



OHA Journal

Oregon Hypnotherapy Association—Preserving Professionalism In Hypnotherapy
Vol 27 March 2007

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ADMINISTRATIVE REPORT
Horace Simmons, Administrator

Pre-surgery Hypnosis

Pre-surgery hypnosis has been used to prevent bleeding during surgery, and accelerate post-surgery healing.

This was the first time that I used the training I received for pre-surgical hypnosis.

I wish to share an experience that I had with my mother. She was scheduled for hip replacement surgery at the end of last July. She was 84 years old at the time. I flew down to work with her for a couple of sessions before the surgery. I gave suggestions for no bleeding during surgery and for no swelling of the incision afterwards.

When the surgery was complete, the doctor came out and said there had been no bleeding during the surgery, so she did not need a transfusion. After two days at the hospital, she

was transferred to a recovery facility. She had very little swelling at the site of the incision.

She went back to the hospital for a check-up, and the doctor, after examining the incision, said that it looked like it had been at least three or four weeks since the surgery. The nurse, looking at the chart, said, "Sixteen days."

She went back to the recovery facility for a couple of days more, and then went home. At six weeks, she went back to the doctor, and he cleared her to drive, and to go swimming. I think this is an amazing outcome for an 84-year-old woman.

I believe that all of our members can take advantage of this kind of work to help family members or with a referral from a doctor, to help their patients.

I would like to thank Carole Ockert, our treasurer, for all the great support she has given me in support of my new responsibilities.

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To be held on **Saturday, March 10, 2007**

- OHA Board of Directors**
- Horace Simmons, BA, CHt, President
 - Nancy Wheeler, MPH, CHt.
 - Julie Sorick, CHt, M.NLP
 - Patricia E Peterson MD
 - Clare Katner, CHt
 - Debbie Vaughan, BA, CHt
 - Carole Orchart, CHt.
 - Howard Hamilton, CHt.

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Next Meeting of the OHA Saturday, March 10, 2007
All-day Seminar at Fairfield Inn, 6100 SW Meadows Road, Lake Oswego, Oregon
Starting 11:30 and ending 5:30 pm. 5 hours of continuing education
Members \$45, Non-Members \$55 and Students \$35
Application form enclosed on page 5 or apply to OHA,

More Smoking Facts for Your Cessation Pre-Talk

March 2006

Cigarette smoking has been identified as the most important source of preventable morbidity and premature mortality worldwide. Smoking-related diseases claim an estimated 438,000 American lives each year, including those affected indirectly, such as babies born prematurely due to prenatal maternal smoking and victims of "secondhand" exposure to tobacco's carcinogens. Smoking costs the United States over \$167 billion each year in health-care costs including \$92 billion in mortality-related productivity losses and \$75.5 billion in excess medical expenditures.

Cigarette smoke contains over 4,800 chemicals, 69 of which are known to cause cancer. Smoking is directly responsible for approximately 90 percent of lung cancer deaths and approximately 80-90 percent of COPD (emphysema and chronic bronchitis) deaths.

About 8.6 million people in the U.S. have at least one serious illness caused by smoking. That means that for every person who dies of a smoking-related disease, there are 20 more people who suffer from at least one serious illness associated with smoking.

Among current smokers, chronic lung disease accounts for 73 percent of smoking-related conditions. Even among smokers who have quit chronic lung disease accounts for 50 percent of smoking-related conditions.

Smoking is also a major factor in coronary heart disease and stroke; may be causally related to malignancies in other parts of the body; and has been linked to a variety of other conditions and disorders, including slowed healing of wounds, infertility, and peptic ulcer disease. For the first time, the Surgeon General includes pneumonia in the list of diseases caused by smoking.

Smoking in pregnancy accounts for an estimated 20 to 30 percent of low-birth weight babies, up to 14 percent of preterm deliveries, and some 10 percent of all infant deaths. Even apparently healthy, full-term babies of smokers have been found to be born with narrowed airways and curtailed lung function.

Only about 30 percent of women who smoke stop smoking when they find out they are pregnant; the proportion of quitters is highest among married women and women with higher levels of education. Smoking during pregnancy declined in 2003 to 10.7 percent of women giving birth, down 42 percent from 1990.

Neonatal health-care costs attributable to maternal smoking in the U.S. have been estimated at \$366 million per year, or \$704 per maternal smoker.

Smoking by parents is also associated with a wide range of adverse effects in their children, including exacerbation of asthma, increased frequency of colds and ear infections, and sudden infant death syndrome. Secondhand smoke causes an estimated 150,000 to 300,000 cases of lower respiratory tract infections in children less than 18 months of age, resulting in 7,500 to 15,000 annual hospitalizations

In 2004, an estimated 44.5 million, or 20.9 percent of, adults were current smokers. The annual prevalence of smoking has declined 40 percent between 1965 and 1990, but has been unchanged virtually thereafter.

Smoking in pregnancy accounts for an estimated 20 to 30 percent of low-birth weight babies, up to 14 percent of preterm deliveries, and some 10 percent of all infant deaths. Even apparently healthy, full-term babies of smokers have been found to be born with narrowed airways and curtailed Males tend to have significantly higher rates of smoking prevalence than females. In 2004, 23.4 percent of males currently smoked compared to 18.5 percent of females.



Prevalence of current smoking in 2004 was highest among Native American Indians/Alaskan Natives (33.4%), intermediate among non-Hispanic whites (22.2%), and non-Hispanic blacks (20.2%), and lowest among Hispanics (15%) and Asians and Pacific Islanders (11.3%).

As smoking declines among the White non-Hispanic population, tobacco companies have targeted both African Americans and Hispanics with intensive merchandising, which includes billboards, advertising in media targeted to those communities, and sponsorship of civic groups and athletic, cultural, and entertainment events. In 2003, total advertising and promotion by the five major tobacco companies was the highest ever reported at \$15.5 billion.

Tobacco advertising also plays an important role in encouraging young people to begin a lifelong addiction to smoking before they are old enough to fully understand its long-term health risk. Approximately 90 percent of smokers begin smoking before the age of 21.

In 2004, 22 percent of high school students were current smokers. Over 8 percent of middle school students were current smokers in 2004.

Secondhand smoke involuntarily inhaled by non-smokers from other people's cigarettes is classified by the U.S. Environmental Protection Agency as a known human (Group A) carcinogen, responsible for approximately 3,000 lung cancer deaths annually in U.S. nonsmokers.

Workplaces nationwide are going smoke-free to provide clean indoor air and protect employees from the life-threatening effects of secondhand smoke. Nearly 70 percent of the U.S. workforce worked under a smoke free policy in 1999, but the percentage of workers protected varies by state, ranging from a high of 83.9 percent in Utah to 48.7% in Nevada.

Employers have a legal right to restrict smoking in the workplace, or implement a totally smoke-free workplace policy. Exceptions may arise in the case of collective bargaining agreements with unions.

Nicotine is an addictive drug, which when inhaled in cigarette smoke reaches the brain faster than drugs that enter the body intravenously. Smokers not only become physically addicted to nicotine; they also link smoking with many social activities, making smoking a difficult habit to break.

In 2003, an estimated 45.9 million adults were former smokers. Of the current 44.5 million smokers, more than 32 million persons reported they wanted to quit smoking completely.

Nicotine replacement products can help relieve withdrawal symptoms people experience when they quit smoking. Nicotine patches, nicotine gum and nicotine lozenges are available over-the-counter, and a nicotine nasal spray and inhaler, as well as a non-nicotine pill, are currently available by prescription.

Nicotine replacement therapies are helpful in quitting when combined with a behavior change program such as the American Lung Association's Freedom From Smoking (FFS), which addresses psychological and behavioral addictions to smoking and strategies for coping with urges to smoke.

Hypnosis and Addictions

[Am J Clin Hypn. 1991 Jul;34\(1\):69.](#)

Reframing of an addiction via hypnotherapy: a case presentation.

Orman DJ. A chemically dependent man was treated using hypnotherapy and related psychotherapeutic techniques. I started by taking a psychosocial history and then introduced such interventions as pattern interruption and symbolic task assignments to establish initial sobriety. The majority of the sessions focused on age regressing the patient to events correlating to drug and alcohol abuse. During these events I introduced myself via hypnosis as "the voice from the future" to redefine the events and extract the useful learnings. With a new-found positive self-image, the patient was hypnotically age progressed to review future scenes. In each scene he successfully abstained from drug and alcohol use. The patient remained drug and alcohol free during treatment and the 6-month and one-year follow-ups.

PMID: 2024619 [PubMed - indexed for MEDLINE]

Note:

The Oregon Hypnotherapy Association requires not less than 150 hours hypnosis-related training and relevant experience for membership. In addition the Association requires continuing education in the amount of 30 hours per year for continued membership.

1: [Am J Clin Hypn. 1993 Oct;36\(2\):120-3.](#)
Links The use of hypnosis in cocaine addiction.

Handley GW. Ohio State University, Lima 45804. An unusual case is presented in which hypnosis was successfully used to overcome a \$500 (five grams) per day cocaine addiction. The subject was a female in her twenties. Six months into her addiction, she acquired a commercial weight-control tape that she used successfully to stop smoking cigarettes (mentally substituting the word "smoking"), as well as to bring her down from her cocaine high and allow her to fall asleep. After approximately 8 months of addiction, she decided to use the tape in an attempt to overcome the addiction itself. Over the next 4 months, she listened to the tape three times a day, mentally substituting the word "coke." At the end of this period, her addiction was broken, and she has been drug free for the past 9 years. Her withdrawal and recovery were extraordinary because hypnosis was the only intervention, and no support network of any kind was available.

PMID: 8259763 [PubMed - indexed for MEDLINE]

Hypnosis Works—Use It



OHA all day Seminar

Fairfield Inn, 6100 SW Meadows Road, Lake Oswego, Oregon

Saturday, March 10, 2007

Starting 11:30 pm and ending 5:30 pm. 5 hours of continuing education.

11:30 to 12:00 Board Meeting

11:30 to 12:00 Registration

A catered lunch will be provided at no additional cost.

12:00 to 1:30 Horace Simmons: Spirit Releasement Therapy

What to do when a person senses that they have another spirit co-habiting with them.

This treatment technique was developed by William Baldwin, for use with problems that don't clear up with conventional NLP or hypnotherapy techniques. This presentation will cover the principles that Dr. Baldwin presents, with case reports on how my clients have benefited.

Short Break

1:45 to 3:15 Geoffrey Knight: Eating Disorders.

Short Break

3:30 to 5:00 Gayle Gardner: The Power of Pre-Talk.

5:00 to 5:30 Future Planning



APPLICATION FORM for OHA Seminar March 10, 2007

Fairfield Inn, 6100 SW Meadows Rd, Lake Oswego (Off I-5)

Ticket: Members \$ 45, Non-Members \$55, Students \$ 35,

Name.....Address.....
City.....State.....Zip.....Tel:.....
Apply for (#).....Member's, and/or(#)Non-Member's ,#..... Student's and enclose Check for \$.....

Checks to be made payable to Oregon Hypnotherapy Association.

Send to: Oregon Hypnotherapy Association

16869 SW 65th Ave. PMB 357

Lake Oswego, OR 97035

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