Advanced Therapy

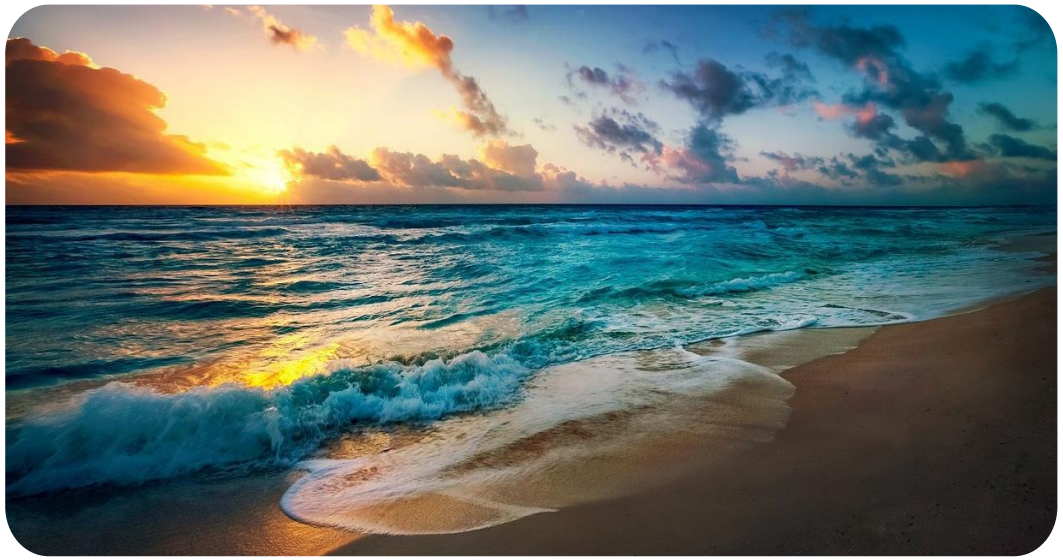
Evidence-Based Hypnotherapy Studies

Hypnotherapy Facts & Findings

Hypnosis has been used and recommended by the ***AMA*** for nearly 70 years

Hypnotherapy Overview:

The power of hypnotherapy goes beyond just personal success stories—it's backed by science. Addiction often rewires the brain's reward system. When we engage in addictive behaviors, the brain releases dopamine, the "feel-good" neurotransmitter that reinforces the behavior, making us want to repeat it. Over time, these reward pathways become ingrained, and we rely on the addictive substance or behavior to maintain that pleasurable feeling.



www.AdvanTherapy.com

Continued:

Hypnotherapy works by helping to reframe these reward pathways. Under hypnosis, the brain enters a heightened state of suggestibility, allowing a hypnotherapist to guide the brain towards healthier associations and responses to triggers.

Research supports the effectiveness of hypnotherapy in treating addiction. A study published in the *American Journal of Clinical Hypnosis* found that hypnosis can reduce cravings and withdrawal symptoms in people recovering from substance abuse. Hypnotherapy helps calm the nervous system, reducing emotional triggers that often lead to compulsive behavior. By helping individuals focus and be present, hypnosis makes it easier to maintain control and avoid relapse.

Additionally, hypnotherapy addresses the psychological causes of addiction. Many people turn to addictive behaviors as a way to cope with unresolved trauma, stress, or emotional pain. Through deep relaxation and guided imagery, hypnotherapy allows individuals to uncover these unconscious beliefs and experiences, providing a pathway to heal from within.

The combination of the emotional and psychological benefits of hypnotherapy makes it a powerful tool for overcoming addiction. It goes beyond managing symptoms to create lasting, life-changing results.

Additional Facts & Findings

A growing body of research is highlighting the significant role hypnotherapy can have in treating mental health and addiction issues. Some research studies focus on case studies and treatment methods aiming to understand the most effective hypnotherapy models of treatment. For example, Dr Tracie O'Keefe, a leading Australian researcher in hypnotherapy and psychotherapy, has published research identifying the significant impact hypnotherapy has in treating addiction, promoting sobriety and preventing relapse (O'Keefe, 2017; O'Keefe, 2020). Varied studies look at understanding what types of hypnotherapy methods are successful and how combining hypnotherapy with psychological modalities works well together to foster lasting change.

Additional Facts & Findings

For example, treatment studies that combined hypnotherapy techniques with known psychological treatment models such as cognitive behavioral therapy, acceptance and commitment therapy, internal family systems and psychotherapy have been identified as significant for the treatment of addiction, compared to hypnotherapy alone (Barbieri, 2008; O'Keefe, 2020; Potter, 2004).

Other studies focus on how hypnotherapy influences neurological changes in the brain (Li et al., 2019). The future of research in hypnotherapy is focusing on looking at changes in neural mechanisms in brain structure. This is an exciting development, the more that is being understood about the possible changes within the network of neurological connections the more hypnotherapy shows its potential as a significant, evidence-based modality in the treatment of addiction and substance abuse disorders and as an effective, therapeutic approach to create lasting physical and emotional wellbeing.

Here are some additional studies:

Years ago, as a psychology grad student, Amanda Barnier, PhD, did a pair of experiments in which she gave people a pile of stamped postcards and asked them to send her one each day for the next few months. She asked a group of people to mail the cards as a favor to her; for another group, she administered a posthypnotic suggestion to send the cards. Both groups were equally likely to mail the cards, day after day, until their stacks ran out. But their motivations and experiences, she found, were quite different (*Psychological Science* , Vol. 9, No. 4, 1998).

The people she asked to do her a favor had an internal explanation for the action. “They felt they made a decision to comply with my social request,” said Barnier, now professor of cognitive science and pro vice-chancellor of research performance and development at Macquarie University in Australia. “The hypnotized people felt it was a compelling urge they had to meet. Hypnosis made the action feel more involuntary.” That reduced sense of personal agency may be precisely what makes clinical hypnosis such a powerful tool in psychotherapy and behavior change, said Barnier, who has studied the power of hypnosis ever since. “By changing the person’s sense of authorship, the effort becomes external to them. Hypnosis kick-starts the process by making it easier to change.”

Hypnosis is as old as the field of psychotherapy itself, but today, advocates pointing to its evidence base say it deserves a fresh look—and a much wider audience. “Hypnosis has a certain historical mystique that can sometimes make it difficult for practitioners to understand its modern relevance,” said David Godot, PsyD, a clinical psychologist in Long Beach, California, and president of APA’s Division 30 (Society of Psychological Hypnosis). In fact, clinical hypnosis has clear benefits in psychotherapy, improving outcomes in areas such as pain management, anxiety, depression, sleep, and more. “Over the past few decades, there have been tremendous advances in understanding hypnosis and its benefit for research and practice,” Godot said.

Division 30 defines hypnosis as “a state of consciousness involving focused attention and reduced peripheral awareness characterized by an enhanced capacity for response to suggestion” (Elkins, G. R., et al., *International Journal of Clinical and Experimental Hypnosis*, Vol. 63, No. 1, 2015). Yet the definition of hypnosis has been the subject of debate for the better part of a century. While some experts believe hypnotic induction results in an altered state of consciousness, others argue it’s not so much a distinct state as a shift in attention. What experts on both sides of the debate agree on, however, is that hypnosis works.

In hypnotherapy, a clinician starts with a hypnotic induction, spoken prompts that encourage the client to shift their focus and deepen relaxation. Then, the clinician provides therapeutic suggestions to guide the client toward the wanted change. “Our brains soak up information from the environment and combine it with our prior beliefs and experiences and memories to form a conscious experience of the moment,” said Afik Faerman, PhD, a postdoctoral fellow in clinical neuropsychology at Stanford University and president-elect of Division 30. “Hypnosis is one context during which our brain edits that conscious experience. As the facilitator of a hypnosis session, I can provide guidance about how to edit those experiences, but it’s up to that person to act on my suggestions.”

Those suggestions are what set hypnosis apart from meditation and mindfulness-based interventions. Both mindfulness and hypnosis are built on the backbone of focused attention; however, mindfulness aims for nonjudgmental awareness and acceptance. “Hypnotherapy has some important advantages,” said Guy Montgomery, PhD, a professor of psychology and director of the Center for Behavioral Oncology at the Icahn School of Medicine at Mount Sinai in New York City, who uses and studies clinical hypnosis for reducing pain in cancer patients. “Whereas meditation helps you accept a problem, hypnosis allows people to make changes to do something about the problem,” he said.

Post-Hypnotic Suggestions:

Research has shown evidence that posthypnotic suggestion can elicit striking changes in perception and behavior. Two classic—and colorful—studies illustrate the power of hypnotic suggestion. In one, Amir Raz, PhD, a cognitive neuroscientist at McGill University in Montreal, and colleagues showed that hypnosis could disrupt the Stroop effect, the popular laboratory task that instructs participants to name the font color of written words. People respond much slower and make more mistakes when these words are color names and the word and the font color are different and thus interfere with each other (for example, the word “blue” written in red font).

But when highly hypnotizable participants were instructed under hypnosis to pay attention only to the font color and not the text, the Stroop interference effect disappeared (*Archives of General Psychiatry* , Vol. 59, No. 12, 2002). The study has been replicated many times by multiple labs. One recent example showed that while hypnosis itself did not eliminate the Stroop effect, posthypnotic suggestion did—a finding confirmed by electroencephalogram (EEG) (Zahedi, A., et al., *Neuropsychologia*, Vol. 96, No. 1, 2017). Such findings offer a vivid example of the ways that hypnosis can exert a top-down influence on cognition, even for automatic processes like reading.

In another experiment, David Spiegel, MD, a professor of psychiatry and behavioral sciences at Stanford University, and colleagues gave participants a suggestion to view color when looking at grayscale images. Brain scans showed that the color-processing regions of their brains lit up even though the photos in front of them contained nothing but shades of gray (*The American Journal of Psychiatry* , Vol. 157, No. 8, 2000).

Both studies tested people considered “highly hypnotizable,” those who become hypnotized quickly and easily and respond strongly to hypnotic suggestions. Spiegel’s research suggests that people who are higher in hypnotizability have more functional connectivity—essentially, more communication—between the central executive network, which manages executive functions such as decision-making and working memory, and the salience network, which is tasked with prioritizing important incoming information (Hoeft, F., et al., *Archives of General Psychiatry*, Vol. 69, No. 10, 2012). “We believe that the executive network of individuals who are high in hypnotizability has a greater ability to moderate where their attention goes during hypnosis,” said Faerman, a postdoctoral scholar in Spiegel’s lab.

Hypnotizability is a trait that follows a normal distribution: 10% to 20% percent of people aren't very hypnotizable, and about the same proportion are highly responsive; everyone else falls somewhere in between. Several measures exist to assess a person's potential to respond to hypnosis, such as the brief Hypnotic Induction Profile (Spiegel, H., & Spiegel, D., *Trance and Treatment: Clinical Uses of Hypnosis*, American Psychiatric Association Publishing, 2004) or the Elkins Hypnotizability Scale (Kekecs, Z., et al., *International Journal of Clinical and Experimental Hypnosis*, Vol. 69, No. 1, 2021).

While responsiveness varies, however, most people can benefit from hypnosis to some degree, said Gary Elkins, PhD, ABPP, a professor of psychology and neuroscience at Baylor University. "People in the higher range may respond more quickly, but almost anyone can be a candidate for clinical hypnosis," he said. "If people are in the lower range, they may just need more sessions or more practice to achieve the same results."

Elkins's research has indicated that clinical hypnosis may have benefits even in people who are not especially high in hypnotizability. In recent work, he's tested a hypnotherapy intervention for treating hot flashes in menopausal women and breast cancer survivors. In one trial, menopausal women received five weekly sessions of clinical hypnosis or a structured-attention control intervention. Those in the hypnosis group reported hot flashes were reduced by more than 74%, whereas the control group reported a 17% reduction in hot flashes. Objective physiological monitoring of hot flashes supported their reports, showing a 57% reduction in hot flashes for women who had hypnosis compared with a 10% reduction for control participants (*Menopause* , Vol. 20, No. 3, 2013).

Research suggests that hypnotic suggestion may be useful for a host of other behavioral health problems, including improving sleep, managing stress, and quitting smoking. One meta-analysis found, for instance, that hypnosis was a promising treatment for sleep problems (Chamine, I., et al., *Journal of Clinical Sleep Medicine*, Vol. 14, No. 2, 2018). And a meta-analysis of hypnosis for depression found that hypnosis appears to be an excellent treatment option for depression (Milling, L. S., et al., *American Journal of Clinical Hypnosis*, Vol. 61, No. 3, 2019).

Research dating back 3 decades found that hypnosis could enhance the effectiveness of cognitive behavioral therapy (CBT). An updated meta-analysis showed that when the two were combined, they had a small-to-medium, but statistically significant, advantage over CBT alone for managing depression or pain (Ramondo, N., et al, *International Journal of Clinical and Experimental Hypnosis*, Vol. 69, No. 2, 2021). Another analysis found that hypnosis was more effective in reducing anxiety when combined with other psychological interventions than when it was used alone (Valentine, K. E., et al., *International Journal of Clinical and Experimental Hypnosis*, Vol. 67, No. 3, 2019).

Some of the most robust evidence for clinical hypnosis is in controlling pain, as evidenced by two recent meta-analyses. The first assessed 85 controlled studies of experimentally evoked pain and found hypnosis delivered meaningful pain relief for most people, with the greatest effects in those who rated high on hypnotic suggestibility (Thompson, T., et al., *Neuroscience & Biobehavioral Reviews*, Vol. 99, 2019). In a separate analysis, researchers assessed 42 controlled studies of hypnosis for treating clinical pain. They concluded that hypnosis is "very efficacious," with a mean weighted effect size in the medium range (Milling, L. S., et al., *International Journal of Clinical and Experimental Hypnosis*, Vol. 69, No. 3, 2021).

"Hypnosis can help turn down the volume on pain, both acute and chronic," Montgomery said. In his work with cancer patients, he has demonstrated its benefit in a series of clinical trials—including a forthcoming study suggesting that hypnosis could reduce the joint pain that is a common side effect of a drug used to treat breast cancer. His program has funding from the National Cancer Institute to provide free training to any cancer care providers who want to learn hypnosis to help patients manage pain. "Hypnosis works. And the cool thing is that in our randomized trials, we don't find effects due to race or ethnicity. This is something that can help anybody," said Montgomery.

Telehealth:

A recent international survey that included nearly 700 hypnosis practitioners (Palsson et al., 2023) provides a general view of how hypnosis is utilized in clinical settings. Results from the survey revealed that hypnosis is most commonly used by clinical psychologists (42.7% of respondents reported this as their profession) and 60.5% of respondents reported offering hypnosis treatment in a private practice setting. Respondents were also asked to rate the effectiveness of specific applications of clinical hypnosis. Seven applications of hypnosis were rated as “highly effective” by at least 70% of respondents: stress reduction, enhancing well-being, preparing for surgery, anxiety, mindfulness, childbirth, and enhancing confidence. Conversely, the applications with the least amount of endorsement for being highly effective included obsessive-compulsive disorder, eating disorders, and weight loss.

Almost two-thirds of respondents reported using video conferencing to provide hypnosis intervention and the majority of those professionals rated remote delivery to be as effective as in-person delivery. It is important to note that some have critiqued the survey in its effort to gather information about the “hypnosis styles” commonly used by respondents’ which had overlapping response options and unclear intention (McCann, 2023).

CBT & Hypnotherapy:

In 1995, the *Journal of Consulting and Clinical Psychology* published a groundbreaking meta-analysis, comparing CBT treatment without hypnosis to identical treatment *with* hypnosis…

…With astounding results.

The evidence was compiled from 18 case studies covering therapy issues ranging from obesity and hypertension to insomnia and public speaking anxiety.

It showed that "*the average client receiving cognitive behavioral hypnotherapy benefited more than at least 70% of clients receiving the same treatment without hypnosis*."

Ten years later, the same journal published a study of combined CBT-hypnosis in treating acute stress disorder.

Again, it found that "CBT-hypnosis resulted in greater reduction in re-experiencing symptoms at post-treatment than CBT [alone]."

Additional Facts & Findings

Nicotine is a drug, and below are studies from leading U.S. universities examining hypnotherapy's effectiveness with smoking cessation

90.6% Success Rate for Smoking Cessation using Hypnosis

Of 43 consecutive patients undergoing this treatment protocol, 39 reported remaining abstinent from tobacco use at follow-up (6 months to 3 years post-treatment). This represents a 90.6% success rate using hypnosis.

University of Washington School of Medicine, Depts. of Anesthesiology and Rehabilitation Medicine, Int J Clin Exp Hypn. 2001 Jul;49(3):257-66. Barber J.

87% Reported Abstinence from Tobacco use with Hypnosis

A field study of 93 male and 93 female CMHC outpatients examined the facilitation of smoking cessation by using hypnosis. At 3-month follow-up, 86% of the men and 87% of the women reported continued abstinence from the use of tobacco using hypnosis.

Performance by gender in a stop-smoking program combining hypnosis and aversion. Johnson DL, Karkut RT. Adkar Associates, Inc., Bloomington, Indiana. Psychol Rep. 1994 Oct;75(2):851-7. PMID: 7862796 [PubMed - indexed for MEDLINE]

81% Reported they had Stopped Smoking after Hypnosis

Thirty smokers enrolled in an HMO were referred by their primary physician for treatment. Twenty-one patients returned after an initial consultation and received hypnosis for smoking cessation. At the end of treatment, 81% of those patients reported that they had stopped smoking, and 48% reported abstinence at 12 months post-treatment.

Texas A&M University, System Health Science Center, College of Medicine, College Station, TX USA. Int J Clin Exp Hypn. 2004 Jan;52(1):73-81. Clinical hypnosis for smoking cessation: preliminary results of a three-session intervention. Elkins GR, Rajab MH.

Hypnosis Patients Twice as Likely to Remain Smoke-Free after Two Years

Study of 71 smokers showed that after a two-year follow up, patients that quit with hypnosis were twice as likely to remain smoke-free than those who quit on their own. Guided health imagery for smoking cessation and long-term abstinence.

Wynd, CA. Journal of Nursing Scholarship, 2005; 37:3, pages 245-250.

Hypnosis most Effective Says Largest Study Ever: 3 Times as Effective as Patch and 15 Times as Effective as Willpower

Hypnosis is the most effective way of giving up smoking, according to the largest ever scientific comparison of ways of breaking the habit. A metaanalysis, statistically combining results of more than 600 studies of 72,000 people from America and Europe to compare various methods of quitting. On average, hypnosis was over three times as effective as nicotine replacement methods and 15 times as effective as trying to quit alone.

University of Iowa, Journal of Applied Psychology, How One in Five Give Up Smoking. October 1992