

CLINICAL HYPNOSIS CERTIFICATION TRAINING

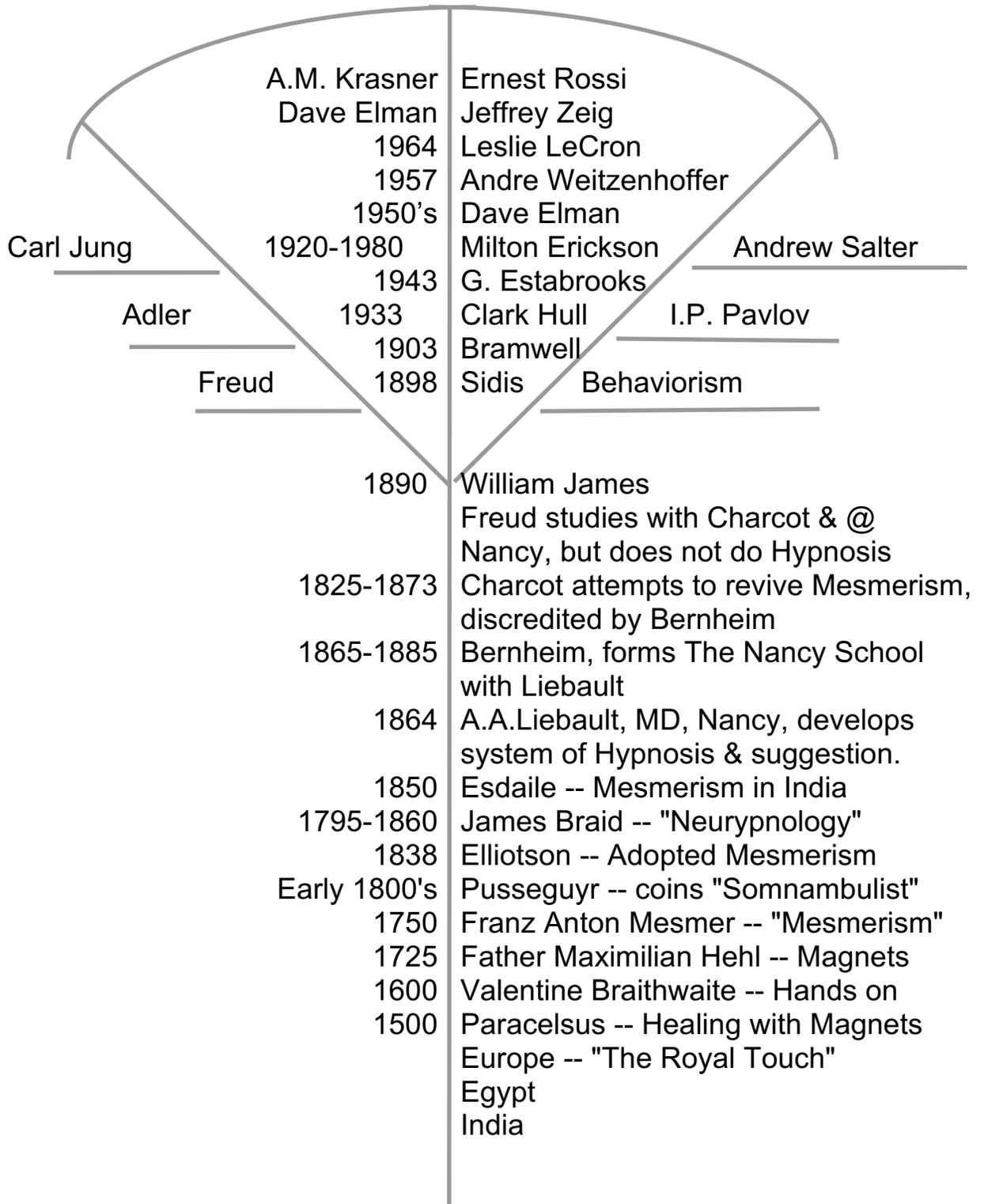


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for certification at the level of Clinical Hypnotherapist

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HISTORY OF HYPNOSIS



THE PRE-TALK

WHAT TO SAY BEFORE YOU SAY, "HAVE YOU EVER...."

Much is done before the induction begins. In fact, it is safe to say that this may be the most important time to create success by speaking to the client's fears, and misconceptions and discussing what to expect.

1. "Don't expect to feel Hypnotized."

Many people come to the Hypnotherapist thinking that there is something about trance, which is markedly different from their "normal" state of consciousness. This is definitely not the case. A Light Trance will likely feel no different from relaxation. Since trance is a normal, natural state, then clients will likely feel a feeling of familiarity, no matter how deep in trance they go. You can say, "Don't expect to feel hypnotized. Trance is not about feeling "zoned out;" it is a normal natural state.

2. "Do expect to feel relaxed."

"Hypnosis is a natural state where you feel increasing levels of relaxation."

3. "You ARE in control."

"During the trance induction, you need to know that you are in charge. For example, if I told you to stand up, and it was OK, you would, right? But if I told you to rob a bank you wouldn't do that. Well it's the same in Hypnosis. You are in charge. You only accept the suggestions that are given that are consistent with your own internal values and beliefs.

4. "Trance is about learning how to go into trance."

"So the process we are about to learn is just that, a learning process. Each step of the way there are several tests, and we will see how many tests you succeed at. The more successful you are the deeper you can go."

STAGES OF HYPNOSIS

1.
 - Lethargy
 - Relaxation
 - Eye Catalepsy

ARM CATALEPSY

2.
 - Catalepsy Of Isolated Muscle Groups
 - Heavy Or Floating Feelings

COMPLETE MUSCLE GROUPS

3.
 - Rapport
 - Smell And Taste Changes
 - Number Block

PARTIAL AMNESIA/ GLOVE ANESTHESIA

4.
 - Amnesia
 - Analgesia (No Pain)
 - Automatic Movement

PARTIAL HALLUCINATIONS

5.
 - Hallucinations (Positive)
Visual And Auditory
 - Bizarre Post-Hypnotic Suggestions

ANESTHESIA (NO FEELINGS)

6.
 - Negative Hallucinations
 - Comatose
 - Somnambulism

Light
20%

Medium
60%

Deep
20%

SUGGESTIBILITY TESTS

1. THE DICTIONARY/BALLOON

“Please hold both hands outstretched and close your eyes. Now turn your right (or your left) hand over and imagine as clearly as you can, a large balloon tied to your hand which is palm down and a heavy unabridged dictionary in your other hand. Now open your eyes.”

2. THE FINGER VICE

“Please take your hands and clasp them together, with your index fingers outstretched, and close your eyes. Now, imagine a vice squeezing your fingers together and notice your fingers are becoming more and more tightly clasped together. Tighter and tighter. (etc.) Now try to open them. Try to pull your fingers apart. Try and find you cannot. The harder you try the harder they clasp themselves together.”

3. THE POSTURAL SWAY

“Please close your eyes and look straight up. Turn your face straight up to the ceiling. Now you’re falling backward; falling, falling, falling. I will catch you. You are falling, falling, falling.”

HYPNOTIC PATTERNS

THE FUNDAMENTALS OF ERICKSONIAN HYPNOSIS

“Patients are patients because they are out of rapport with their own unconscious... Patients are people who have had too much programming - so much outside programming that they have lost touch with their Inner selves. - Milton Erickson, 1976

“My learning over the years was that I tried to direct the patient too much. It took me a long time to let things develop and make use of things as they developed.” - Milton Erickson, 1976

Letting things happen means Utilization.

The Utilization Approach has 3 stages:

1. PREPARATION

Explore the client’s repertory of life experiences and facilitate constructive frames of reference to orient them toward therapeutic change. This is a good time to establish rapport.

2. TRANCE WORK

Activate and utilize the client’s own mental skills during the period of Trance. The Steps:

a. **Fixation of Attention**

Utilizing the client’s beliefs and behavior for focusing attention on Inner realities.

b. **Breaking Client’s Hold on Model of the World**

Distraction, shock, surprise, doubt, confusion, or any other process that interrupts the client’s model of the world.

c. **Unconscious Search**

Implications, questions, puns, and other indirect forms of hypnotic suggestion.-

d. **Unconscious Process**

Activation of personal associations and mental mechanisms by all of the above.

e. **Hypnotic Response**

An expression of behavioral potentials that are experienced as taking place, such as catalepsy, anesthesia, amnesia, hallucinations, age regression, and time distortion.

3. EVALUATION OF RESULTS

Recognize, evaluate and ratify the therapeutic change that takes place.

PATTERNS OF INDIRECT SUGGESTION

1. DIRECT AND INDIRECT SUGGESTION

(The difference between Direct and Indirect)

- A direct suggestion appeals directly to the Conscious Mind, which has the opportunity to evaluate: “Close the window.”
- Indirect suggestions go directly to the Unconscious Mind, and is not evaluated as much: “I’m wondering if you can close the window?”

2. EMBEDDED COMMANDS

Interspersed in the middle of conversations & bypass the conscious mind: “And I want you to tell me only the things **you want to tell me everything**. You can **describe it freely** as you want.”

3. TRUISMS ABOUT SENSATIONS

“Most people can experience **one hand** as **being lighter** than another.”
“Most people **enjoy** the **refreshing coolness** of a light breeze.”
“Some people **blush easily**, as they **recognize certain feelings** about themselves.”

4. TRUISMS UTILIZING TIME

“**Sooner or later**, your eyes are going to close.”
“Your headache (or other symptom) can **leave now ... as soon as your** system is **ready** for it to leave.”

5. NOT KNOWING, NOT DOING

“You don’t have to talk or move or make any sort of effort.”
“You don’t even have to hold your eyes open.”
“People can **sleep and not know** they’re asleep. They **can dream** and not remember the dream. You don’t know when the eyelids will close all by themselves. You may not know just which hand will lift first.”

6. OPEN-ENDED SUGGESTIONS

“We all have potential we are unaware of, and we usually don’t know how it will be expressed.”
“He doesn’t know what he is learning, but he is learning. And it isn’t right for me to tell him, ‘You learn this or you learn that!’ let him learn whatever he wishes, in what ever order he wishes.”

7. COVERING ALL POSSIBILITIES OF RESPONSES

“Soon you will find a finger or a thumb moving a bit, perhaps by itself. It can move up or down, to the side or press down. It can be slow or quick or perhaps not move at all. The really important thing is to sense fully whatever feelings develop.”

8. QUESTIONS TO FACILITATE NEW RESPONSE POSSIBILITIES (TDS)
- a. **To Focus Attention:**
“Did you experience the hypnotic state as basically similar to the waking state, or different from the waking state?”
 - b. **Facilitating Internal Change**
“And what will be the effective means of losing weight? Will it be because you simply forget to eat and have little patience with heavy meals because they prevent you from doing more interesting things?”
9. COMPOUND SUGGESTIONS
- a. **Yes Set:**
“Isn’t it such a beautiful day? Do you see the sun shining? Do you want to go swimming?”
 - b. **Associations:**
“With each breath you take you can become more aware of the natural rhythms of your body and feelings of comfort that develop.”
 - c. **Opposites:**
“As one hand lifts the other can press down.”
 - d. **Negative - Tag Questions:**
“And you can, can you not?” “You can try, can’t you?” “You can’t stop it, can you?” “Why not let that happen?”
 - e. **Negative - Until:**
“You don’t have to go into a trance until you are ready.” “You won’t do it until your unconscious is ready.”
 - f. **Shock, Surprise:**
“Your sex life (pause) just what you need to know and understand about it. (Pause) Secretly what you want (pause) is more important to you.
10. IMPLICATION AND IMPLIED DIRECTIVE (“If... then” statements)
- a. If you sit down then you can go into a trance.
 - b. Now, if you uncross your legs and place your hands comfortably on your lap, then you will be ready to enter a trance.
 - c. As that comfort deepens, your unconscious mind can relax while your conscious reviews the nature of the problem. And when a relevant and interesting thought reaches your conscious mind, your eyes can open as you carefully consider it.

11. BIND AND DOUBLE BINDS

a. Approach - Avoidance:

Would you like to enter trance now or later?

b. Conscious - unconscious:

I think that your unconscious mind knows more about that than your conscious mind does, and if your unconscious mind knows more about it than your conscious mind does, then you probably know more about it than you think you do.

c. Double Disassociation:

You can as a person awaken, but you do not need to awaken as a body. (Pause) You can awaken when your body awakens but without a recognition of your body. (Pause) Just awaken from the neck up.

12. MULTI-LEVEL COMMUNICATION (What's a Metaphor?)

“Now the next thing I want to stress is the tremendous need for each...”of you to”...work out a method of suggestion for himself. In developing my own technique, I worked out what I felt was a good hypnotic technique. It was 30 typewritten pages, single-spaced, of the various types of suggestions necessary to induce a deep trance. And then I slowly cut it down from 30 typewritten pages, single-spaced to 25, to 20, to 15, to 10, to 5 and so on, so that I could use the whole 30 pages or I could just use one page or one paragraph. But I learned how to thoroughly graduate my suggestions, and how to lead from one suggestion to another. When one does that sort of thing, one learns how to follow the leads given by his patient.”

- Milton Erickson, 1981

“ I want you to go back to a time when you were a little, little girl, and my voice will go with you. My voice will become the voices of your parents, your friends, your teachers, and anyone else it needs to be so that it remains consistent with your experience. My voice will become the whispering wind as it tells you the secrets of the trees, the secrets of Nature, the secrets of Life itself. You may hear my voice in the wind, in the rustle of the leaves, or the tinkling of a wind chime, or the sounds around you as you go about your daily life. And when you hear it, listen! You're learning. And you're going to keep right on learning and making the connections that will allow your unconscious mind the freedom to assist you in all those things ... that's right, you're learning.” — *adapted from Milton Erickson.*

THE MILTON MODEL IN ACTION

Minds reads: “You may be wondering why you should be using this product?”

“Many doctors have thought that same thing until they heard that others Doctors are successfully making it work.”

“If you are thinking, oh it’s just another rep doing his/her thing, can I let you know what I’m supplying to you today (or give you another angle to view from....)”

Cause and Effect: “*Because* our company is still what you may call a ‘family business’ *means* we can offer a much more dedicated and caring service to you!”

“When you are thinking about a patient (forced mind read) with chronic pain the next time, perhaps you can remember our conversation” (cheeky grin).

Complex Equivalence: “Our business means business”. You can equate our company to results”.

Embedded commands. “A lot of Doctors have preferred to **USE OUR PRODUCTS**....in the case of people not sleeping through the night with pain....” “**BUY NOW**, you may have noticed that we have an **easy to use** gauge for Sovenor”.

Double Binds: “Would you like to make an appointment now or shall I do a drive by in a week?” “Do you want to use OxyContin for now or introduce Sovenor as well....?”

Modal operators: “So now we have gone through the benefits, do you think this is something you **need** or **should** have?”

Putting it together:

Pacing Current experience (with a mind read): “Dr. we are both sitting here wanting the same thing – pain free patients” “and because we want the same thing, you may want to **use this product** for a period that **will show you this works**.”

THE MILTON MODEL IN TRANCE- ACTION

- Mind Reads *“I know you are wondering how this session will go”*
- Cause & Effect *“Because you are here means you are learning”*
- Complex Equivalence *“Your age means your wisdom has grown”*
- Embedded Commands *“Is it time to - go even deeper now...”*
- Double Binds *“Would you like to just relax or go deeper in trance?”*
- Modal Operators *“Is this trance state something you need or should have?”*
- Pacing Current Experience *“We are both sitting here with the same purpose, to get you beyond your expectations in life....”*
- Internal Processor *“Only you will know if this is right...”*
- Conversational Postulate *“You may want to take this chance to.....”*
- Selectional Restriction Violation *“Research tells us that trance....”*
- Universal Quantifiers *“We all know that.....” “Everyone agrees....”*

The conscious use of language

Words like

Filling up, feeling,
aware, growing,
expanding, notice,
noticing, realise ,
feeling good,
confidence,

Words like - See,
hear, feel, beautifully
think of, discover,
infuse, integrate,
align, ingnite,
unleash, colour of
change, sounds of
success, applause

Words like

Can you, might
be possible,
may, may not,
will, willing,
should, easy to,
consider did,
didn't, can't,
could you,
perhaps you
can't see

HYPNOTIC INDUCTION 1

To relax the body:

Start with the breathing (it's the easiest for you to remember and makes a huge difference to your client to relax them).

Ask them to breathe into the body, slightly deeper than usual (this gives them something to focus on and stops the habitual breath...a nice metaphor of stopping habits already). Get them to balance their breath..equal breath in and out.

Then get them to notice any tiny part of the body relaxing...then start to talk about the whole body relaxing piece by piece. This is incredibly relaxing for the client...but also for you!

Acknowledge the mind by telling them that *“thoughts may come into your mind..and that’s ok...then let the thoughts float away like clouds floating across the sky”, “let your thoughts drift away, like leaves on an autumn tree, far across the field”; like a brook running down the side of a mountain, let your thoughts tumble over each other, cascade over a waterfall, and let the droplets just evaporate into thin air.”*

Then return to the body and keep talking about the body relaxing and talk about each muscle and part of the body. You can say phrases like *“with every breath you take, you can relax more and take the relaxation as it’s running down your spine, through the backbone.....”* (keep talking about every part of the body). If and when you feel it’s appropriate, go back and talk about thoughts and the mind. *“thoughts may come into your mind.....”* (as above).

Then you can use deepening techniques and add suggestions when you know it’s time.

Brain Wave Frequencies

Beta

- 14 Hz - Awakeness, alert. Concentration on tasks, Focusing, vitality.
- 16 Hz – Bottom of hearing range. Releases oxygen/ calcium into cells
- 20. 215 Hz – Brings about safe LSD-25 effects
- 30 Hz – Used for safe marijuana effects
- 33 Hz – Hypersensitivity, C. consciousness
- 38 Hz – Endorphin release
- 46. 98 Hz – Visualization effects, when used with 62.64 & 70.47 Hz

Alpha

- 10 Hz – Enhanced serotonin release. Mood elevation, arousal, stimulant
- 10 Hz – Provides relief from lost sleep, improves general mood
- 10 Hz – Mood elevator. Used to dramatically reduce headaches
- 10 Hz – Clarity, subconscious correlation. Releases serotonin
- 11 Hz – Relaxed yet awake
- 12 Hz – Centering, mental stability. Associated with throat chakra

Theta

- 4.5 Hz – Brings about Shamanic/ Tibetan state of consciousness, Tibetan chants
- 4.9 Hz – Induce relaxation and deeper sleep
- 4.9 Hz – Introspection. Relaxation, meditation
- 5 Hz – Reduces sleep required. Theta replaces need for extensive dreaming
- 5.35 Hz – Allows relaxing breathing, free and efficient
- 5.5 Hz – Inner guidance, intuition
- 6.5 Hz - Centre of Theta frequency. Activates creative frontal lobe
- 7.5 Hz - Activates creative thought for art, invention, music. Problem solving
- 7.5 Hz – Ease of overcoming troublesome issues
- 7.83 Hz – Schumann earth resonance. Grounding, meditative, Leaves you revitalized
- 8.22 Hz – Associated with the mouth. Brings creativity

Delta

- 0.5 Hz – Relaxation, helps soothe headaches
- 0.5 – 1.5 Hz – Pain relief. Endorphin release
- 0.9 Hz – Euphoric feeling
- 1 Hz – Well being. Harmony and balance
- 2.5 Hz – Production of endogenous opiates (pain killers, reduce anxiety)
- 2.5 Hz – Relieves migraine pain. Produces endogenous opiates
- 3.4 Hz – Helps achieve restful sleep
- 3.5 Hz – Feeling of unity with everything. Whole being regeneration
- 3.9 Hz – Self renewal, enhanced inner awareness

- 4.0 Hz – Enkephalin release for reduced stress
- 4.0 Hz – Allows brain to produce enkaphalins, all natural pain killer
- 4 Hz – Full memory scanning. Releases enkephalins
- 4 Hz – Vital for memory and learning. Problem solving, object naming

OVERVIEW

- 1 – 3 Hz – Profound relaxation, restorative sleep. Tranquility and peace
- 3 – 8 Hz – Deep relaxation, meditation. Lucid dreaming
- 3 – 8 Hz – Increased memory, focus, creativity
- 4 – 7 Hz - Profound inner peace, emotional healing. Lowers mental fatigue
- 4 – 7 Hz – Deep meditation, near-sleep brainwaves,
- 9.5 – 10 Hz – Used as gateway to theta / beta
- 11 – 14 Hz – Increased focus and awareness
- 12 – 14 Hz – Learning frequency, good for absorbing information passively
- 12 – 15 Hz – Relaxed focus, improved attentive abilities
- 13 – 27 Hz – Promotes focused attention toward external stimuli
- 13 – 30 Hz – Problem solving, conscious thinking
- 18 – 22 Hz – Intelligence enhancement (combined with 18 Hz)
- 36 – 44 Hz – Maintains alertness when studying. High level thinking
- 40 Hz – Useful for information-rich task processing, vast intelligence
- 147.85 Hz – Brings structure and order, enhances concentration

Chakra Balancing

- Root – 194.18 Hz and 8 Hz (Muladhara)
- Sacral – 210.42 Hz and 9 Hz (Swasthithana)
- Solar Plexus – 126.22 Hz and 10 Hz (Manipura)
- Heart – 136.10 Hz and 10.5 Hz (Anahata)
- Throat – 141.27 Hz and 12 Hz (Vishuddha)
- Third Eye – 221.23 Hz and 13 Hz (Ajna)
- Crown – 172.06 Hz and 15 Hz (Sahasrara)

- Carrier: 90 – 111 Hz – Releases pleasurable beta-endorphin during rise
- 111 Hz – Key frequency for release of beta-endorphins
- Carrier 120 Hz – Helps reduce fatigue and tiredness
- Carrier 105 Hz – Creates complete big picture view of the situation
- Carrier: 384 Hz – Root chakra vibration. Brainwave center
- Carriers: Binaural 136.1 Hz – Sun, light, warmth. Relaxation
- Phase modulated frequencies 272.2 Hz – Double binaural frequency to create relaxing harmonic of 136.1 Hz
- Carriers: 90 – 110 Hz – Pleasure-producing beta-endorphin rise
- 111 Hz – Constant beta endorphin release

DEEPENING TECHNIQUES

DIRECT & INDIRECT

Keep in mind that any suggestions that successfully produce trance phenomena will, of their own accord, deepen the trance and the responsiveness of the client.

1. BY DIRECT OR INDIRECT SUGGESTION:

“(Each time I touch your forehead) notice that you can go even deeper. Go even deeper now.” “With every breath you take, you may find a sense of the deepening relaxation that allows for deep trance to occur.” “Can you imagine walking down a flight of stairs that goes down ten steps for each of ten floors, and as you do go deeper in trance. With each step you take go deeper.

1....2...3...4...5....6...7...8...9....and now you are at the first floor landing,” etc.

2. BY REPEATED INDUCTION:

Repeating the induction of trance, often called “fractionation,” deepens the trance. Typically, the more times a client is hypnotized, the deeper the client will go. If trance is induced several times in succession in a short period of time without allowing the client to fully wake up each time, the client will go deeper.

3. BY USING EMBEDDED METAPHOR:

Using embedded metaphor will deepen the client’s trance. In fact, the more levels of embedded metaphor used, the deeper the trance which follows. (There seems to be a point of diminishing returns which happens after 12 or so embedded metaphors.)

ADVANCED SUBMODALITIES

ALLERGY MODEL

1. Check out any memories – use time line to clear out if needed.
2. Find the submodalities of the substance/allergic (“when you consider pollen, do you have a picture”)
3. Use the logical mind to show them it doesn’t have to be an issue (like a phobia doesn’t)
4. Find something “similar/not-allergic” (assoc)
5. Anchor “similar/not-allergic”
6. Have them visualize a plate of plexiglass (dissoc)
Place allergic on other side
Fire anchor throughout
7. Associate with anchor held
8. Test and Future Pace

PAIN CONTROL

Using Submodalities

1. Distance it, visually:

Put the pain in one hand - perhaps have it come out of the body, roll down one arm - and then visualize what it looks like inside the hand – then throw it away, far away

2. Change the representation to visual:

Firstly, check - out of ten how much is that pain? (Get reality strategy). Imagine the pain as a colour, what colour would it be? What shape? How big and where is it exactly?

Now let that colour come out of the body and drift away up into the sky and disappear. Now where is it and what colour would it be?

Now out of ten how is that sensation (avoid the word “pain”)?

Repeat the process until gone.

3. Breath pain away:

Breath the pain in and imagine it's a huge volcano of light, on each out breath blow out the pain through the volcano like exasust fumes going away. Repeat until gone.

Using suggestion (must have medium to deep hypnosis to work).

1. Direct instruction:

Tell the person directly they will feel a numbing sensation in the area that was having pain – describe how the coolness of the skin starts to numb the area and the more the coolness is being felt, the more the numbness increases.

SMOKING CESSATION

Before the session:

Ordeals: Get clients to prove to you they are worthy to work with you. Get half the money up front and set an ordeal. One that works is to get the smoker to send you one email per day which includes every cigarette they smoked in the day. Also why they smoked it and what was the trigger that prompted it. They must comply with your demand to send one email per day. Tell them if they don't send the deal is off and they lose the deposit of half the money (tough love).

During session: Work with limiting beliefs, triggers, like to dislike submodalities and release the brain washing that makes them believe that smoking does something for them. Also take them back to when smoking was disgusting. You could use that time as an anchor if it's powerful enough.

After the session:

Identify and Eliminate Environmental Triggers

Triggers are physical and psychological stimuli in your environment that remind you either consciously or subconsciously of your desire to smoke. The longer you have smoked, the stronger the connections are between these triggers and your urges. So, the first step is to distance yourself from these triggers as much as possible.

Throw out any smoking paraphernalia like ashtrays or lighters and dry clean any clothing that smells of cigarette smoke.

Begin to disconnect smoking from the triggers that they can't eliminate, e.g., smoking with morning coffee or driving.

Before they quit, try to get them to do these things without smoking.

Work on reducing any stress in their lives that increases their urge to smoke and allow them to completely change their lifestyle.

WEIGHT LOSS

Before the session:

Ordeals: Similar to smoking, get clients to prove to you they are worthy to work with you. Get half the money up front and set an ordeal. One that works is to get the client to send you one email per day which includes every piece of food they had in the day. Also why they eat it and what was the trigger that prompted it. They must comply with your demand to send one email per day. Tell them if they don't send the deal is off and they lose the deposit of half the money (tough love).

During session: Work with limiting beliefs, triggers, like to dislike submodalities and release the brain washing that makes them believe that this food does something for them.

After the session:

Identify and Eliminate Environmental Triggers

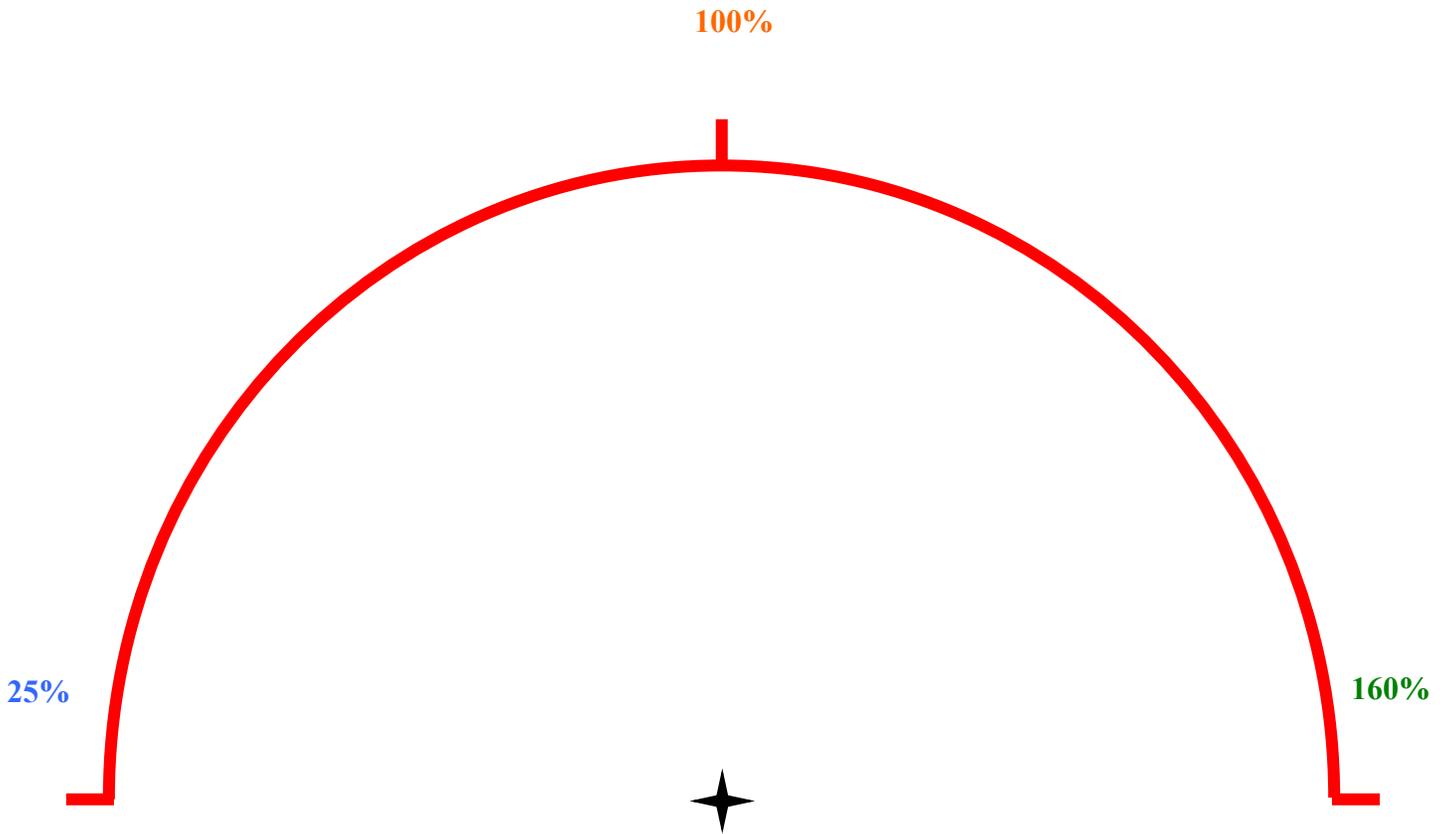
Triggers are physical and psychological stimuli in your environment that remind you either consciously or subconsciously of your desire to eat these foods. The longer you have had the habits, the stronger the connections are between these triggers and your urges. So, the first step is to distance yourself from these triggers as much as possible.

Throw out any food in your house that you do not want any more. Even if it belongs to someone else, control your environment by letting other people know what's happening and get them on the clients side.

Begin to disconnect eating from the triggers that you can't eliminate, e.g., eating with morning tea/coffee or driving.

Work on reducing any stress in their lives that increases their urge to eat unhealthy food.

ANALOG PENDULUM CHART



- Ask UM, “what is my metabolic rate now in relation to my weight?”.
- Ask UM “what’s the percentage it needs to be at, in order to achieve the target weight.
- The use of the Pendulum is *analogue*, so ask your UM to swing in the direction, pointing to the value it’s current at. Then, *while swinging*, ask UM to increase the energy in the body so that it gets to the target figure. Get your signal for ‘yes’ when it has locked this percentage in place.
- Repeat this previous step 3x/day - in the morning, before lunch and before dinner.

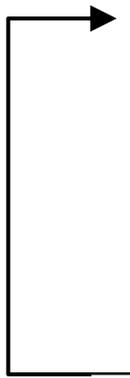
GENERAL PENDULUM PARADIGM

FOR USE WITH CLIENTS

(for Calibration of the Pendulum, the Client must see the pendulum.)

SETTING UP THE PENDULUM: “Sometimes unconscious minds like to give me a signal for ‘yes’ that looks like this. (Take the pendulum and pull it out till horizontal. Then let it go.) And sometimes, unconscious minds like to give me a signal for ‘yes’ that looks like this. (Pull out the pendulum in a 90 degree opposite direction, and let it go.) Now, let’s ask the Unconscious Mind to give us a signal for ‘yes’. And now, a signal for ‘no’”.

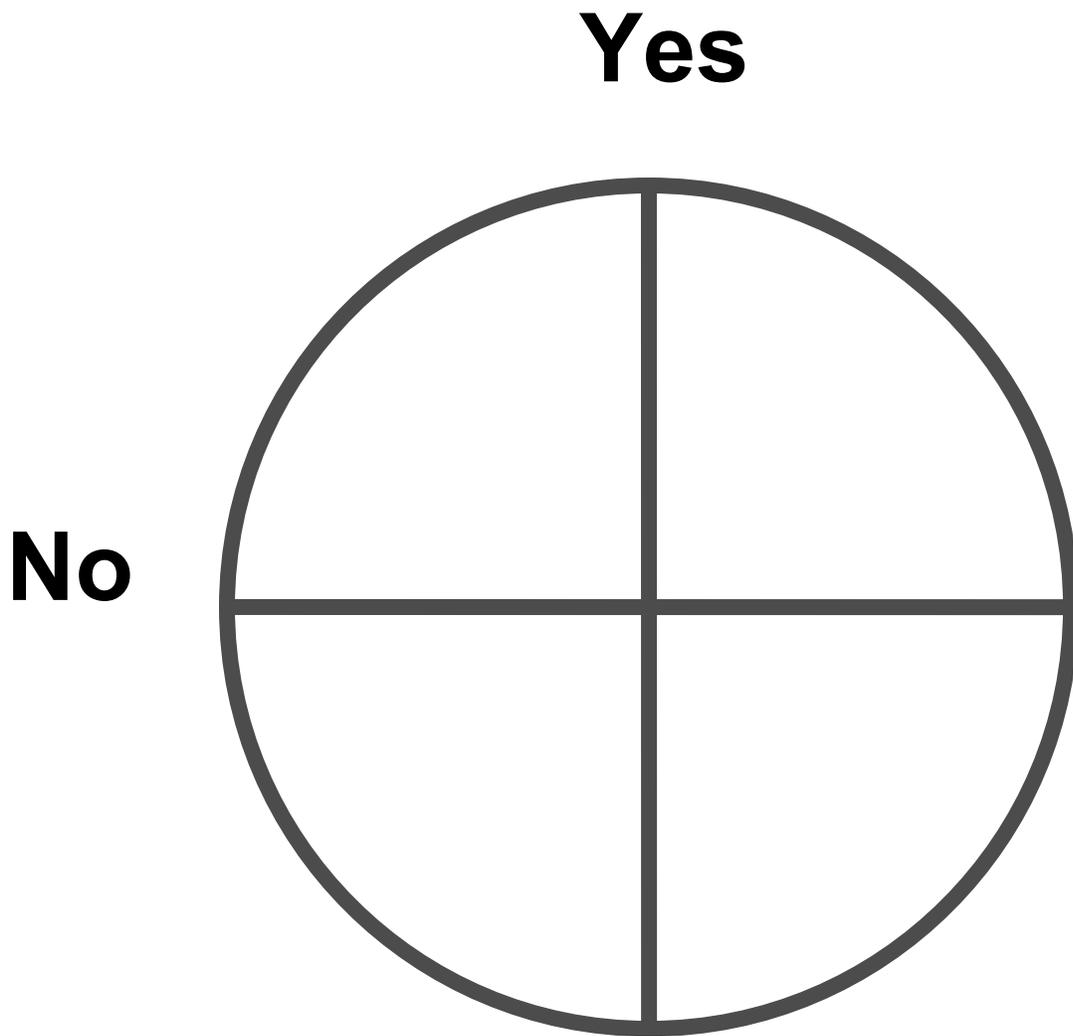
CHANGE WORK:



1. Do you know what to do to solve this problem?
2. Is it possible?
(Limiting Decision?)
3. Is it OK?
(Secondary Gain?)
4. Are there any other Problems the UM would like to work on? (If yes, “OK, all the problems ...” (go to #1)
5. “OK, go ahead and solve the problem. Give me a signal for ‘yes’ when you know you have permission.”
6. “How quickly will you start and finish? Ok to Start now?”
Finish: “Sometimes unconscious minds like to finish solving a problem like this in _____ days/minutes -
Let me know if this problem can release in as long as.....days”

If the answer is “no” to 1 or 2: “Can the Unconscious Mind get in touch with the blueprint of perfect health and healing that exists in the deepest part of the Unconscious Mind (in an area that some people call the Higher Self) and transfer it to the blueprint that the Unconscious Mind uses to create the body?”

PENDULUM CHART



MULTIPLE EMBEDDED METAPHORS

Client

Metaphors:

1

2

3

4

5

CONTENT:

Break

5

4

3

2

1

A DIRECT – AUTHORITARIAN APPROACH
Adapted from George Estabrooks, *Hypnotism*, 1943

1 CLOSE EYES

“Close your eyes. You are falling asleep—sound asleep. Relax all your muscles and imagine that you are going into a deep sleep. Deeper and deeper and deeper (etc.). You will not wake up until I tell you, then you will wake up quietly and you will always feel fine as a result of these suggestions. You are falling sound, sound asleep. Deeper and deeper and deeper and deeper and deeper.” (Continue—5 minutes)

2 a. EYELIDS LOCKED CLOSED

“Listen to me. Your eyelids are locked tightly together, and you will find it amusing how tight, tight, tight they are locked! Your eyelids are locked tightly together and you cannot open your eyes no matter how hard you try and try, the tighter they become. And you might try—go ahead, I dare you to find with some amusement you cannot.”

b. RELAXATION

“Now relax everything. Relax your eye muscles. They are returning to normal. You are sound, sound asleep and will not awaken until I tell you. Then you will awaken quietly and easily. Relax everything and sleep.”

3 a. STIFF ARM(S)

“I am now about to make another test. Your right arm, right where it is (describe the location) is becoming stiff and rigid. Stiff and rigid. Stiff and rigid. You cannot bend your right arm. It is as if it was an iron bar. It is impossible to bend your right arm. I dare you to find with some amusement that you cannot.”

b. RELAXATION

“Relax. Relax your right arm. Relax everything. Your right arm is returning to normal, it is resting quietly at your side and there is no strain at all. You are sound, sound asleep. Deeper and deeper. Deeper and deeper.”

4 a. WEAK LEGS

“Now, notice your body is floating away, floating away, floating away. And you may discover with some delight you cannot control your muscles in your legs, you are so relaxed. And where were you born, do you remember—Remember! You are stuck in the chair and your legs won’t work—too relaxed! It is impossible for you to stand up—too relaxed. And the harder you try, the more relaxed your legs. You are stuck in the chair. You may try—I dare you.”

b. SLEEP

“You are sound, sound asleep and going deeper and deeper. Deeper and deeper. Soon you will dream.”

5 a. AUTOMATIC MOVEMENT

“Now listen carefully. I am about to start your hands rotating, one about the other (establish catalepsy). Now here they go (start them rotating). Here they go, round and round, faster and faster. Keep them moving. They are rotating faster and faster, faster and faster. You just might find with some delight you cannot stop them. You cannot stop, no matter how hard you try, they just go around and around.”

b. SLEEP

“OK Stop. Let your hands fall to your side. And go sound asleep and go deeper and deeper, dream if you want.”

6 a. TALKING IN SLEEP

“Now I am going to ask you a few simple questions. You are sound asleep and will dream that you answer me in your sleep talking in your sleep as you have heard other people talk in their sleep. You will remain asleep deep asleep as you talk and you will find it easy to answer my questions.”

Ask questions such as: “What is your address?” “Do you have any brothers (sisters)?” (Avoid any emotional questions)

b. SLEEP

7 a. SLEEP WALKING

“In a moment you will stand up. I will help you. You will remain asleep as you stand up, as if you were in a dream. You have seen sleepwalkers. (Help subject) Now stand up. Walk in your sleep. You will find it easy to use your leg muscles, and you will remain deep asleep. Just stand up.”

b. SLEEP

“OK sit down and go deeply asleep.”

8 a. VISUAL HALLUCINATION

“Listen carefully—when I give you the word you will open your eyes and remain deeply asleep. You are still dreaming—still deeply asleep. Open your eyes and look at the tennis ball in my hand—What color is it?”

Throw it up—see if subject follows the ball. Give ball to subject.

b. CLEAR SUGGESTIONS

“Now close your eyes. And go deeply asleep. Any and all suggestions I have given you are hereby removed.”

c. BRING SUBJECT OUT

Any method that you prefer, will do.

“Based on the research in hypnosis over the years, we are certain that the subject absolutely will NOT actualize behaviors which the operator does not believe are possible...”

“So have your beliefs be unlimited about what your subject can do.”—*Tad James, 1989*

PROGRESSIVE TEST INDUCTION

Using Ericksonian Indirect Suggestion And Direct Authoritarian Induction

Adapted from Estabrooks (1943)
(Version: 23-Jul-96)

Outline:

1. Close Eyes — Talk Sleep
2. Eyelids Locked Closed
3. Stiff Arms
4. Weak Legs
5. Automatic Movement
6. Talking in Your Sleep
7. Sleep Walking
8. Visual Hallucinations
9. Insert Necessary Suggestions Here
10. Bring Them Out (Remove suggestions)

Introduction:

“This induction is a fun test for your ability to be able to reach the different levels of hypnosis and to actualize all the trance phenomena. It’s set up with a number of tests, and the more tests you pass, the deeper you can go. So enjoy it, and let your unconscious record everything so you don’t have to pay total conscious attention to me as you go into a trance, and you will be able to do it with your clients when you’re ready to go ahead.” [Drop in Amnesia Instructions Here, if so then go back & repeat the paragraph.]

1. Close Eyes — Talk Sleep

“Now, if you would like to just go ahead, and see if you can close your eyes. And I wonder if you can imagine, everybody can, imagining is something you can do, remember how much you imagined when you were little, or you can just remember a time when you were falling asleep (yawn), just falling sound asleep. Now, perhaps you can remember a time when you were soooo tired, and relax(ed)... all your muscles totally... relax(ed)... and just remember a time when you were falling asleep, going into a deep sleep. Deeper & deeper and deeper (etc.). Now, this is important, you can stay asleep as long as you want to stay asleep until I tell you & remember you will always hear the sound of my voice, however far or deep you go and you will always feel just fine and be just fine as a result of these suggestions. So, it’s OK, just go ahead and fall sound, sound asleep. Deeper & deeper & deeper & deeper asleep. (Continue for 5 minutes) [You may or may not remember to forget everything that happens — it’s OK.]

2. Eyelids Locked Closed

“Now, listen. Your eyelids, as deep as you are, you still know your eyes are closed, and you may not have noticed that your eyelids feel so heavy that they are, and they really ARE locked so tightly together that you may find it quite amusing to discover that your eyes are locked tight, tight, tight together. Your eyelids are locked tightly together and you cannot open your eyes no matter how hard you try, and REALLY try, the tighter they become. And you might care to try, so go ahead, I dare you to try and find with some amusement that you cannot.”

Relaxation: “Now relax everything. Relax your _____. They are returning to normal, and you are sound asleep. Sound, sound asleep, and will sleep until I tell you. Then you will awaken quietly and easily, until then, just relax everything and sleep, sleep, sleep.”

3. Stiff Arms

OK, it's time for our next test. So, just notice your right arm, right where it is (describe) is becoming stiff & rigid, rigid & stiff. Stiff & rigid. And everyone knows how a piece of iron feels, so rigid & stiff, just like you... cannot bend your right arm. It's as if it was an iron bar, solid, rigid, and stiff. It is impossible to bend your right arm's so stiff. I dare you to find with some amusement you cannot.”

Relaxation: “Now relax everything. Relax your _____. They are returning to normal, and you are sound asleep. Sound, sound asleep, and will sleep until I tell you. Then you will awaken quietly and easily, until then, just relax everything and sleep, sleep, sleep.”

4. Weak Legs

“Now, even though you never thought of this before, now, notice it's as if your body is floating away, floating away, floating away. And you may discover with some delight that you cannot control your muscles in your legs, you are so relax(ed), now. And where were you born? Do you remember? Remember! Being a little newborn baby... And now, like then, are stuck where you are, and your legs won't work, too relax(ed). It is impossible for you to even try to stand up, too relaxed. And the harder you may try, the more relax(ed) your legs. You are just stuck there in the chair. You may try, and really try, I dare you.”

Relaxation: “Now relax everything. Relax your _____. They are returning to normal, and you are sound asleep. Sound, sound asleep, and will sleep until I tell you. Then you will awaken quietly and easily, until then, just relax everything and sleep, sleep, sleep.”

5. Automatic Movement

“Now listen carefully, more fun. It’s time for us to discover just what your hands can do (establish arm catalepsy). Now, let’s start your hands rotating. Here they go (start them rotating). Here they go, round and around. Faster & faster. Can your unconscious... keep them moving. They ARE rotating faster & faster, faster & faster. And you just might find with some delight you cannot stop them. You cannot stop, no matter how hard you try, the harder you try the faster they go around and around.”

Relaxation: “Now relax everything. Relax your _____. They are returning to normal, and you are sound asleep. Sound, sound asleep, and will sleep until I tell you. Then you will awaken quietly and easily, until then, just relax everything and sleep, sleep, sleep.”

6. Talking in Your Sleep

“Now, I want you to dream, and REALLY dream of talking in your sleep. Everyone knows of someone who talk(ed) in your sleep. So sleep and have that dream. Now, I am going to ask you a few simple questions, and you can just remain asleep in your dream, and dream you answer me in your sleep talking in your sleep as you have seen people talk in your sleep. Soon I’m going to ask a question you will find it easy to answer, OK here it is:

- **Ask:** What is your name? What is your address?
- Do you have any brothers or sisters? (Avoid emotional questions)

Relaxation: “Now relax everything. Relax your _____. They are returning to normal, and you are sound asleep. Sound, sound asleep, and will sleep until I tell you. Then you will awaken quietly and easily, until then, just relax everything and sleep, sleep, sleep, and continue to dream.”

7. Sleep Walking

“In a moment you will stand up. I will help you. You will remain asleep as you stand up, as if you were in a dream. You have seen sleepwalkers. Finding it easy (help subject) to stand up, go ahead, stand up. Walk. You are, finding it easy to use your leg muscles as you remain deeply asleep. Standing up.”

Relaxation: “Now relax everything. Relax your _____. They are returning to normal, and you are sound asleep. Sound, sound asleep, and

will sleep until I tell you. Then you will awaken quietly and easily, until then, just relax everything and sleep, sleep, sleep.”

8. Visual Hallucinations

“Now, listen carefully. In a moment you’re going to awaken from the neck up only. Your mind can remain asleep, and your body can remain asleep, but just your head with no recognition of your body can awaken from the neck up. When you’re ready, just open your eyes. Open them now, and remain deeply asleep. You are still dreaming, & I want you to dream of this tennis ball. Open your eyes and look at the tennis ball in my hand. What color is it?” [Throw it up — see if subject follows the ball. Give ball to subject.]

Relaxation: “Now relax everything. Relax your _____. They are returning to normal, and you are sound asleep. Sound, sound asleep, and will sleep until I tell you. Then you will awaken quietly and easily, until then, just relax everything and sleep, sleep, sleep.”

9. Full Body Catalepsy: (if desired) Have the client stand up and test the muscles for firmness before putting client back on chair. Make sure that shoulders are well supported on the seat of the chair.

10. Insert Additional Suggestions Here: (Insert the necessary positive instructions and suggestions here. At this point the suggestions should be direct!)

11. Bring Them Out: (Remove any test or short-term suggestions here — “Any and all suggestions about this trance and all related phenomena are hereby removed. All on-going suggestions are still in force.”)

STAGES OF HYPNOSIS - REVISITED

(from LeCron, 1964)

1.
 - Lethargy
 - Relaxation
 - Eye Catalepsy

ARM CATALEPSY

2.
 - Catalepsy Of Isolated Muscle Groups
 - Heavy Or Floating Feelings

COMPLETE MUSCLE GROUPS

3.
 - Rapport
 - Smell And Taste Changes
 - Number Block

PARTIAL AMNESIA/ GLOVE ANESTHESIA

4.
 - Amnesia
 - Analgesia (No Pain)
 - Automatic Movement

PARTIAL HALLUCINATIONS

5.
 - Hallucinations (Positive)
Visual And Auditory
 - Bizarre Post-Hypnotic Suggestions

ANESTHESIA (NO FEELINGS)

6.
 - Negative Hallucinations
 - Comatose
 - Somnambulism

Light
20%

Medium
60%

Deep
20%

Elman acknowledged 4 levels of trance:

1. The Light or Superficial
2. Somnambulistic
3. Coma (the Esdaile state)
4. Hypnosis attached to Sleep

ELMAN'S STAGES OF HYPNOSIS AND HOW TO GET THERE

Shake hands with your client. "The advanced student...can immediately tell from the handclasp whether or not the [client] is receptive to suggestion. A cold hand says the person is cold to the subject; a hot, wet hand says that the patient is liable to resist. A warm hand tells you that you should be successful immediately."

— Page 30

1. Eyelid Closure (Light)

"Now take a long deep breath and hold it for a few seconds".

- **Eye Closure**

"As you exhale this breath, allow your eyes to close, and let go of the surface tension in your body. Just let your body relax as much as possible right now."

- **Eye Catalepsy**

"Now, place your awareness on your eye muscles and relax the muscles around your eyes to the point they just won't work. When you're sure they're so relaxed that as long as you hold on to this relaxation, they just won't work, hold on to that relaxation and test them to make sure THEY WON'T WORK."

2. Physical Relaxation (Light)

- **Relaxation Spreading Through-out the Body**

"Now, this relaxation you have in your eyes is the same quality of relaxation that I want you to have throughout your whole body. So, just let this quality of relaxation flow through your whole body from the top of your head, to the tips of your toes."

- **Total Physical Relaxation**

"Now, we can deepen this relaxation much more. In a moment, I'm going to have you open and close your eyes, double the relaxation you now have. Make it become twice as deep. Ok, now, once more, open your eyes...close your eyes and double your relaxation... good. Let every muscle in your body become so relaxed that as long as you hold on to this quality of relaxation, every muscle of your body will not work."

3. Somnambulistic

- **Mental Relaxation**

“In a moment, I'll ask you to begin slowly to counting backward, out loud, from 100. Now, here's the secret to mental relaxation, with each number you say, double your mental relaxation. With each number you say, let your mind become twice as relaxed.”

- **Number Block**

“Now, by the time you reach the number 98, or maybe even sooner, your mind will have become so relaxed, you will have actually relaxed all the rest of the numbers that would have come after 98, right out of your mind, there just won't be any more numbers. Now, you have to do this, I can't do it for you. Those numbers will leave if you will them away. Now start with the idea that you will make that happen and you can easily dispel them from your mind. Want it to happen, will it to happen, make it happen.”

- **Amnesia**

“Double your mental relaxation. Start to make those numbers leave. They'll go if you will them away.”

“Now, they'll be gone. Dispel them. Banish them. Make it happen, you can do it, I can't do it for you. Put them out. Make it happen! ARE THEY ALL GONE?”

3. Coma (the Esdaile state)

- **Totally Out**

“The closest I can come to describing mental relaxation is to have you think of yourself an instant before you fall asleep. Momentarily, before sleep actually comes, the mind becomes a complete blank, and then you drift off to sleep. In my opinion, when the mind is almost completely inactive, mental relaxation is achieved.”

4. Hypnosis attached to Sleep

- **Sleep Converted to Hypnosis**

THE ELMAN PRE-TALK

Much of the work of hypnosis is done before the induction begins. This is an important time to create success. We need to eliminate the client's fears, and misconceptions. As you do the pre-talk, make sure to emphasize the fact that the client is not only in control, but also is responsible for the development of trance. This is also a good time to establish rapport between you and the client.

ELMAN'S REQUISITES FOR HYPNOSIS

1. **The Consent of the Subject** — the subject must agree to be hypnotized.
2. **Communication Between the Hypnotherapist and the Client** — there must be communication between the Hypnotherapist and the Client.
3. **Freedom from Fear** — the Client must be free from any fear about the hypnotic process or about what is going to take place.
4. **Freedom from Reluctance** on the Client's part to trust the Hypnotherapist — the Client must trust the Hypnotherapist and his/her intentions.

SCRIPT FOR THE PRE-TALK

1. Make a fist/relax.

"You know that if you wanted to, you could tighten your muscles and make a fist that was so strong that you couldn't make it any stronger or more powerful. Isn't that true? So, if you wanted to, and if you knew how, you could also make any group of muscles you wanted to, so absolutely, totally relaxed that unless you removed that relaxation, you could relax that muscle to the point it wouldn't work. That is also true, isn't it?"

2. Eyes are the Easiest to Relax.

"The easiest group of muscles in your entire body to relax are your eyelids. Now, you know that's true, don't you. Remember a time when you were tired, had a rough day, and you closed your eyes, and it just feels so good."

3. Now Watch What I Do.

"Now watch what I do. I'm going to close my eyes, and I am going to relax them so completely and so deeply that if I do not take that relaxation away, that they won't work. Nothing that I can do or say or think will make them open. Now I can take away the relaxation and they will work instantly, but if the relaxation is there, they won't work. Now, I am going to try to open my eyes. (Open eyes.) Now I tested myself to see that they did work, and I did the wrong thing, because I want to test them to be sure they **do not work.**"

4. This Time I Am Going to Keep them Shut.

“This time I am going to relax them to the point they won’t work. And I am going to hold on to the relaxation and then test them to make sure they do not work. I don’t have to prove they will work, I can do that every day. I know that I can instantly remove the relaxation by the slightest thought, the slightest desire, so I am not going to do that this time. This time I am going to allow them to stay totally relaxed, and I know that as long as I stay totally relaxed, and as long as I do not take that relaxation away that nothing that I can do or say or think will cause them to open. Watch. See they stay there like an old shoe. And I know it looks stupid with the eyebrows going up and down, but it feels great!!”

5. You Can Do It Too!

“Now, I can feel proud of myself, because I did it. I can take the relaxation away and I can open my eyes. You know 5 year old kids can do this, you can do this, too. Just see if you can do what I do. Close your eyes, and put your awareness on your eyelids. You’re in charge, you’re in control, and your muscles have to do what you tell them to do.”

6. They Respond to What You Tell Them.

“Not what I tell them to do, they respond to you, not to me. Your eyelids respond to you because the suggestions are coming directly from you, and through your neurology. You direct your body to follow those suggestions totally and completely and you will be successful....”

7. Have them do it.

“So, go ahead, tell your body to relax your eyelid muscles totally and completely so deeply and completely and deeply that unless you remove the relaxation, they just won’t work. And when you know that you have accomplished this, then hold on to the relaxation and give them a good test, and notice that they stay shut, make sure they won’t work, and notice how good that feels. Test them hard, really try....”

IF they open eyes

“Congratulations, now prove you can relax them so they won’t work.”

7. Conclusion

“That was the hardest step. You did just great.”

DAVE ELMAN INDUCTION #1

For an Elman induction it is important that the client follows your instructions exactly. If the client anticipates your suggestions, go back and make sure that they follow your instructions. At any point, if the client does not follow instructions, do not proceed, but stay at that level until they succeed at following the instructions.

1. Deep Breath/Close the Eyes.

“Now take a long deep breath and hold it for a few seconds¹. As you exhale this breath, allow your eyes to close (start with the hand above the eyes and bring it down to below the chin), and let go of the surface tension in your body. Just let your body relax as much as possible right now.”

2. Relax the Eyes.

“Now, place your awareness on your eye muscles and relax the muscles around your eyes to the point they just won't work. When you're sure they're so relaxed that, as long as you hold on to this relaxation they just won't work, hold on to that relaxation and test them to make sure **THEY WON'T WORK.**”

3. Let It Flow Through the Whole Body.

“Now, this relaxation you have in your eyes is the same quality of relaxation that I want you to have throughout your whole body. So, just let this quality of relaxation flow through your whole body from the top of your head, to the tips of your toes.”

4. Open & Close the Eyes. (Assist using 2-fingers)

“Now, we can deepen this relaxation much more. In a moment, I'm going to have you open and close your eyes. When you close your eyes that's your signal to let this feeling of relaxation become 10 times deeper. All you have to do is want it to happen and you can make it happen very easily. Ok, now, open your eyes...now close your eyes and feel that relaxation flowing through your entire body, taking you much deeper. Use your wonderful imagination and imagine your whole body is covered and wrapped in a warm blanket of relaxation.

“Now, we can deepen this relaxation much more. In a moment, I'm going to have you open and close your eyes, double the relaxation you now have. Make it become twice as deep. Ok, now, once more, open your eyes...close your eyes and double your relaxation... good. Let every muscle in your body become so relaxed that as long as you hold on to this quality of relaxation, every muscle of your body is totally relaxed.

“In a moment, I'm going to have you open and close your eyes one more time. Again, when you close your eyes, double the relaxation you now have. Make it become twice as deep. Ok, now, once more, open your eyes...close your eyes and double your relaxation...good. Let every muscle in your body become so relaxed that as long as you hold on to this quality of relaxation, every muscle of your body is totally relaxed.”

5. Test for Relaxation.

¹ (NOTE: If they close their eyes when you say “take a deep breath,” then stop the induction. The client has to do what you say when you say. If they do something and you didn't you tell them what to do, then stop and start again.)

“In a moment, I'm going to lift your (right or left) hand by the wrist, just a few inches, and drop it. If you have followed my instructions up to this point, that hand will be so relaxed it will be just as loose and limp as a wet dish cloth, and will simply plop down. Now don't try to help me, you have to remove realization. Let me do all the lifting so that when I release it, it just plops down and you'll allow yourself to go much deeper.” (If subject helps to lift hand say, “No, no let me do all the lifting, don't help me. Let it be heavy. Don't help me. You'll feel it when you have it.)

“Now, that's complete physical relaxation. I want you to know that there are two ways a person can relax. You can relax physically and you can relax mentally. You already proved that you can relax physically, now let me show you how to relax mentally.”

6. Mental Relaxation.

“In a moment, I'll ask you to begin slowly counting backward, out loud, from 100. Now, here's the secret to mental relaxation, with each number you say, double your mental relaxation. With each number you say, let your mind become twice as relaxed. Now if you do this, by the time you reach the number 98, or maybe even sooner, your mind will have become so relaxed, you will have actually relaxed all the rest of the numbers that would have come after 98, right out of your mind, there just won't be any more numbers. Now, you have to do this, I can't do it for you. Those numbers will leave if you will them away. Now start with the idea that you will make that happen and you can easily dispel them from your mind. Want it to happen, will it to happen, make it happen.”

“Now, say the first number, 100 and double your mental relaxation.”

Client: “100” *Practitioner:* “Deeper relaxed.” (wait for client to say number)

“Now, double that mental relaxation, let those numbers already start to fade--99.”

Client: : “99” *Practitioner:* “Deeper relaxed.” (wait for client to say number)

“Double your mental relaxation. Start to make those numbers leave. They'll go if you will them away.”

Client: : “98” *Practitioner:* “Deeper relaxed.”

“Now, they'll be gone. Dispel them. Banish them. Make it happen, you can do it, I can't do it for you. Put them out. Make it happen! ARE THEY ALL GONE?”

DAVE ELMAN INDUCTION #2

For an Elman induction it is important that the client follows your instructions exactly. If the Client anticipates your suggestions then go back and make sure that they follow your instructions. At any point if the client does not follow instructions do not proceed, but stay at that level until they succeed at following the instructions.

1. Deep Breath/Close the Eyes

“Take a long deep breath and close your eyes (start with the hand above the eyes and bring it down to below the chin).

2. “Relax the Eyes.”

“Now, relax those muscles around the eyes to the point they won't work... and pretend you can't open them even though you know full well that you can. As long as you hold on to this relaxation, then you can pretend they just won't work. When you're sure they're so relaxed that they just won't work, continue to pretend that they won't work and test them to make sure THEY WON'T WORK. Test them hard....That's right...”

3. “Let It Flow Through the Whole Body.”

“Now let the feeling of relaxation go right down to your toes.”

4. “Open & Close the Eyes.” (Assist using 2-fingers)

“Now open your eyes — really relax — close your eyes again...that's it...The next time you do this, you'll be able to relax even more than you have relaxed...”

“Open your eyes....now close your eyes.... double the relaxation.

“Open your eyes....now close your eyes.... double the relaxation.

5. “Test for Relaxation.”

“Now I'm going to lift your hand and drop it. I want it to be as limp as a dishrag...If you have followed instructions that relaxation will have gone down to your toes. And when I lift your hand, it will just plop down — let it plop down....That's right!

“Now, physically you have all the relaxation you need.

6. “Mental Relaxation.”

“We want your mind to be as relaxed as your body is, so I want you to start counting from 100 backwards, when I tell you to. Each time you say a number, double your mental relaxation. With each number you say, let your mind become twice as relaxed. By the time you get down to 98, you'll be so relaxed the numbers won't be there. Start from 100 and watch them disappear before you get to 98...Double your relaxation and watch them start fading....Now watch them disappear...Now, they'll be gone....Isn't that a nice feeling? Are they all gone? Let them disappear....Are they all gone? That's right...”

CONVINCERS

(FROM ESTABROOKS)

Many Hypnotherapists are against using Convincers. From our point of view Convincers assist the client in the belief that he/she can do the deeper states of hypnosis. In this case each test assists the client in becoming more convinced that he can go deeper and so he goes deeper. As he goes deeper, he becomes more convinced and goes deeper....etc.

1. Stiff Arm

OK, it's time for our next test. So, just notice your right arm, right where it is (describe) is becoming stiff & rigid, rigid & stiff. Stiff & rigid. And everyone knows how a piece of iron feels, so rigid & stiff, just like you... cannot bend your right arm. It's as if it was an iron bar, solid, rigid, and stiff. It is impossible to bend your right. Try and you can find with some amusement you cannot."

2. Weak Legs

"Now, even though you never thought of this before, now, notice it's as if your body is floating away, floating away, floating away. And you may discover with some delight that you cannot control your muscles in your legs, you are so relaxed, now. And now, you are stuck where you are, and your legs won't work, too relaxed. It is impossible for you to even try to stand up, too relaxed. And the harder you may try, the more relaxed your legs. You are just stuck there in the chair. You may try, and really try, and find that you cannot."

3. Floating Arm (Optional)

"In a moment, I will touch your arm." (Reach over and gently lift their hand about one inch off the leg.) "Now notice your (right) arm getting lighter and lighter until it starts to float upward ... and the higher it goes, the more relaxed you become and the deeper into trance you go." (When the arm starts to float up release the wrist and let it move upward on its own. Allow it to float upward, and reinforce it with...) "Your arm is floating higher and higher as you go deeper and deeper." (To complete, say...) "In a moment, I will touch the back of your hand and it will immediately drop into lap and you will go a thousand times deeper relaxed."

4. Automatic Movement:

"Now listen carefully, another depth test. It's time for us to discover just what your hands can do. Now, let's start your hands rotating. Here they go (pick them up and start them rotating). Here they go, round and around. Faster & faster. Can your unconscious... keep them moving. They ARE rotating faster & faster, faster & faster. And you just might find with some delight you cannot stop them. You cannot stop, no matter how hard you try, the harder you try the faster they go around and around."

5. Talking in Your Sleep (Optional)

“Now, I want you to dream, and REALLY dream of talking in your sleep. Everyone knows of someone who talked in your sleep. So sleep and have that dream. Now, I am going to ask you a few simple questions, and you can just remain asleep in your dream, and dream you answer me in your sleep talking in your sleep as you have seen people talk in your sleep. Soon I’m going to ask a question you will find it easy to answer, OK here it is:

- **Ask:** “What is your name? What is your address?”
- “Do you have any brothers or sisters?” (Avoid emotional questions)

6. Sleep Walking

“In a moment you will stand up. I will help you. You will remain asleep as you stand up, as if you were in a dream. You have seen sleepwalkers. Finding it easy (help subject) to stand up, go ahead, stand up. Walk. You are, finding it easy to use your leg muscles as you remain deeply asleep. Standing up.”
(Then, relaxation.)

7. Visual Hallucinations

“Now, listen carefully. In a moment you’re going to awaken from the neck up only. Your mind can remain asleep, and your body can remain asleep, but just your head with no recognition of your body can awaken from the neck up. When you’re ready, just open your eyes. Open them now, and remain deeply asleep. You are still dreaming, & I want you to dream of this tennis ball. Open your eyes and look at the tennis ball in my hand. What color is it?” [Throw it up — see if subject follows the ball. Give ball to subject.]

8. Full Body Catalepsy:

“In a moment you will stand up again. I will help you. You will remain asleep as you stand up, as if you were in a dream and your body will become totally stiff. OK. Go ahead and stand up. Finding it easy (help subject) to stand up, go ahead, stand up. Become totally stiff. Stiff...stiff...stiff...” (Then, relaxation.)

9. Remove all suggestions: “Any and all suggestions used for testing purposes are hereby removed. All other suggestions for your well-being and learning are still in full force.”

CONTRAINDICATIONS FOR HYPNOSIS

WHEN NOT TO HYPNOTIZE, OR BE CAREFUL

1. When Client Is Dangerous To Self Or Others:

If the presenting problem or the personal history that you gather from the client indicates to you that the client is dangerous to self or others, then the client is beyond the scope of treatment by an unlicensed Hypnotherapist. Someone of this kind is best referred to a practitioner who is trained to handle clinical issues.

2. When Client Is Dealing With Highly Repressed Or Traumatic Material

Under certain circumstances, highly traumatic or highly repressed material could indicate that Hypnosis alone would not be appropriate to use. If you are not trained in interventions that deal in this area, it would be best to refer the client to a practitioner who is trained to handle these issues. (Time Line Therapy® may be indicated.)

3. When Client Is Dealing With A Life-Threatening Disease:

A client who seeks treatment by Hypnosis for a physiological and/or a life-threatening disease should be advised that such treatment is “controversial” and should be encouraged to get a diagnosis or referral from a Medical Doctor before proceeding. NOTE: It is not illegal to use hypnosis for, say, helping to alleviate an ulcer or its symptoms. It is, however, illegal to claim to use Hypnosis to cure any physical condition.

4. When A Client Is Dealing With Certain Psychiatric or Neurological Disorders:

If a client is dealing with certain disorders which are Psychiatric in nature, such as Multiple Personality, Schizophrenia, Bipolar Disorder, Hysteria, and others, as well as Epileptic Seizures, it would be appropriate to seek a referral from an MD or Psychiatrist before proceeding.

5. Members of The Opposite Sex:

Members of the opposite sex should only be Hypnotized when there is a reliable witness present.

POST-HYPNOTIC SUGGESTIONS

CREATING SUGGESTIONS THAT OPERATE AT A LATER TIME

A Post-Hypnotic Suggestion is a suggestion that activates and operates at a time after the induction of trance. The time of the activation of the suggestion can be minutes later or months later.

1. Requires Medium to Deep Trance:

A Post-Hypnotic Suggestion generally requires a trance which is at a medium to deep level. One key element is a state of amnesia for the suggestion.

2. Make the Suggestion Direct and to the Point:

While suggestions should, at first, be given in an indirect way, Post-Hypnotic Suggestions should be direct and to the point. This is true for any suggestions given while the client is in deep trance.

3. Tell the Client what the trigger for the Post-Hypnotic Suggestion will be:

Tell the Client what will set off the activation of the Post-Hypnotic Suggestion. E.G.: "When I rub my hand across my upper lip..."

4. Tell the Client what to do:

Be specific about what you tell the client want to do. E.G.: "...you will feel an undeniable urge to stand up, and you will stand up, and walk to the front of the room..."

5. Tell the Client when to do it:

This tells the Client when to do the Post-Hypnotic Suggestion. E.G.: "...and you will do it immediately."

6. Embed the Suggestions:

Make sure that you lead up to the suggestions and lead out of the suggestions in the same way that you would treat embedded metaphors.



NOTE: Any Post-Hypnotic Suggestions created for experimental purposes must be removed at the end of the session. E.G.: "...Come fully awake. Good. Any and all Hypnotic Suggestions relating to producing Hypnotic Phenomena are hereby removed."

MASTER TIME LINE - REGRESSION TRAINING

“What is the earliest memory your unconscious wants to work with - is it before, during or after your birth?”

1. “I’d like to ask your unconscious mind to float up in the air, above your timeline, into the past and float above your timeline.
2. “Ask your Unconscious Mind what it needs to learn from the event, the learning of which will allow you to let go of the emotions easily and effortlessly. Your Unconscious Mind can preserve the learnings so that if you need them in the future, they’ll be there.”
3. “Now where is the emotion? Where did it go? That’s right, it disappeared.”
4. “Just float right down into the event and notice that the emotion has disappeared. Is the emotion totally gone!
5. Good. Now tell me what’s going on in this memory. (As client describes what is going on in the memory, be sure you use non-directed questioning—see next page.)
6. (When done:) Good, come back up above your timeline and make sure everything is in its place and complete.
7. “Now, come back to now, above your Time Line—just come all the way back to now. (When Client is done) Float down into now - and come back into the room.”

NON-DIRECTED QUESTIONING TO RECOVER MEMORIES

Avoiding Contamination of the Memory

1. Ask questions that DO NOT lead the client to a specific conclusion.
2. Ask questions that DO NOT presuppose a certain answer.
3. DO NOT ask questions that guide the client.
4. DO ask questions that are open ended.
5. DO ask questions that narrow the focus.
6. DO ask questions that lead from “down” to “up”.
7. DO ask questions that are ambiguous and DO NOT lead.

Do NOT Say:	DO Say:
Take in the whole scene.	Look straight ahead through your own eyes, what do you see?
Are there papers on the floor?	Look down, what do you see?
Who is there?	Tell me what's there?
Do you see a man there?	Describe what the area looks like.
<u>NOTE:</u>	Client will tell us if there is a person, place or thing there.
Does he have shoes on?	Describe the (person's, place's or thing's) feet. (Get as much detail as you can.)
Is he wearing expensive clothes?	As you look up from the legs, what is the clothing?
Is he/she tall?	As you look up from the legs, what is this person's height? (No eye contact at this point.)
Is he/she hitting you?	What is he/she doing? —or— What's going on?
Does he have a knife?	Is there anything in the hands?
Is she a bad person? —or— Does he look mean?	Don't judge, just tell me what you see.
Is she wearing a hat?	Is there anything on the head?

Inductions

Basic Induction

Assume deep relaxation by rapport

Use Now State to keep uptime & rapport

Suggest enjoying the experience

Use an hypnosis trance induction

Deliver suggestions, intuitively

End session by saying “Open your eyes (or “come back to now” - if eyes already open) only as quickly as your deeper mind is prepared to deepen this relaxed feeling the next time you enter it”

Deepening Induction

Establish rapport and begin pacing current experience with commands (“here to relax”)

Use any relaxation induction (Elman with two fingers or Terry's clouds, trees etc.)

Bring them back out a bit (talk louder, get them to open eyes)

Use deepening techniques (touch forehead etc.)

Add Suggestion, then - “Open your eyes only as quickly as your deeper mind has completed these arrangements...NOW!”

Adding Metaphor

Assume Rapport and let them know the purpose of the session

Use any trance induction (Elman or Terry’s clouds, trees etc.)

Bring them back out a bit (talk louder, get them to open eyes a bit)

Use deepening techniques (touch forehead etc.)

Metaphor (instructions for success)

“Open your eyes only as quickly as your unconscious mind has completed the arrangements for success...NOW!”

Conversational Hypnosis

1. Be with your client meaningfully – with huge rapport
2. Use the meta model questions around hobbies, holidays, pleasant experiences
 - A) When, where, with whom
 - B) Use conjunctions to smooth transitions, I.E. and, as you, while
 - C) Change tense from past to present
 - D) Direct focus from past to present
3. Remember/write the key phrases to anchor.
4. You can ask the question, “how do you know when you are in a trance?”
5. Post-Hypnotic suggestions such as “Open your eyes only as quickly as your unconscious mind is prepared to deepen this feeling the next time you access it”

Pacing current experience and revivication exercise

- Establish rapport and begin pacing current experience
 - a) Use presuppositions of awareness (vakog)
 - b) Lead them from external to internal trance
- 2. Begin conversational hypnosis
- 3. Go slowly, use audio and any other anchors to deepen trance
- 4. Suggest “think of a new ability, a new behaviour, a new feeling you’d like to develop. (Calibrate) “Have your unconscious decide outside of your conscious awareness where in the next few days, it will pleasantly surprise you”.
- 5. “Open your eyes only as quickly as your unconscious mind has completed those arrangements...NOW!”

META-HEALTH®

INTRODUCTORY



HANDBOOK

VERSION 1.0

WITH:
TERRY ELSTON

Information regarding seminars, diploma training,
trainer's training, membership, research projects
and the Meta-Medicine Directory can be found at:

Our website is located at www.meta-medicine.co.uk in association with NLP World Ltd

The content of this manual is for information purposes only. Any information presented does not substitute professional medical or therapeutic diagnosis or treatment. We hereby ask you to always take responsibility for your health and if necessary consult with your doctor, health practitioner or therapist in case of any diagnostics or treatment concerning physical or mental health. Ask if their work follows and is based on the biological natural laws.

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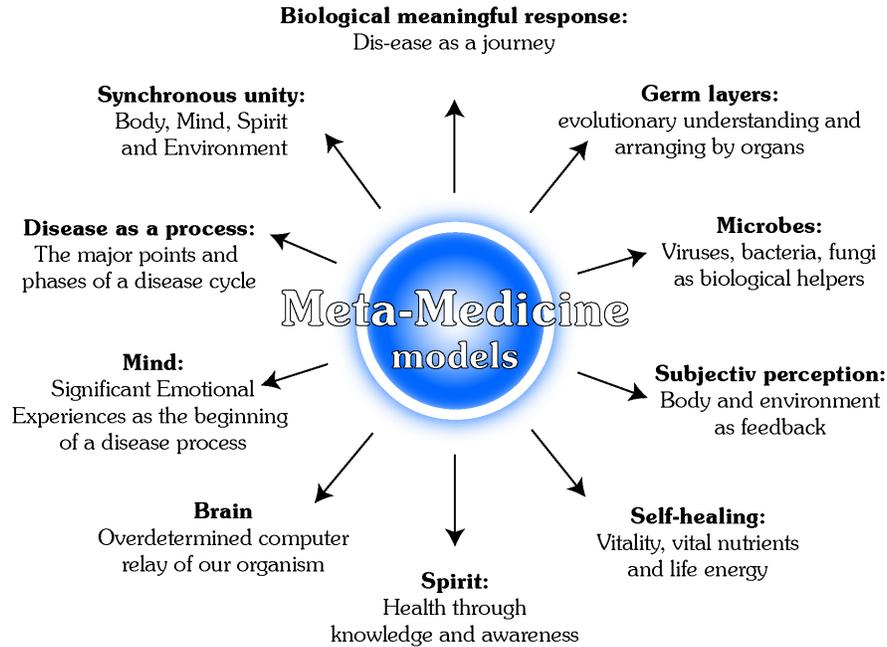
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The Intl. Meta-Medicine Association wants to thank all researchers and participants for making Meta-Medicine a reality.

BIOLOGICAL INTELLIGENCE OF OUR ORGANISM - THE META-MEDICINE MODELS

Through the process of modelling, we have found 10 important principles, which form the basis of Meta-Medicine and the Meta-Medicine diagnosis and therapy model. Apply the following understanding in your work with clients.



1. Meaningful process: Disease as a journey

Nature does not make errors or mistakes. Our organism is a highly intelligent, orderly and sophisticated system with biological meaningful reactions which we have labelled diseases or illness. Rather every disease process can be understood as a biological, spiritual meaningful event of nature with the goal of survival, resolution and awareness of a conflict, evolution and the self healing of our organism.

2. Synchronicity of body, mind, spirit, environment

There is no separation between body, mind, spirit embedded in the environment. The process and development of a disease process is synchronous at all levels (organ, brain, biofield, mind, etc.). Because all levels are synchronous and in phase with each other, we can use the data of one level to conclude the other levels. Every change at one level simultaneously affects and is visible on all other levels.

3. Beginning of an illness

A disease process originates from a Significant Emotional Event, which we experience as unexpected, dramatic and isolative, simultaneously at all levels of our organism. The way we unconsciously react and associate a conflict experience determines which disease process (which organ and brain relay) is affected. The emotional intensity, conflict length and the tracks (Anchor) determine conflict mass and therefore the process of the disease process.

4. Disease as a process

Every illness goes through two phases, the 1st conflict active phase and the ensuing 2nd phase. A complete progression from the beginning of a disease through the healing is described as a disease process. The typical symptoms of an illness, such as muscle pain, headache, running nose, ulcer, cancer or leukaemia are not the illnesses per se but a partial aspect of a comprehensive disease program. The major points and phases of a disease process can be found using the synchronous unity of body, mind, spirit, environment and specific questioning techniques.

5. Subjective perception: Our body as feedback

Our perception is a projection. Every person perceives the environment through the senses as a subjective reality. Our environment and our body are mirrors of our inner reality. Self responsibility and active changing our inner and outer reality are important aspects of any healing process.

6. Self healing: Vitality, life energy

Our self healing qualities can be influenced by eliminating factors aiding disease and supporting factors aiding healing. A strong immune system, high life force and vitality are essential aspects of this healing process. Especially during the conflict phase and the regeneration phase additional energy and nutrients are needed. The biological, meaningful disease process can be supported by therapeutic measures at all levels of our organism.

7. Brain: The over determined relay system

The brain works as an over determined relay system of all functions of our organism. Each organ with conflict content can be assigned based on the germ layers connection to a specific brain relay. The cerebral changes in a brain relay, during a disease process, can be measured by using a brain CT or MRI.

8. Germ Layer: Organized by organs

Our organism and diseases are not organized by symptoms, rather by organs and germ layer. Based on embryology and ontogenesis we can assign all organs to one of the three germ layers (from which our complete body has developed as an embryo). Each organ reacts based on it's germ layer connection and the twophases with these organ reactions: cell and tissue plus or minus, over activity or under activity, loss of function or increase function.

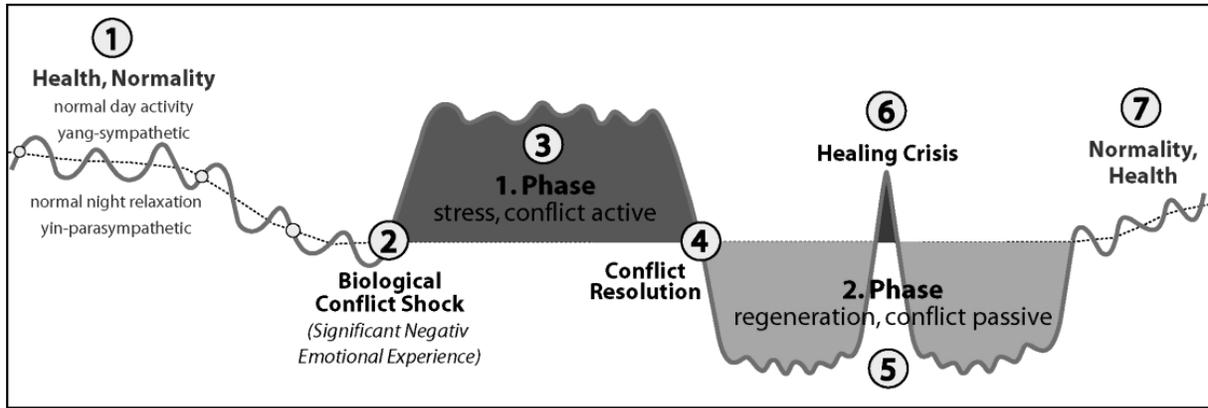
9. Microbes: Biological helpers

Microbes are not the primary originator of a disease; rather they are biological, meaningful helpers and part of a complex disease process. Viruses, bacteria, myco bacteria and fungi are organized by germ layer and brain relay and are active in the regeneration phase.

10. Spirit: Health through knowledge and awareness

Each disease is a meaningful and intelligent process. Becoming aware of the conflict and the emotions and transforming them through forgiveness, letting go, love and consciousness are essential aspects of every healing, our personal growth and evolution. Life is evolution!

TWO PHASES OF DISEASE AND HEALTH – OVERVIEW



① Health - Balance *"Equilibrium - harmonious interaction between day-activity and night-regeneration."*

Natural rhythm between day-activity and night-relaxation; balance between sympathetic and parasympathetic nervous system



High vitality and life energy are important for strong immune system and selfhealing response

② Conflict Shock Experience *"A significant emotional experience - unexpected, highly dramatic, isolated."*

Simultaneously on all levels organ-brain-psyche; is an unconscious process, bypassing our conscious thinking or awareness. Typical conflicts relate to survival, territory, self-worth, fear of death, separation, etc.



③ 1. Conflict Phase: *"Sympathetic, conflict active, stress phase - energy is used for fight, flight and conflict resolution."*

Typical physical-psychological symptoms are: cold hands and feet, low temperature, reduced appetite, low digestive activity, increased heart and breathing rate, contracted blood vessels, compulsive thinking, emotional stress, change of personality, inner pressure and tightness due to ongoing sympathetic stress.

④ Conflict Resolution *"Change from 1. sympathetic, conflict active to 2. vagotonic, conflict passive phase."*

The conflict resolution can be an unconscious process (change of life circumstances, avoidance of conflict) or a conscious choice (psychological or spiritual resolution).

⑤ 2. Regeneration Phase *"Parasympathetic, conflict passive phase - energy used for regeneration and healing."*

Typical physical-psychological symptoms are: warm hands and feet, body requires time and energy to regenerate, sleep and relaxation, slow heart and breathing rate, dilated blood vessels, elevated temperature, strong appetite and digestive activity, mentally relaxed, compulsive problem thinking is gone.

⑥ Healing crisis *"Short return to sympathetic state with symptoms of 1. phase;."*

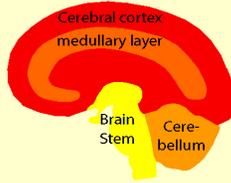
Important biological process as part of regeneration to test organism and return to normality. Typical healing crisis are epileptic crisis, heart attack, seizures.

⑦ Health - Normality *"Return to a healthy state of body, mind and spirit."*

Natural rhythm between day-activity and night-relaxation; feeling well again.

OUR ORGANISM ORGANIZED BY BRAIN RELAY

Embryology: Within the first 20 days of the embryonic stage the three germ layers develop from which all organs and tissue is formed.

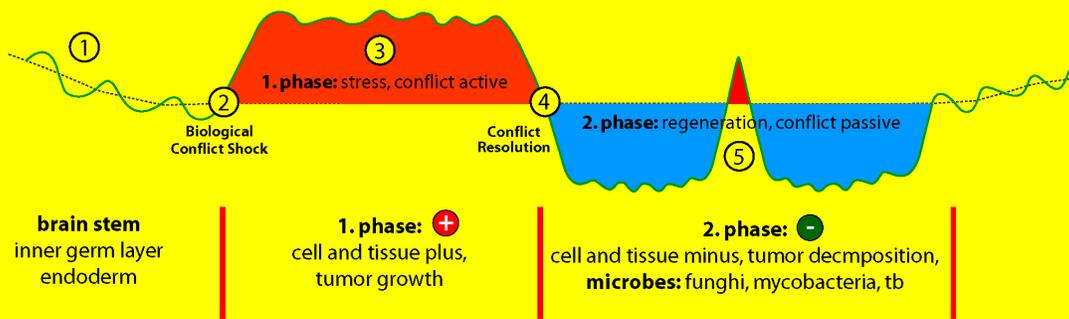
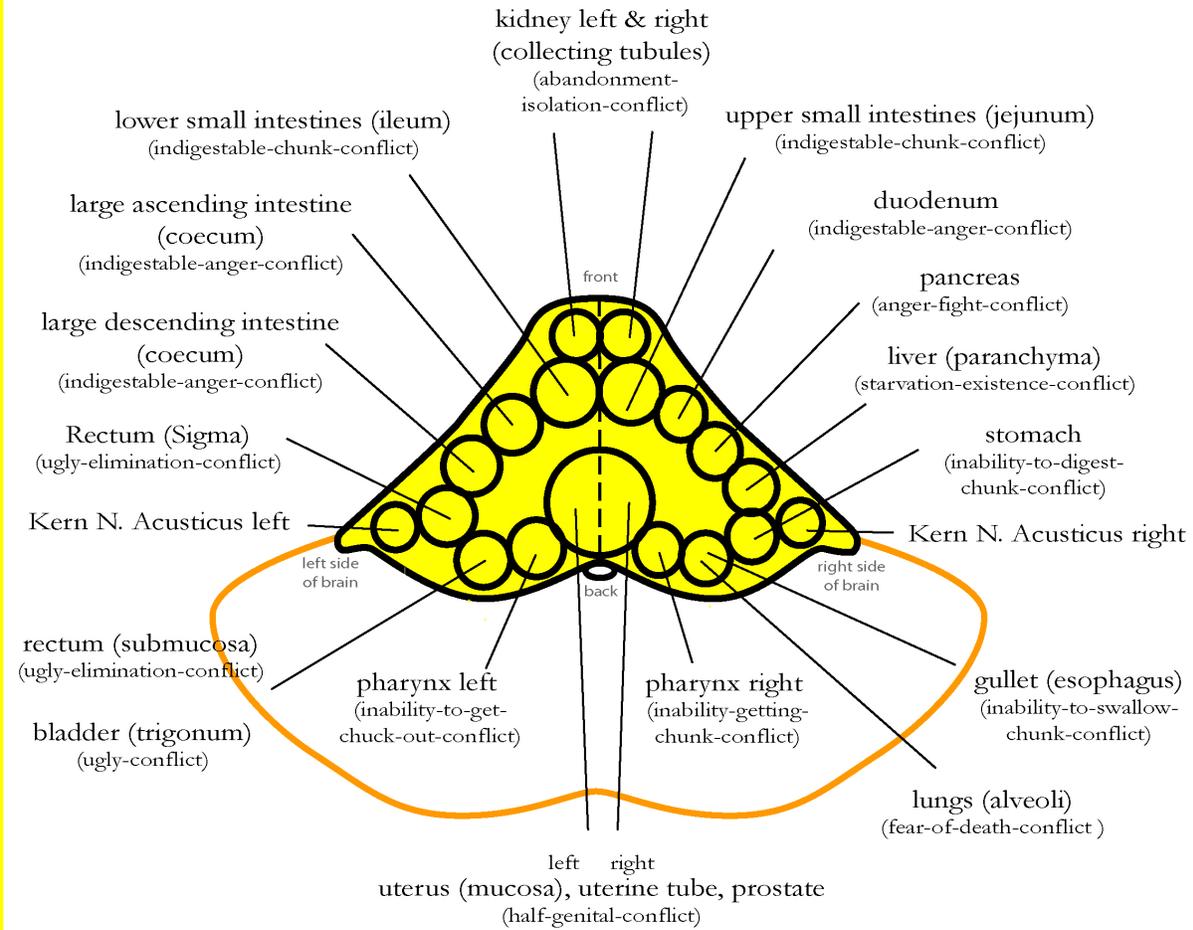


Our complete organism can be organized by:
 * germ layers and brain relays
 * organs with cell-tissue reaction
 * conflict content and the two-phases

Brain Stem endoderm (inner germ layer)	Cerebellum mesoderm (middle germ layer)	Cerebral Medulla mesoderm (middle germ layer)	Cerebral Cortex ectoderm (outer germ layer)
<p>1. Phase: + cell and tissue plus, tumor growth (Adeno-Ca.)</p> <p>2. Phase: - cell and tissue minus, tumor decomposition</p> 	<p>1. Phase: + cell and tissue plus, tumor growth (Adeno-Ca.)</p> <p>2. Phase: - cell and tissue minus, tumor decomposition</p> 	<p>1. Phase: - cell and tissue minus, nekrosis</p> <p>2. Phase: + cell and tissue plus, nekrosis augmentation</p> 	<p>1. Phase: - cell, tissue minus, epithel ulcera or loss of function</p> <p>2. Phase: + cell and tissue growth, return of functionality</p> 
<p>organs: pharynx, pituitary gland, parotid gland, sublingual gland, palate, tonsils, thyroid, parathyroid, eustachian tube, middle ear, lacrimal gland, mouth mucosa, lung alveoli, goblet cell of the brochi, sophagus, (lower third), stomach (large curvature), duodenum (without bulb), liver (parenchyma), pancreas Jejunum (upper small intestine), Ileum (lower small intestine), blind gut and appendix, colon (large intestine), rectum, uterus (without cervix), epiploon, prostate, fallopian tubes, ovaries, testicles, bladder, kidney collecting tubule, inner navel</p>	<p>organs: dermis breast pericardium pleura peritoneum</p>	<p>organs: connective tissue, cartilage, tendons, bones, teeth bone, lymphatic node and vessels, spleen, adrenal cortex, blood vessels, arteries, venes, muscles, ovaries (interstitial), testicles, kidney paranchyma, intestine musculature, uterus musculature, heat (inner wall)</p>	<p>organs: thyroid, branchial arch, larynx, coronary venes and arteries, mouth and neck of uterus, vagina, spermatocyst, rectum, stomach (small curvature), duodenum, gall ducts, pancreas ducts, bladder, ureter, kidney pelvis, outer skin incl. hair, eyelids, eye lense, eye glass body (cornea, breast, (ductal), teeth enamel, nose, mouth mucosa, paranasal sinuses, thalamus, esophagus (top 2/3), lacrimal gland, parotid gland, sublingual gland,</p> <p>motoric and sensible paralysis, ability to smell, hear and see, adrenal medulla</p>
<p>conflicts related to basis fear of survival, fear of death, loss, anger and chunk-conflicts like inability to get hold or digest or let go of a chunk</p>	<p>conflicts related to real or perceived attacks, worry and argument or personal nest conflicts</p>	<p>conflicts related to self-devaluation and self-worth, loss, overwhelm or water-fluid conflict</p>	<p>conflicts related to territory like not being able to mark or defend own territory or sexual, indentity, seperation, fear, resistance and disgust conflicts</p>
<p>microbes funghi, myco-bacteria</p>	<p>microbes funghi, myco-bacteria</p>	<p>microbes bacteria</p>	<p>microbes virus</p>
<p>(from brain to organ not crossed handedness not important)</p>	<p>(from brain to organ crossed handedness is important)</p>	<p>(from brain to organ crossed handedness is important)</p>	<p>(from brain to organ crossed handedness is important)</p>

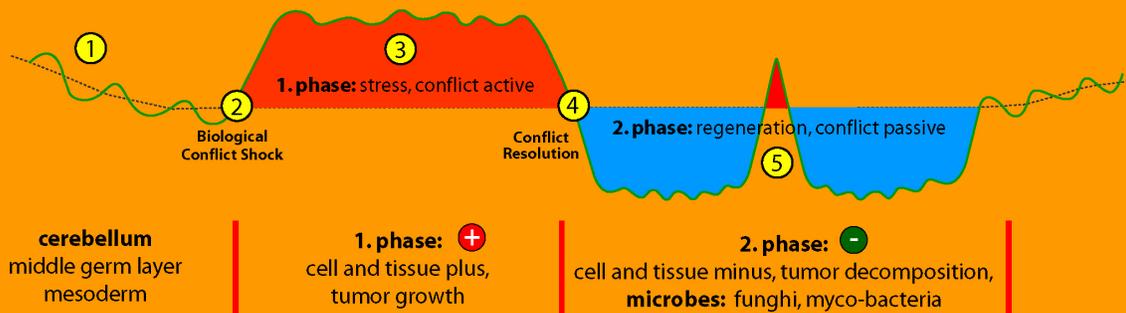
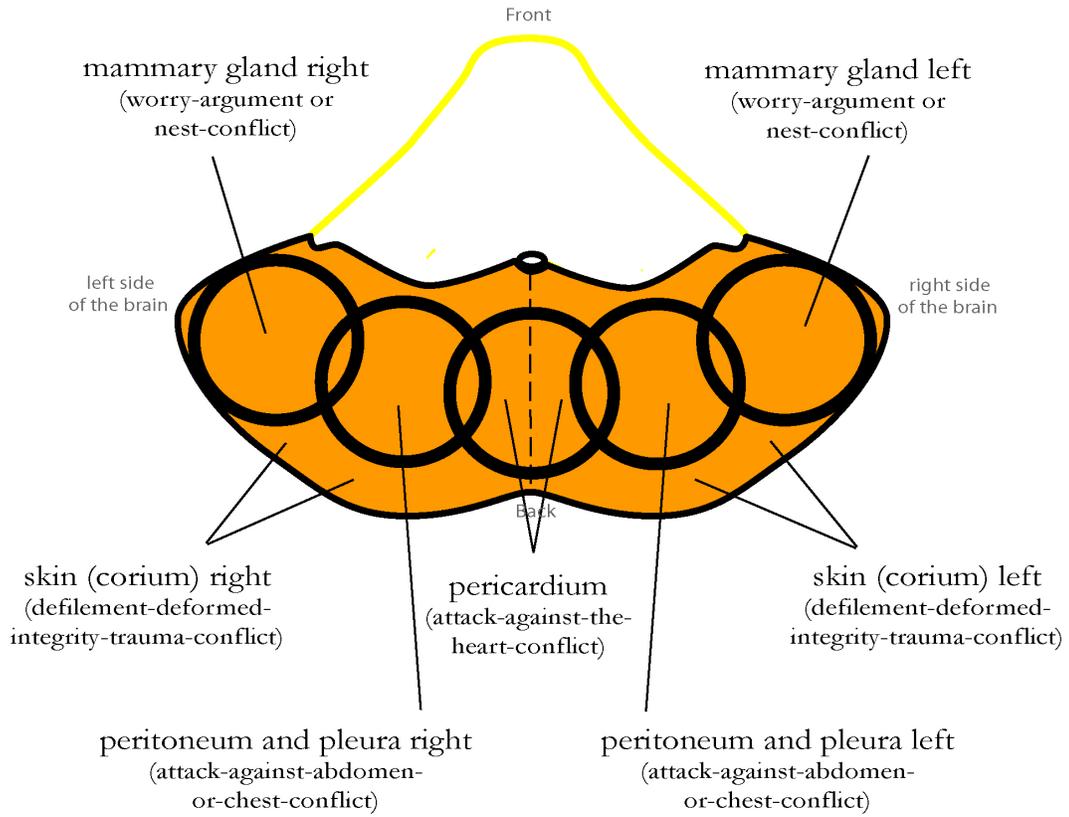
BRAIN RELAY: BRAIN STEM

The connections between brain stem and organ are not crossed. Right-Left handedness is not relevant.



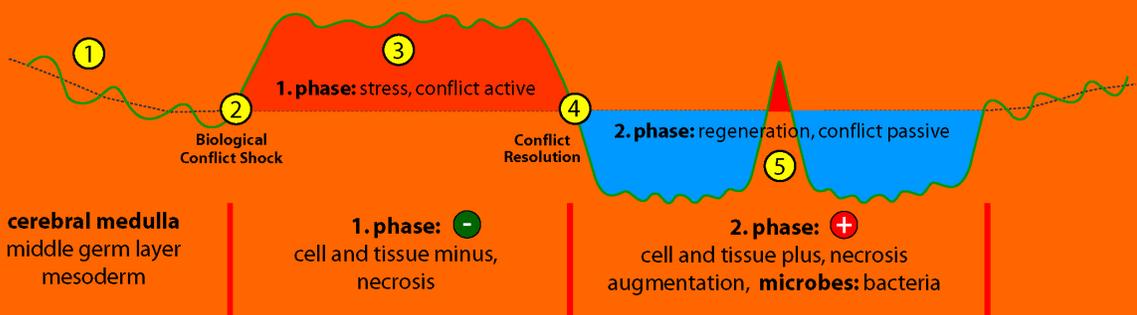
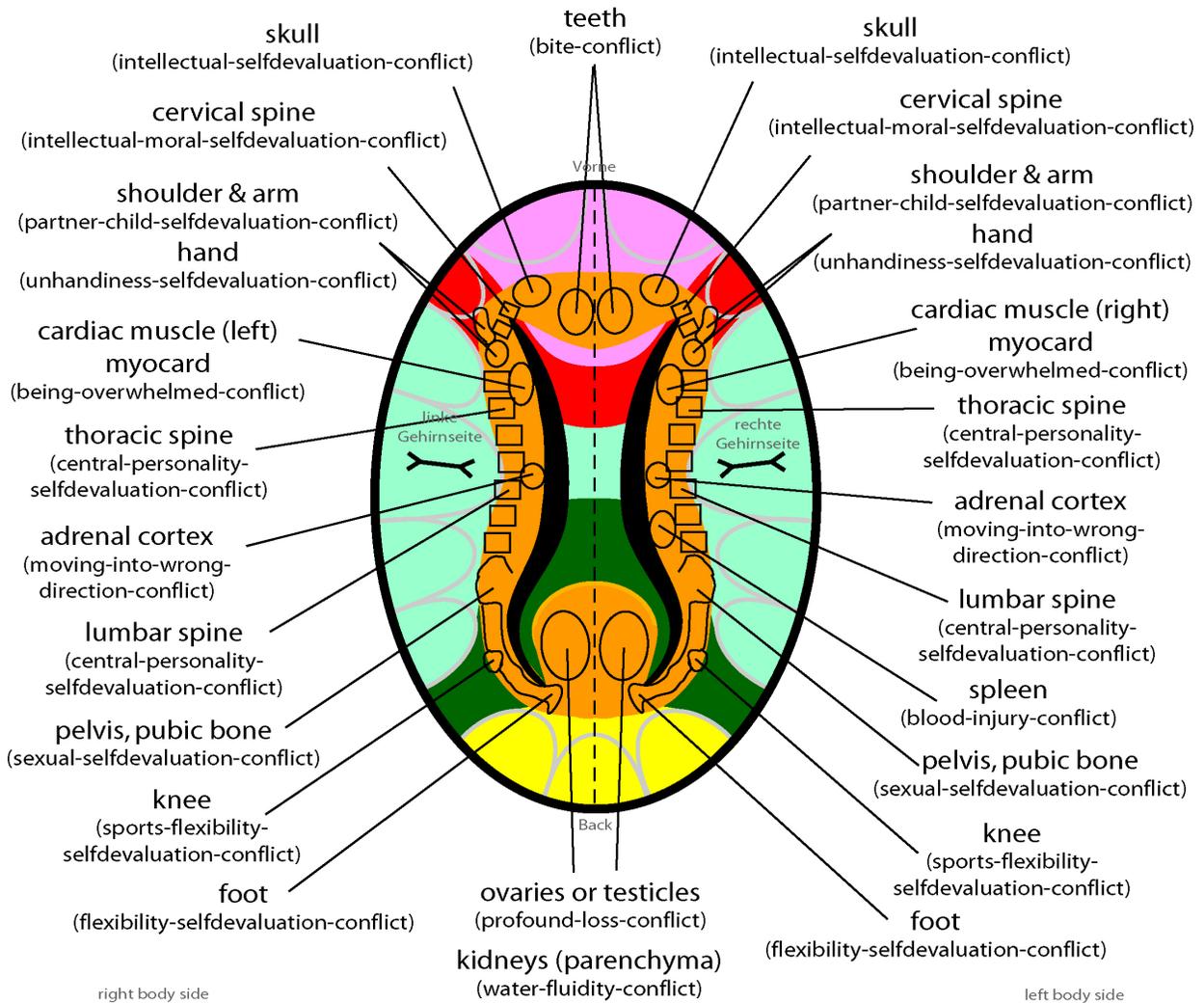
BRAIN RELAY: CEREBELLUM

The connections between cerebellum and organ are crossed, meaning the left side of the body is represented in the right side of the brain and visa versa. Right-Left handedness is relevant.



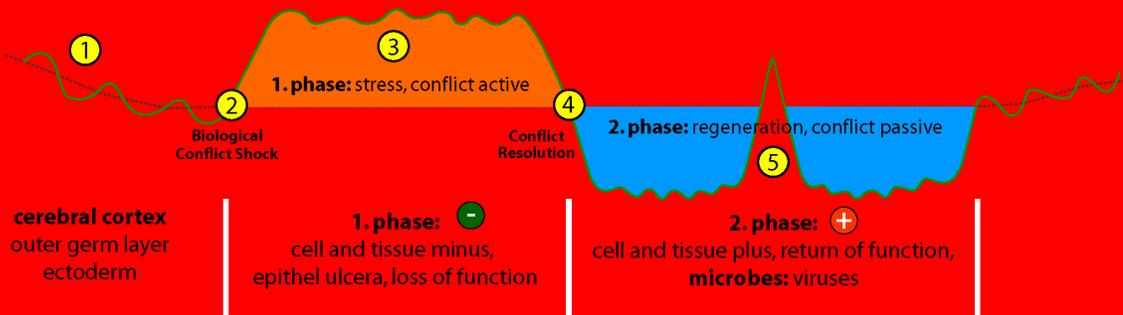
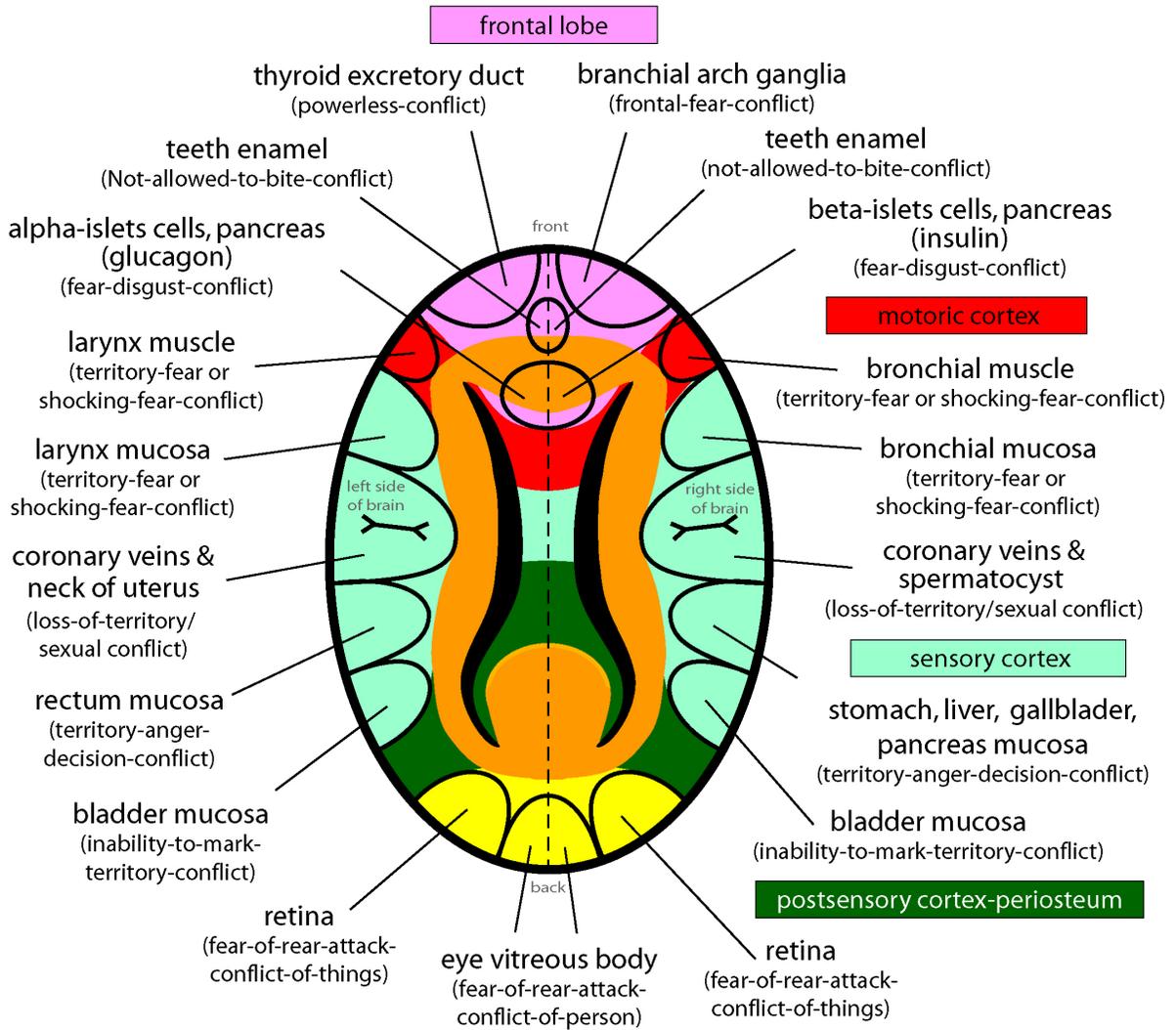
BRAIN RELAY: CEREBRAL MEDULLA

The connections between cerebral medulla and organ are crossed (except myocard and kidneys), meaning the left side of the body is represented in the right side of the brain and visa versa. Right-Left handedness is relevant.



BRAIN RELAY: CEREBRAL CORTEX

The connections between cerebral medulla and organ are crossed, meaning the left side of the body is represented in the right side of the brain and visa versa. Right-Left handedness is relevant.



META-MEDICINE DIAGNOSIS PROCESS

Before any therapy, it is essential to elicit a detailed holistic diagnosis and have a good understanding of the current state of body, mind, spirit of the patient. One of the goals with the Meta-Medicine Diagnostics process is to find the major 35 points and phases of a disease process and confirm it on the main 5 levels of our organism.

7 major points and phases of a disease process

1. Health
2. Conflict shock (SEE)
3. Stress phase
4. Conflict resolution
5. Regeneration phase
6. Healing crisis
7. Health

5 main levels of our organism

1. Organ
2. Psyche
3. Brain
4. Autonomous nervous system
5. Environment

META-MEDICINE MODELS

To find these major points and phases of a disease, you would use concepts like:- Organ Psyche Brain Connection

- known conflict content for each organ
- Brain relay, germ layer connection
- two phases of a disease
- handedness of a patient
- vitality
- specific questioning techniques
- and more ...

Naturally you can use all available diagnostics methods, traditional and alternative, to get as much clinical data. The more data you have the easier it is to find above major points and phases and the easier it is to design a therapy plan.

META-MEDICINE SCRIPT: HANDEDNESS

1. Please place your hands on your knees?
2. Very quickly clap your hands like applauding someone?
3. Stop !
4. Which hand is on top? = Handedness

Tips (if no clear result):

- *Many left-handed people think they are right-handed.*
- *Clap both ways - which side feels more natural?*
(look for leading hand, more natural posture)

META-MEDICINE SCRIPT: FINDING MAJOR POINTS AND PHASES

1. What is the health issue? Symptoms?

review Meta-Medicine Directory (learn about the details of the disease program, like organ reaction, symptoms conflict, phases)

2. When exactly did the symptoms appear first?

note exact time of the first (acute) or last cycle (chronic)

3. Did you feel stressed, hyperactive, ?

Or did you feel tired, exhausted, during this time?

to confirm if in 1st Stress Phase or 2nd Regeneration Phase

4. Just before the symptoms began, did you have to deal with? Did your thinking, feelings change?

without suggesting: ask specific questions to find conflict resolution or shock

5. Repeat above steps until you found all major points in timeline (conflict shock, resolution, symptom of phases)

double check on all levels: organ, psyche, brain, environment ...

