practice in these two respective fields. We wanted to find out if we had done anything weird and wonderful.

By this examination, one thing became clear. The public, especially in the West, has always associated Hypnosis and Psychotherapy with the weird and wonderful because when either the weird or wonderful happened they were publicized. Thus, a woman once came with the problem of going blind whenever she had to have blood taken. Her case and its resolution was reported in one of our major Canadian newspapers, the Toronto Star.

Of course, the weird and the wonderful are quite inexplicable. Even accredited and established practitioners in the field are sometimes quite amazed by the weird and wonderful things in Hypnosis and Psychotherapy that result from their work.

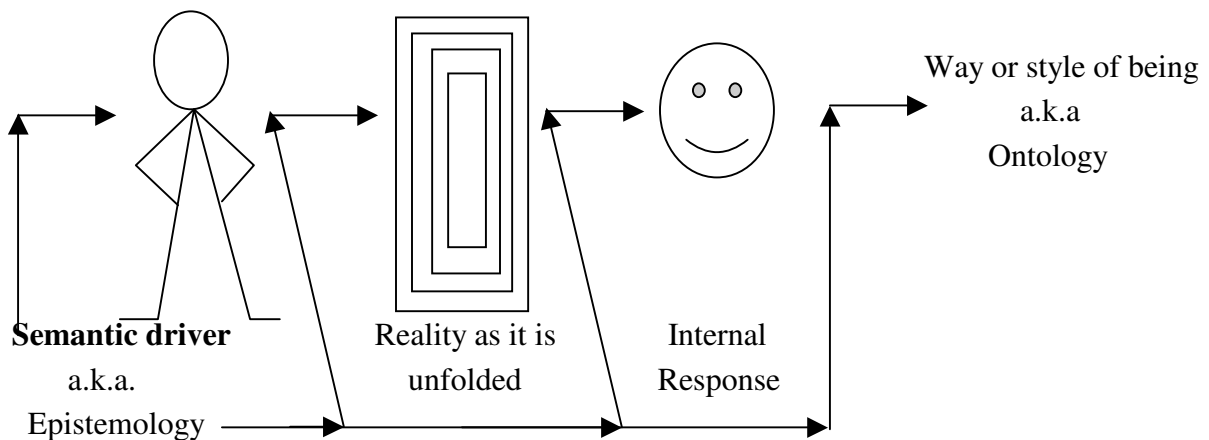
It is now 2002 and the fields of:

1. Applied Epistemology – the study of how people **know to know** to be the way they are. This knowing is a function of structures known as semantic drivers or epistemological tracks.
2. Applied Ontology – the study of the fabric of human subjective reality
3. Applied Semantics – the study of meaning
4. Applied Linguistics – the study of language

have come into their own within the boundaries of the field of Neuro-Semantic Programming (NSP). And from NSP it is now possible to understand the weird and the wonderful in Hypnosis and Psychotherapy.

The study of NSP is the study of the semantic drivers for ongoing human states or ontologies and how to deal with them when they determine problem states. In other words it is the examination of the epistemology for the ontology of being. The semantic driver does two things. It

1. unfolds a unique reality for the person
2. then determines the way a person is going to respond to it.



If one can alter the semantic driver, one can alter a person's reality and then alter how he responds to it. The response is in the thinking on the one hand, and, in the body language or analog, on the other. Both are semantic. The most critical component of all analogical responses in Health is the auto-immune system. The leading edge position today about the auto-immune system is that it is also a mind!

In Varela's opinion a sophisticated psychosomatic ("mind-body") view of health will not develop until we understand the nervous system and the immune system as two interacting cognitive brains, two "brains" in continuous conversation.

Fritjof Capra: *The Web of Life* A New Scientific Understanding of Living Systems Anchor Books Doubleday 1996 page 281.

The pre-eminent weird and yet wonderful phenomenon in Hypnosis is, of course pain control in Surgery. For what seemed like forever, the event defied a credible explication. Now²⁰⁰², the picture is very clear as to how it works.

Ontology is a function of sentient processes. It follows that normal sentience and normal states are by-products of normal internal sentient processes. If these internal sentient processes in a person can be reversed, then, one would secure an altered state. The term “normal” is applied to the person in question. Even a schizophrenic can be said to have “normal sentient processes” in that they are normal to him, notwithstanding the fact that to others, they are deemed abnormal or altered - relative to them.

Normally, we pass from one state to another. Thus, one moment we can be happy and then the next, woeful and then frustrated, and so forth. Each of these states relative to the other is an altered state. However, none of these altered states are hypnotic because in none of these altered states can you put it to the person, “Quack like a duck!” and he then proceeds to do so. He will not because his normal ontological structures are operant. This is to say that his normal semantic drivers are in place. However, in an altered state you can sideline them. Once done, you can put any suggestion to him and he will act on it. An altered state that is compounded with the sidelining of a person’s normal semantic structures is a hypnotic state.

For pain free surgery, a hypnotic state, in and of itself is not sufficient. It is, however, sufficient when you can reverse normal dominant Left Brain processing to thinking by the Right Brain. This final inversion of normal internal sentient processing to dominant right brain thinking is critical in surgical pain relief by Hypnosis. This is known as Non-Dominant Hemispheric access (NDH access). This phrase means that the person would now be consciously thinking or processing by his right brain. The work, *The Knife Without Pain*, maps out how to do this.

In summary then, the model for surgical pain relief proposes that:

1. normal states are functions of normal internal sentient processes and Left Brain function.
2. An altered state for pain free surgery is achieved by reversing
 - a. a person’s normal sentient processes
 - b. setting aside his normal ontological structures
 - c. securing Right Brain function by Non-Dominant Hemispheric access.

In life, all of us are aware that we think. However, when we are asked, “How do you think?” people are not able to answer the query. They are not able to do so because the process is completely out of conscious awareness. The information concerning how this information can be elicited for a given person are delineated in these works:

The Philosophy of As IF by Hans Vaihinger

The Structure of Magic by Richard Bandler and John Grinder

Neuro-Linguistic Programming Part I by Robert Dilts, Richard Bandler, John Grinder, Leslie Cameron Bandler and Judith DeLozier

Power and Elegance in Communication by Dennis K. Chong and Jennifer K. Smith Chong.

The Knife Without Pain by Dennis K. Chong and Jennifer K. Smith Chong.

Currently²⁰⁰², the pre-eminent research issue in the field of the Therapies is the examination about whether a cancer can be reversed!

We believe that this enquiry has emerged because of a set of conditions. One of them is an unconscious knowing and sense, by the public, that Medicine really does not have all the answers for this condition. We believe that nearly everyone has experienced the death of a loved one, friend, colleague and associate from cancer. That this is so only speaks to the failure by Medicine to remit the condition in our loved ones and others. As a result, there is a deep intuitive suspicion about the effectiveness and efficacy of Medicine to remit the condition of a cancer. As a result, we have the emerging situation in which there is an ever increasing number of people who search for their rescue from Alternative Medicine. And we hear of increasing numbers of people who have refused the paths of treatment recommended by their medical specialists. In fact we know of people who have done this.

The crucial question is whether there is a **tenable and sustainable logical basis** for reversing a cancer? The field of Neuro-Semantic Programming has examined this.

NSP has come to understand that one can view a cancer as an ontological state. This can be done because having a cancer is having a unique way of being. This unique way of being is a state. Therefore, ordinary people speak of a cancer as a cancerous state – a unique ontology.

If we think of it this way then something very interesting opens up. Given that human states can be altered, it logically follows that a cancerous state can also be altered. It can, potentially, be reversed.

However, NSP sees a cancerous state as anomalous and very ill-formed in its semantics because it is determined to **inflict as much harm as possible to the person and to secure his death!** NSP also sees that this semantic ill-formedness is **extremely fixated and determined**. Therefore, its inversion requires **POWER**. NSP has concluded that there is only one power that can invert this kind of fixated semantic ontology. It is the **POWER** of the Light of God in all of us.

The NSP model proposed by the authors recognizes this. The only problem is to connect a person with this **POWER**. Once it is done, the cancer can be inverted.

However, to secure the connection, a person has to be in a condition of semantic well-formedness. He cannot be contaminated by such deviations as anger, fear, hatred, frustration, enduring un-forgivingness, un-reconciled bitterness, continuing deep suspiciousness, unhealed wounds from past violations, etc.

In the other model proposed by Margot Hamblett and Richard Bolstad of New Zealand, they too recognize the place and need for power to invert a cancer and the importance to get the condition of semantic well-formedness in a person. In their model they use the power of the Chinese Chi in a person. And they amend the semantic ill-formedness by Neuro-Linguistic Programming (NLP) Techniques. They have reported successes by their methodology.

It is in the nature of our work in Hypnotherapy and Psychotherapy that cancer patients do not come for our help. To date, in our work we have only one case to affirm the validity of our model.

We had been researching the possible form and structure of our model for many years, the research intensified significantly after 1994. By 1999 the form and structure of the model was in place. And it was in March 1999 that Donna Haliepili came to see me. She wanted relief of her abdominal cancer pain by Hypnosis. The lesion was:

1. inoperable
2. resistant to radiotherapy
3. resistant to chemotherapy.

This was an ideal case to test our model.

We knew with that we were able to remit her pain in two weeks of work by Hypnosis. Once pain free there would have been no basis for her to see us again. Therefore, at this first appointment, a moment came when I had to bite the bullet. So I asked her directly whether she would be willing to work with me to reverse the cancer. She promptly said, "Yes."

In the review of our work with her we are now sure that because of a unique internal experience that she subsequently disclosed to us, her cancer actually reversed in June '99. However, it was not until November 1999 when her attending medical adviser advised her that they could not find her cancer.

Her case history was presented in October 2000 to the 5th National Assembly of Canadian Societies of Clinical Hypnosis in Vancouver. We wrote up her history and our model. This paper was published in the 2001 Spring issue of the Australian Journal of Hypnotherapy and Hypnosis and the 2001 Spring NLP issue, Rapport. It was also presented to the 50th Annual Conference of the National Guild of Hypnotists in Nashua, New Hampshire.

Against the background of these two classes of considerations that we cited above, we now index the place of Hypnosis and Psychotherapy for other classes of Health problems. Together we went over the cases that we have helped over these 22 years of our clinical practice. These problems come from patients that we were privileged to work with. The list gives an idea of what Hypnosis and Psychotherapy can do in the domain of Health. We do not believe that this is the definitive list. We are quite sure that there are clinicians who can cite other kinds of Health problems that they have worked with to successful conclusions. And they will support the

phenomenon of the weird and the wonderful that are a feature of therapeutic work. So, here is the list:

1. **Social Health Problems:**
 - a. Smoking
 - b. Gambling
 - c. Alcoholism
 - c. Habituation/Addiction of drugs, medical or otherwise
 - d. Abuse, sexual, physical, mental and psychological
 - d. Stuttering
 - e. Blushing
 - e. Jealousy
 - f. Suspiciousness
2. **Obstetrical and Gynaecological Problems:**
 - a. Infertility
 - b. Remission of labour pains
 - c. Inversion of Endometriosis
 - e. Frigidity, Dyspareunia and Vaginismus
3. **Dermatological Problems:**
 - a. Psoriasis
 - b. Eczema
 - c. Warts
4. **Neurological Problems:**
 - a. Migraines
 - b. Dysfunctional headaches
 - c. Multiple Sclerosis
 - d. Chronic Pain
 - e. Parkinson's
5. **Psychological Problems:**
 - a. Anxiety
 - b. Depression
 - c. Panic Attacks and phobias
 - d. Impotence
 - e. Sleeping Disorders
 - f. Sustained negative emotions of Anger, Frustration,
 - g. Hatred, Unforgivingness
 - i. Sexual fixations
 - j. Functional Blindness
 - k. Past Life Issues
 - l. Possession
 - m. Pathological Grieving
 - o. Excessive self-importance
 - p. Blaming, Faulting and Guilting
 - q. Unresolved Past Life issues
 - r. Short temper and Rages
 - s. Obsessive Compulsive Disorders such Nail Biting, Hair Pulling, Washing of Hands *et alia*.
6. **Dental Problems:**
 - a. Bruxism
 - b. Cheek chewing
7. **Surgical Problems:**

Relief of surgical pain
8. **Oncological Problems:**

Inversions of terminal cancers
9. **General Medical Problems:**
 - a. Obesity
 - b. Anorexia Nervosa and Bulimia
 - c. Asthma and allergies
 - d. Peptic ulcers
 - e. Colitis
 - f. Allergies

g. Asthma

This list is more than sufficient to witness the place of Hypnosis and Psychotherapy in Health concerns.

You will have noted that of the problems that we cited above, there are two that members of the medical profession would dismiss as utter nonsense. They are issues of Past Lives and Possession.

People in the Therapies know that what is critical is not one's private opinion about a problem but that the patient BELIEVES it. And the one thing that is very clear is that:

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So now, the problem is – how do you change a person's belief. How do you undo the semantic driver.

If you can – there is your solution!

And the methodologies to do these things and much more are today nearly in place.