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# Complementary Therapies in Clinical Practice

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## Practical uses of clinical hypnosis in enhancing fertility, healthy pregnancy and childbirth

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The following article identifies practical uses of hypnosis within midwifery. The author and her team teaches clinical hypnosis at 11 medical schools in the UK.

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### 1. Introduction

Clinical hypnosis is the term used for a therapeutic protocol which utilizes a relaxed and focused state of awareness (hypnosis) to deliver therapeutic suggestions to achieve a previously identified outcome.

Clinical hypnosis for pregnancy and childbirth has been used in the UK since it was introduced in 1950 at the Laying-In Hospital in the City of London, and the therapy was discussed in the British Medical Journal (BMJ) around that time.<sup>14</sup> Since then, it has been skirting the periphery of maternity care. Pregnant women in the United Kingdom 21st century who choose to use hypnosis to prepare for birth and in labour have frequently needed to consult independent practitioners, due to limited availability in the UK National Health Service (NHS). However, clinical hypnosis can be used throughout all stages of the reproductive cycle, from conception to the postnatal period. This paper discusses the application and adaptability of hypnosis in contemporary midwifery practice.

The term “clinical hypnosis” when used in the context of obstetrics is a generic term which reflects the concept of the individualised and adaptable approach needed for pregnant, labouring and newly-delivered mothers. In recent years a style of hypnotic technique designed to help during labour, Hypno-birthing<sup>®</sup>, has become very popular and many women – and midwives – regard this as the definitive system for childbirth. However this is just one formulaic approach and midwives should be wary of talking about a particular commercial style unless that is actually what they mean.

At its most simplistic level, the use of hypnosis (i.e. the purely relaxation component of the protocol), will reduce stress and

enhance feelings of control in the mother – a valid reason for using it even if it is not used to induce a specific outcome.<sup>9</sup>

### 2. Fertility

Hypnosis incorporates a deep relaxation technique, reducing stress and the intensity of emotional and psychological concentration on conception. This therapy can also help to manage psycho-emotional issues which may influence her ability and desire to get pregnant, for example, rape,<sup>5</sup> sexual abuse,<sup>17</sup> vaginismus,<sup>6</sup> issues around body image.<sup>1</sup> The important factor is that the clinical hypnosis practitioner does not practise therapy on the person, but on the person's relationship with her problem, that is, identifying and treating the specific element which may be preventing her from becoming pregnant. This allows the woman to narrow her field of focus in such a way that she can achieve her outcome (pregnancy), but therapy does not have to encroach onto wider issues of her mental health.

The use of hypnosis to enhance fertility has been slow to reach mainstream healthcare practice, although there have been studies on the use of autogenic training techniques where the process is very similar to that of hypnosis.<sup>12,15</sup> More recently its use to accompany assisted reproduction has been explored by Levitas et al<sup>11</sup> – in this study, during embryo transfer and it was considered that “the use of hypnosis during (embryo transfer) may significantly improve the IVF/ET cycle outcome in terms of increased implantation and clinical pregnancy rates. Furthermore, it seems that the patients' attitude to the treatment was more favorable.” As both the efficacy and the feelings of the participants were enhanced, the study clearly demonstrated the benefits of using hypnosis.

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### 3. Pregnancy

Teaching self-hypnosis in pregnancy is fundamental to ensuring the process is as effective as possible.<sup>10</sup> It also provides the mother with a self-help tool for use any time and over which she has complete control she may not have had previously.

Hypnotherapy treatment is adapted according to the mother's symptoms, for example, nausea and vomiting,<sup>18</sup> poor sleep, or pregnancy-associated hypertension<sup>16</sup> – the therapeutic suggestions made during the hypnosis sessions can be tailored directly towards alleviation of symptoms, and accommodation of the physical, emotional and psycho-social changes. The emphasis at this stage is on reducing negative responses to stress, caring for the self appropriately (eating well, moderate exercise, regular sleep patterns). In addition, the reduction or elimination of habits which are harmful to the unborn child can be treated, for example, smoking cessation.<sup>19</sup> A higher success rate can be achieved if emphasis is placed on stopping smoking for the duration of the pregnancy *only*; if a woman has not stopped smoking before her pregnancy, she will only be doing so at this stage for the sake of her unborn baby. The basic psychology of smoking means that if the woman feels the pressure is off to stop permanently, it is easier to stop for the duration of the pregnancy, and in the majority of cases they stop permanently anyway, and the objective of treatment in this instance is a healthy pregnancy.

### 4. Childbirth

Clinical hypnosis treatment for childbirth starts in the third trimester, and focuses around preparation for the birth. Using the self-hypnosis sessions taught by the midwife, the mother can then use it as a way of communicating with her baby, and can mentally prepare herself for the events to occur as soon as labour commences.<sup>3,13</sup> Suggestions for pain relief<sup>2</sup> and/or dissociation from the pain are also introduced into the therapeutic suggestions at this stage. The hypnosis is self-administered during labour, allowing the woman to take as much control of the process as she can (or wishes to). Research on hypnosis for childbirth is still not sufficiently robust or consistent to state definitively that it works for everyone, but the indications in a recent systematic review show some promising positive benefits.<sup>4</sup>

Mothers who have practised hypnosis during pregnancy can be extremely relaxed during the first stage of labour, a fact which may cause midwives to misinterpret the progress the mother is making. A client, who had received antenatal clinical hypnosis from this author, presented at her local hospital, telling them she had gone into labour, but she was so relaxed and calm that the midwives did not believe her. Unfortunately, perhaps partly because she had progressed further than was externally apparent, the mother became very distressed, which then distressed her baby and resulted in an emergency Caesarean section. With so many mothers choosing to seek hypnosis to prepare for the birth, it is vital for midwives to appreciate what hypnosis is and what it can do.

### 5. Postnatal support

In *Hypnosis and homeostasis between mother and child*,<sup>7</sup> the author notes that hypnosis can promote a closer bond between mother and baby. Harmon et al<sup>8</sup> reported a reduced incidence of postnatal depression in women who had been taught hypnotic analgesia for childbirth. This suggests that further studies should be undertaken to identify whether those women who had been taught self-hypnosis or hypnotic techniques during pregnancy experienced a reduced incidence of postnatal depression – even though no specific suggestions of this kind were introduced into the

antenatal sessions. The ability to take oneself away from immediate stressors, and to be able to sleep well during periods of disturbed sleep is obviously beneficial.

### 6. Clinical hypnosis for the midwife

Working in a stressful environment can take its toll on the individual, and learning self-hypnosis as a tool will help midwives in a number of ways. For example, by practising self-hypnosis in the morning, before fully aware, can facilitate positive thought processes about the day ahead. You become more calm and are better able to deal with stress, and will find that you act and react in a much more positive and pro-active way. At the end of the day self-hypnosis can similarly relax the mind and body. By making hypnosis a regular daily form of practice the actual techniques also become easier to use so enhancing their effectiveness as stress management techniques.

### 7. Training in clinical hypnosis for midwives

When a midwife uses clinical hypnosis in her practice, they are acquiring an understanding of its value for pregnancy and childbirth and acquiring a tool which can supplement or add value to their work. Hypnosis is simple to learn and easy to apply. The ability to be flexible in thinking, approach and responsive to the needs of the individual is key to good clinical hypnosis practice. It is important, not to simply repeat pre-written scripts. This ensures that all skills and knowledge you have as a midwife can be used to underpin the clinical hypnosis process in the best interests of the individual mother and of individualised care.

Ideally training should emphasise the value of self-hypnosis as a stress management model for use both pre and postpartum.

Courses should focus upon a philosophy of safety, professional accountability and evidence-based practice, but also allow midwives to combine hypnosis with other complementary therapies and integrate it into conventional midwifery care. Courses should also be interprofessional to encourage greater understanding and professional cohesion between doctors, health visitors, hypnotherapists and other maternity workers such as doulas and antenatal educators.

In conclusion, this brief account highlights the potential benefits of hypnosis and self-hypnosis for pre and postpartum mothers as well as their carers. It is hoped that the next few years will see the development of high quality, university accredited, interprofessional courses in this topic.

(For further information on current courses contact [www.expectancy.co.uk](http://www.expectancy.co.uk)).

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