ESH The Newsletter

Hypnosis From Europe to the World

Autumn Edition 2025

European Society of Hypnosis
In Psychotherapy and Medicine
ESH

Editors
Kathleen Long
Fabio Carnevale

ESH

Glasgow 2026

PARENTAL
ADVISORY
Hypnotic CONTENT



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XVII European Society of Hypnosis Congress

26th – 30th August 2026, University of Glasgow, Scotland

Let hypnosis guide you to inner peace

held by the British Society of Medical and Dental Hypnosis



Early Bird Registration Rate:

- Available until 31 July 2025

Abstract Submission:

- Now Open
- Closing: 27 May 2026

Early Abstract Submission Encouraged:

- Abstract outcomes will be communicated within 12 weeks of submission
- Successful presenters will receive 15% off the applicable delegate fee at time of booking

Register: https://fitwise.eventsair.com/esh2026



Your invite to submit an abstract for the European Society of Hypnosis (ESH) Congress 2026, Glasgow.

ESH 2026 Abstract Submission open: https://fitwise.eventsair.com/esh2026/abstracts

Each year ESH Congress attracts a large number of abstracts with submissions covering the breadth of hypnosis topics from healthcare professionals who specialise / have an interest in the use of hypnosis in the fields of medicine, dentistry, psychology, and psychotherapy.

Early abstract submission is encouraged:
Abstract outcomes will be communicated within 12 weeks of submission
Successful presenters will receive 15% off the applicable delegate fee at time of booking

Submitting an abstract for Congress is an ideal way to communicate the outcomes of your work to your peers. Presenting will also support your personal development, showcase your skills and help grow your CV.

We would like to invite you to consider submitting abstracts for Congress on the following themes:
Hypnosis in medicine
Hypnosis in dentistry
Hypnosis in psychology & psychotherapy
Hypnosis and other integrative approaches
Hypnosis research

In particular the BSMDH who are hosting the Congress would like to encourage submissions from those who haven't submitted to a Congress previously.

Please visit the website for further advice and information:

https://fitwise.eventsair.com/esh2026/abstracts



European Society of Hypnosis (ESH) Congress 2026, Glasgow Speaker Announcement!

We are delighted to announce the following Keynote and Invited speakers for ESH Congress 2026

Keynote Speakers

- Dr Eva Banyai
- Consuelo Casula
- Dr Gerard Fitoussi
- Mike Gow,
- Dr Graham Jamieson
- Dr Mark Jensen
- Dr Elvira Lang
- Dr Kathleen Long
- Camillo Loriedo
- Peter Naish
- Bernhard Trenkle

Invited Speakers

- Susanna Carolusson
- Dr Mehdi Fathi
- Xin Fang
- Dr Gabor Filo
- Marta Nowak-Kulpa
- Dr Ali Ozden Ozturk
- Dr Teresa Robles
- Dr Dan Short

Find out more about all the speakers, some of which are pictured below at
https://fitwise.eventsair.com/esh2026/programme





Pre Congress Day

We are in the process of finalising the Pre Congress day Thursday 27th August 2026 and encourage you to sign up for this if you haven't already done so. Pre Congress will include a half day morning workshop delivered by Fabio Carnevale on Artificial Intelligence and hypnosis and a half day afternoon workshop exploring the use of virtual reality in hypnosis by Dr Graff and Dr Chauvin who both use VR in their anaesthetic practices.



By attending Congress you will join a host of like-minded healthcare professionals who specialise / have an interest in the use of hypnosis in the fields of medicine, dentistry, psychology, and psychotherapy from across the globe.

Abstract Submissions Invited

Thank you to those who have already submitted an abstract for Congress. As we have a rolling review system, those submissions have already been reviewed, and their outcomes communicated! Why don't you consider playing a key role in the congress and submitting your work for consideration as an abstract? See full details below and online: https://fitwise.eventsair.com/esh2026/abstracts.

Exhibition open for booking

The Congress will also feature an exhibition for companies with an interest in the use of hypnosis in the fields of medicine, dentistry, psychology, and psychotherapy. If you would like to know more about the available opportunities to exhibit / sponsor see more details online at https://fitwise.eventsair.com/esh2026/exhibition

Don't forget full details are on our conference website: https://fitwise.eventsair.com/esh2026

Conference Key Dates:

- Closing date for abstract submissions: 27 May 2026

- **Congress: 26 – 30 August 2026**
  - Wednesday 26 August: Pre-conference registration
  - Thursday 27 August: Pre-congress workshop
  - Friday 28 - Sunday 30 August: Main Conference



ESH Congress XVII Glasgow 2026 update

Glasgow 2026 is getting closer, and it is becoming more real with each passing day. The weather in Glasgow during August 2025 has been pretty good. Warm but not anything like the heat that has been a problem throughout the rest of Europe. Glasgow will be busy in August 2026 with Commonwealth Games ending on 2nd August, the World Pipe Band Championships taking place from 8th-17th August and of course our own ESH XV11 Congress being held at Glasgow University. The Edinburgh Festival is also easily accessible from Glasgow via a short train ride. Glasgow has a circular subway system which connects the different parts of the city with the University. Hillhead Subway station is just around the corner from the main Congress venue, and it means that attendees can chose from a wide choice of places to stay to suit them and I'll let you know about this as soon as possible and our PCO Fitwise will add it to the website.

The Pre Congress day will hopefully be of interest to those with an eye to the future. The topics for pre congress include Artificial Intelligence by our own Fabio Carnevale and Virtual Reality. Should we distance ourselves from these technologies, or instead seek to understand and leverage them to better serve our patients and clients, many of whom are already engaging with and familiar with such advancements?

I look forward to welcoming you all to Glasgow.

www.fitwise.co.uk

· Fitwise are an award-winning Professional Conference Organiser (PCO) and association management company with success spanning over 30 years. We have become one of the most respected and trusted names in our field.

· We specialise in educational conferences for healthcare / medical associations/ charities and in an average year we successfully organise over forty-five conferences and events to include online, in-person, and hybrid events.

· Fitwise have vast experience working on one-off international / European events to include the Federation of Infection Societies International Conference from 2012, and the European Immunogenetics and Histocompatibility Conference 2021 which was originally planned for Glasgow and then moved online.

· Fitwise are the professional conference organiser for the British Society for Paediatric Dentistry (BSPD) Annual Scientific Conference, having organised their 2023 event in Newcastle and working on their 2024 event in Cardiff.

· Based in West Lothian, Fitwise are close to Glasgow and regularly run conferences in the city. We know the conference and social venues in Glasgow well and work closely with the team at the Glasgow Convention Bureau to deliver a memorable event for everyone visiting the city.





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President’s Letter
Gérard Fitoussi



After this well-deserved summer break, I wish you a wonderful return. May this new season bring renewed motivation and inspiration, help you achieve your goals, and open the door to new opportunities. May you approach the months ahead with energy and enthusiasm.

I would like to thank all the constituent societies that took the time to complete the questionnaire I sent. If some of you have not yet done so and wish to participate, please contact our secretary, Nicola, who will be happy to send it to you.

Randi, together with a dedicated team, is pursuing the research project. A video is now available explaining the procedure in several languages. I encourage you to motivate your patients to complete the questionnaire to help all of us gain a better understanding of the effects of hypnosis in clinical settings. A special thanks to Angela Cotza for her help in producing the PowerPoint presentation.

Wasim Biroumi, now in charge of CEPE, has also produced short videos on social media in which experienced practitioners explain what hypnosis is and enhance our social media presence.

Glasgow is now only a few months away. The team led by Kathleen Long, the Congress president, and Mike Gow is busy organizing a great event. I also encourage you to inspire all your members to participate, whether by attending, presenting a workshop, or giving a lecture. It will also be the time to vote for the next president-elect, renew board members, and select the city for the congress. Your presence is very welcome.

We also had the pleasure of reconnecting with the Russian constituent society, now back on board with ESH, which we hope may serve as a harbinger of a peaceful resolution in the region.

Hypnosis can be applied in various settings—clinical, of course, but also in sports and counseling. Some have even attempted to promote hypnosis in education. Promises of enhanced learning through hypnosis appear on websites and in advertisements, though there is no evidence to confirm their validity. This use of hypnosis in education is not new; a 1965 document states: “Hypnosis and suggestion offer immense promise of success in the field of education. The evidence is clear. And yet, hypnosis remains underused in this area”.

That alone could have been enough. But for some, hypnosis was seen as a tool not only for education but also to “moralize under hypnosis those schoolchildren who are vicious or recalcitrant.” This was the idea behind “moral orthopedics,” proposed in France by the Inspector of Public Education, Félix Hément.

Hément followed the suggestion of a young doctor, Edgar Bérillon, who, from a benevolent perspective, proposed reintegrating “the most rebellious students into the common school environment” using “a new medical technology, supposedly granting scientific legitimacy: hypnotism.” This idea was generally accepted for children were considered “good subjects” for hypnosis.

In the congress where these ideas were expressed, only one philosophy professor, Eugène Blum, expressed “the strongest reservations about this hypnotic pedagogy, which turns the child into a machine,

undermines his moral freedom, and appears entirely incompatible with Kantian morality."

As a true philosopher, Blum carefully distinguished what it meant to call a child "recalcitrant": is the child simply ill, or morally bad? In the first case, the child is a patient and the doctor's intervention is uncontroversial. In the second case, Blum humorously—but firmly—challenged the physician's authority. He warned against possible misuse of hypnosis and undesirable effects, stressing the difference between education and "training."

Invoking Socratic maieutic, Blum argued that a teacher should help a child develop autonomy and personality, allowing the child to produce what is already within them. This approach is incompatible with a system in which the child is reduced to an automatic subject, his will suppressed.

While the teacher's influence is real even outside hypnosis, Blum emphasized that it must be freely accepted by the child, who remains conscious. He added that, just as one cannot teach true morality without allowing the freedom to do wrong, genuine moral development requires freedom, not mere obedience.

Blum's concern was the freedom of the person, not merely utilitarian outcomes. Blum's stance is firmly Kantian, not consequentialist, rejecting the notion that only outcomes matter.

Its materialist approach, which treated actions as a chain of events, neglected the freedom of the spirit: "morality replaced by hygiene and education replaced by training." Children trained this way might obey rules, but they would remain "amoral." Blum's principled objection, grounded in Socratic and Kantian philosophy, was singular and courageous.

Today, we must exercise similar caution as hypnosis professionals. Overstating what hypnosis can achieve, raising false hopes, or making claims unsupported by scientific evidence is problematic. This does not mean hypnosis cannot be helpful: it may reduce stress, increase confidence, and help students focus on learning tasks.

One of our missions as healthcare professionals is also to advise parents, students, and education professionals, reminding them of the extreme caution required before accepting any promise of exceptional results in this field, this is precisely what our code of ethics upholds.

I wish you an enjoyable read and a successful return, filled with energy, inspiration, and achievements to come.

References

Dale, R. A. (1972). Hypnosis and education (Report No. SP 007 678). Surfside, FL. (ERIC Document Reproduction Service No. ED087710). Retrieved from EBSCO Host ERIC database (ED087710).

Patrick Dubois, « Moraliser sous hypnose les sujets scolaires "vicieux" ou "récalcitrants" : une variante oubliée dans le modèle éducatif républicain », Education et sociétés, 19 (1), 2007. p.147-160.

Translated into French by Gérard Fitoussi

Après ces vacances d'été bien méritées, je vous souhaite un excellent retour. Que cette nouvelle saison vous apporte motivation et inspiration, vous aide à atteindre vos objectifs et ouvre la porte à de nouvelles opportunités. Que vous abordiez les mois à venir avec énergie et enthousiasme. Je tiens à remercier toutes les sociétés qui ont pris le temps de répondre au questionnaire qui leur a été adressé. Si certains d'entre vous ne l'ont pas encore fait et souhaitent y participer, veuillez contacter notre secrétaire, Nicola, qui se fera un plaisir de vous l'envoyer. Randi, entouré d'une équipe dédiée, poursuit le projet de recherche. Une vidéo est désormais disponible, expliquant la procédure en plusieurs langues. Je vous encourage à inciter vos patients à répondre au questionnaire afin de nous aider tous à mieux comprendre les effets de l'hypnose en contexte clinique. Un grand merci à Angela Cotza pour son aide dans la réalisation de la présentation PowerPoint. Wasim Biroumi, désormais responsable du CEPE, a également réalisé de courtes vidéos diffusées sur les réseaux sociaux, dans lesquelles des praticiens expérimentés expliquent ce qu'est l'hypnose, ce qui favorisera aussi notre présence sur les réseaux sociaux.Glasgow approche à grands pas. L'équipe dirigée par Kathleen Long, président du Congrès, et Mike Gow est en pleine organisation d'un événement exceptionnel. Je vous encourage également à motiver vos membres à y participer, que ce soit en assistant, en animant un atelier ou en donnant une conférence. Ce sera également le moment de voter pour le prochain président-elect, de renouveler les membres du conseil d'administration et de choisir la ville qui accueillera le Congrès après. Votre participation sera la bienvenue. Nous avons également eu le plaisir de renouer avec la société d'hypnose russe, désormais de nouveau membre de l'ESH, ce qui, nous l'espérons, pourra être le signe avant-coureur d'une issue pacifique dans la région. L'hypnose peut être utilisée dans divers contextes, clinique bien sûr, mais aussi dans le sport ou le conseil. Certains ont même tenté de promouvoir l'hypnose dans l'éducation. Des promesses d'amélioration de l'apprentissage par l'hypnose apparaissent sur des sites internet et dans des publicités, bien qu'aucune preuve ne confirme leur validité. Cet usage de l'hypnose en éducation n'est pas nouveau. Un document de 1965 indique : « L'hypnose et la suggestion offrent un immense potentiel de succès dans le domaine de l'éducation. Les preuves sont claires. Et pourtant, l'hypnose reste sous-utilisée dans ce domaine.» Cela aurait pu suffire. Mais pour certains, l'hypnose était envisagée non seulement pour l'éducation, mais aussi pour «moraliser sous hypnose les élèves vicieux ou récalcitrants». C'était le projet de «l'orthopédie morale» proposé en France par l'Inspecteur de l'Enseignement public, Félix Hément. Hément suivait la proposition d'un jeune médecin, Edgar Bérillon, qui, proposait de réintégrer « les sujets les plus rebelles dans le milieu scolaire commun » en utilisant « une nouvelle technologie médicale, supposée lui conférer une légitimité scientifique : l'hypnotisme », Sachant que les enfants sont considérés comme de « bons sujets » facile à hypnotiser. Pendant le congrès, un seul participant s'opposa à cette proposition, Eugène Blum, professeur de philosophie, Il exprima «les plus fortes réserves sur cette pédagogie hypnotique, qui transforme l'enfant en machine, porte atteinte à sa liberté morale et semble entièrement incompatible avec la morale kantienne.» En philosophe, Blum distinguait cherche à préciser la signification des mots et à éviter la confusion. Il demande ainsi ce que signifiait qualifier un enfant de «récalcitrant» : s'agit-il d'un enfant malade ou moralement mauvais? Dans le premier cas, l'enfant est un patient et l'intervention du médecin n'est pas contestée. Dans le second, Blum contestait avec humour mais fermeté l'autorité du médecin et mettait en garde contre les usages détournés de l'hypnose et les effets indésirables, soulignant la distinction entre éducation et «dressage». Invoquant la maïeutique socratique, Blum soutenait que l'enseignant doit aider l'enfant à développer son autonomie et sa personnalité, en lui permettant de produire ce qui est déjà en lui. Cette approche est incompatible avec un système où l'enfant devient un sujet automatique, sa volonté étant supprimée. Si l'influence de l'enseignant est réelle, y compris hors de l'usage de l'hypnose, Blum insistait sur le fait qu'elle doit être librement acceptée par l'enfant, qui reste conscient. Il ajoutait que, tout comme on ne peut enseigner la véritable morale sans la liberté de mal faire, le développement moral exige la liberté, et non la simple obéissance. Blum se préoccupait de la liberté de la personne, et non des seuls résultats utilitaires.

La position de Blum est résolument kantienne, et non conséquentialiste, rejetant l'idée que seuls les résultats importent. L'approche matérialiste sous-jacente d'Hément, considérant les actions comme une chaîne d'événements mue par la seule causalité, négligeait la liberté de l'esprit : «la morale remplacée par l'hygiène et l'éducation remplacée par le dressage». Les enfants ainsi formés pouvaient respecter les règles, mais restaient «amoraux». L'opposition de Blum, fondée sur la philosophie de Socrate et de Kant, était singulière et courageuse. Aujourd'hui, nous devons faire preuve de la même prudence en tant que professionnels de l'hypnose. Surestimer ce que l'hypnose peut accomplir, susciter de faux espoirs ou avancer des affirmations non étayées par des preuves scientifiques est problématique. Cela ne signifie pas que l'hypnose ne puisse être utile : elle peut réduire le stress, accroître la confiance en soi et aider les étudiants à se concentrer sur leurs tâches d'apprentissage. Une de nos missions comme professionnel de santé est également de conseiller parents, étudiants et professionnels de l'éducation, en rappelant l'extrême prudence nécessaire avant d'accepter toute promesse de résultats exceptionnels dans ce domaine, c'est que promeut notre charte d'éthique. Je vous souhaite une lecture enrichissante et une rentrée féconde, porteuse d'initiatives, de découvertes et de succès partagés.

Translated into German by Stella Nkenke

Nach dieser wohlverdienten Sommerpause wünsche ich Ihnen einen guten Neustart. Möge diese neue Saison Ihnen frische Motivation und Inspiration schenken, Ihnen helfen, Ihre Ziele zu erreichen, und neue Möglichkeiten eröffnen. Gehen Sie die kommenden Monate mit Energie und Begeisterung an. Mein Dank gilt allen Mitgliedsgesellschaften, die sich die Zeit genommen haben, den von mir verschickten Fragebogen auszufüllen. Falls Sie dies noch nicht getan haben und teilnehmen möchten, wenden Sie sich bitte an unsere Sekretärin Nicola, die Ihnen den Fragebogen gerne zusendet.

Randi arbeitet zusammen mit einem engagierten Team am Forschungsprojekt weiter. Ein Video, das das Verfahren in mehreren Sprachen erklärt, steht nun zur Verfügung. Ich möchte Sie ermutigen, Ihre Patient:innen zur Teilnahme am Fragebogen zu motivieren, um gemeinsam ein besseres Verständnis der Wirkung von Hypnose im klinischen Kontext zu gewinnen. Ein besonderer Dank geht an Angela Cotza für ihre Unterstützung bei der Erstellung der PowerPoint-Präsentation. Wasim Biroumi, der nun die Leitung von CEPE übernommen hat, hat außerdem kurze Videos für soziale Medien produziert, in denen erfahrene Praktiker:innen erklären, was Hypnose ist, und so unsere Online-Präsenz stärken. Glasgow rückt nun in greifbare Nähe. Das Team unter der Leitung von Kathleen Long, der Präsidentin des Kongresses, und Mike Gow ist intensiv mit den Vorbereitungen beschäftigt. Ich möchte Sie ermutigen, Ihre Mitglieder zur Teilnahme anzuregen – sei es als Besucher:innen, Vortragende oder Workshopleitende.

Dort werden auch der nächste Präsident-elect gewählt, Vorstandsmitglieder bestätigt und die Stadt für den kommenden Kongress bestimmt. Ihre Anwesenheit ist sehr willkommen. Wir hatten zudem die Freude, die russische Mitgliedsgesellschaft wieder in unseren Reihen begrüßen zu dürfen – ein Schritt, den wir hoffnungsvoll als Zeichen einer friedlichen Entwicklung in der Region werten. Hypnose kann in vielen Bereichen Anwendung finden – in der Klinik, im Sport und in der Beratung. Manche haben sogar versucht, Hypnose in der Bildung zu etablieren.

Auf Websites und in Werbeanzeigen finden sich Versprechen über gesteigerte Lernleistungen durch Hypnose, für die es jedoch keine Belege gibt. Neu ist dies nicht: Ein Dokument aus dem Jahr 1965 erklärt: „Hypnose und Suggestion bieten ein immenses Erfolgspotenzial im Bereich der Bildung. Die Beweise sind eindeutig. Und doch bleibt Hypnose in diesem Bereich untergenutzt.“Doch einigen war das nicht genug. Sie sahen in der Hypnose nicht nur ein Mittel zur Förderung des Lernens, sondern auch zur „Moralisation widerspenstiger oder lasterhafter Schulkinder“. Dies war die Idee hinter der „moralischen Orthopädie“, die in Frankreich von Schulinspektor Félix Hément vorgeschlagen wurde.Hément folgte dabei dem Vorschlag des jungen Arztes Edgar Bérillon, der aus wohlmeinender Perspektive anregte, „die rebellischsten Schüler mithilfe einer neuen medizinischen Technik – dem wissenschaftlich verbrämten Hypnotismus – wieder in das allgemeine Schulsystem zu integrieren.“ Diese Idee fand damals breite Zustimmung, da Kinder als „gute Subjekte“ für Hypnose galten.Auf dem Kongress, in dem diese Vorstellungen präsentiert wurden, äußerte nur ein Philosoph, Eugène Blum, „die stärksten Vorbehalte gegenüber dieser hypnotischen Pädagogik, die das Kind in eine Maschine verwandelt, seine moralische Freiheit untergräbt und völlig unvereinbar mit kantischer Ethik ist.“ Blum unterschied sorgfältig, was es heißt, ein Kind „widerspenstig“ zu nennen: Handelt es sich um Krankheit – dann sei ärztliches Eingreifen unstrittig – oder um moralisches Fehlverhalten?

In letzterem Fall stellte er humorvoll, aber entschieden die Autorität des Arztes infrage. Er warnte vor Missbrauch der Hypnose und unerwünschten Folgen und betonte den Unterschied zwischen Bildung und „Dressur“. In Anlehnung an die sokratische Mäeutik argumentierte Blum, ein Lehrer solle dem Kind helfen, Autonomie und Persönlichkeit zu entwickeln und hervorzubringen, was bereits in ihm liege. Dieser Ansatz sei unvereinbar mit einem System, das das Kind auf ein automatisches Subjekt reduziere und seinen Willen unterdrücke. Während der Einfluss des Lehrers auch ohne Hypnose gegeben sei, betonte Blum, dass er vom Kind frei angenommen werden müsse, das bewusst bleibe. Er fügte hinzu: So wie man keine Moral lehren könne, ohne die Freiheit zum Falschen zuzulassen, brauche echte moralische Entwicklung Freiheit – nicht bloßen Gehorsam. Blums Sorge galt der Freiheit des Menschen, nicht utilitaristischen Ergebnissen. Seine Haltung war entschieden kantianisch, nicht konsequentialistisch, und wies die Vorstellung zurück, dass nur die Resultate zählten. Der materialistische Ansatz, der Handlungen lediglich als Kausalkette verstand, vernachlässigte die Freiheit des Geistes: „Moral ersetzt durch Hygiene, Bildung ersetzt durch Dressur.“ Kinder, die auf diese Weise erzogen würden, könnten zwar Regeln befolgen, blieben aber „amoralisch“. Blums prinzipielle, auf sokratischer und kantischer Philosophie beruhende Einwände waren einzigartig und mutig. Heute müssen wir als Hypnosefachleute ähnlich wachsam sein. Übertreibungen dessen, was Hypnose leisten kann, falsche Hoffnungen oder unbelegte Behauptungen sind problematisch. Das bedeutet nicht, dass Hypnose nicht hilfreich sein kann: Sie kann Stress reduzieren, Selbstvertrauen stärken und Lernenden helfen, sich auf Aufgaben zu konzentrieren. Eine unserer Aufgaben als Gesundheitsfachleute ist es auch, Eltern, Schüler:innen und Pädagog:innen zu beraten und sie an die Vorsicht zu erinnern, die geboten ist, bevor man Versprechen außergewöhnlicher Ergebnisse Glauben schenkt – genau dies fordert unser Ethikkodex.

Ich wünsche Ihnen eine anregende Lektüre und einen erfolgreichen Neubeginn – voller Energie, Inspiration und kommender Erfolge.

Translated into Spanish by José Cava

Tras estas merecidas vacaciones de verano, les deseo un maravilloso regreso. Que esta nueva temporada les traiga motivación e inspiración renovadas, les ayude a alcanzar sus metas y les abra la puerta de nuevas oportunidades. Y que afronten los próximos meses con energía y entusiasmo. Quiero agradecer a todas las sociedades constituyentes que se tomaron el tiempo para completar el cuestionario que les envié. Si alguno de ustedes aún no lo ha hecho y desea participar, por favor, contacten con nuestra secretaria, Nicola, que con gusto se lo enviará. Randi, junto con un equipo dedicado, está llevando adelante el proyecto de investigación. Ya está disponible un vídeo que explica el procedimiento en varios idiomas. Los animo a motivar a sus pacientes a completar el cuestionario para que todos comprendamos mejor los efectos de la hipnosis en el ámbito clínico. Un agradecimiento especial a Angela Cotza por su ayuda en la producción de la presentación de PowerPoint. Wasim Biroumi, ahora a cargo del CEPE, también ha producido vídeos cortos en redes sociales en los que profesionales con experiencia explican qué es la hipnosis y mejoran nuestra presencia en ellas. Glasgow está ahora a solo unos meses.

El equipo liderado por Kathleen Long, presidenta del Congreso, y Mike Gow está muy ocupado organizando este gran evento. También los animo a inspirar a todos sus miembros a participar, ya sea asistiendo, presentando un taller o dando una conferencia. Será también el momento de votar por el próximo presidente electo, renovar la junta directiva y seleccionar la ciudad sede del congreso. Su presencia es muy bienvenida. También tuvimos el placer de reconectar con la sociedad constituyente rusa, ahora de nuevo en el equipo de ESH, lo que esperamos sirva como precursor de una solución pacífica en la región. La hipnosis se puede aplicar en diversos entornos: clínico, por supuesto, pero también en el deportivo y el de asesoramiento. Algunos incluso han intentado promover la hipnosis en la educación. En sitios web y anuncios aparecen promesas de un mejor aprendizaje mediante la hipnosis, aunque no hay evidencia que confirme su validez. Este uso de la hipnosis en la educación no es nuevo; un documento de 1965 afirma: «La hipnosis y la sugestión ofrecen una inmensa promesa de éxito en el campo de la educación. La evidencia es clara. Y, sin embargo, la hipnosis sigue siendo infrautilizada en este ámbito1». Eso por sí solo podría haber sido suficiente. Pero para algunos, la hipnosis se consideraba una herramienta no solo para la educación, sino también para «moralizar bajo hipnosis a los escolares viciosos o rebeldes». Esta fue la idea detrás de la «ortopedia moral», propuesta en Francia por el inspector de Educación Pública, Félix Hément. Hément siguió la sugerencia de un joven médico, Edgar Bérillon, quien, desde una perspectiva benévola, propuso reintegrar a «los estudiantes más rebeldes al entorno escolar normal» mediante «una nueva tecnología médica, supuestamente otorgándole legitimidad científica: el hipnotismo». Esta idea fue generalmente aceptada, ya que los niños eran considerados «buenos sujetos» para la hipnosis. En el congreso donde se expresaron estas ideas solo un profesor de filosofía, Eugène Blum, expresó «las más firmes reservas sobre esta pedagogía hipnótica, que convierte al niño en una máquina, socava su libertad moral y resulta totalmente incompatible con la moral kantiana». Como verdadero filósofo, Blum distinguió cuidadosamente lo que significaba llamar a un niño «rebelde»: ¿está el niño simplemente enfermo o es moralmente malo? En el primer caso, el niño es un paciente y la intervención del médico es indiscutible. En el segundo caso, Blum, con humor, pero con firmeza, cuestionó la autoridad del médico. Advirtió contra el posible mal uso de la hipnosis y sus efectos indeseables, enfatizando la diferencia entre educación y «formación».

Invocando la mayéutica socrática, Blum argumentó que un maestro debe ayudar al niño a desarrollar su autonomía y personalidad, permitiéndole crear lo que ya lleva dentro. Este enfoque es incompatible con un sistema en el que el niño se reduce a un sujeto automáta, con su voluntad suprimida. Si bien la influencia del maestro es real incluso fuera de la hipnosis, Blum enfatizó que debe ser aceptada libremente por el niño, quien permanece consciente. Añadió que, así como no se puede enseñar verdadera moralidad sin permitir la libertad de hacer el mal, el desarrollo moral genuino requiere libertad, no mera obediencia. La preocupación de Blum era la libertad de la persona, no meros resultados utilitarios. Su postura es firmemente kantiana, no consecuencialista, y rechaza la idea de que solo importan los resultados2.

Su enfoque materialista, que consideraba las acciones como una cadena de eventos, descuidaba la libertad del espíritu: «la moralidad reemplazada por la higiene y la educación reemplazada por la formación. Los niños entrenados de esta manera podrían obedecer reglas, pero seguirían siendo «amorales». La objeción de principios de Blum, basada en la filosofía socrática y kantiana, fue singular y valiente.

Hoy en día, debemos ser así de cautelosos como profesionales de la hipnosis. Exagerar los logros de la hipnosis, generar falsas esperanzas o hacer afirmaciones sin evidencia científica es problemático. Esto no significa que la hipnosis no sea útil: puede reducir el estrés, aumentar la confianza y ayudar a los estudiantes a concentrarse en las tareas de aprendizaje.

Una de nuestras misiones como profesionales de la salud es también asesorar a padres, estudiantes y profesionales de la educación, recordándoles la extrema precaución que se requiere antes de aceptar cualquier promesa de resultados excepcionales en este campo; esto es precisamente lo que defiende nuestro código ético.

Espero que esta carta haya sido de su agrado y que les deseo que tengan un buen regreso de vacaciones, lleno de energía, inspiración y logros futuros.

Translated into Italian by Fabio Carnevale

Dopo questa meritata pausa estiva, desidero augurarvi un meraviglioso rientro. Che questa nuova stagione vi porti motivazione e ispirazione rinnovate, vi aiuti a raggiungere i vostri obiettivi e apra la strada a nuove opportunità. Possa ciascuno di voi affrontare i mesi a venire con energia ed entusiasmo. Desidero ringraziare tutte le società federate che hanno dedicato tempo alla compilazione del questionario che ho inviato. Se alcuni di voi non lo avessero ancora fatto e desiderassero partecipare, vi invito a contattare il nostro segretario, Nicola, che sarà lieto di inviarvelo. Randi, insieme a un solerte team, sta proseguendo il progetto di ricerca. È ora disponibile un video che illustra la procedura in diverse lingue. Vi incoraggio a motivare i vostri pazienti a compilare il questionario, così da aiutarci a comprendere meglio gli effetti dell'ipnosi nei contesti clinici. Un ringraziamento speciale ad Angela Cotza per il suo prezioso contributo nella realizzazione della presentazione PowerPoint. Wasim Biroumi, ora responsabile del CEPE, ha inoltre prodotto brevi video sui social media in cui professionisti esperti spiegano che cos'è l'ipnosi, contribuendo così a rafforzare la nostra presenza online. Glasgow è ormai alle porte. Il team guidato da Kathleen Long, presidente del Congresso, insieme a Mike Gow, è al lavoro per organizzare un grande evento. Vi invito a incoraggiare tutti i vostri membri a partecipare — come uditori, relatori o conduttori di workshop. Sarà anche il momento di votare il prossimo presidente eletto, rinnovare i membri del consiglio e scegliere la città che ospiterà il prossimo congresso. La vostra presenza sarà molto gradita. Abbiamo inoltre avuto il piacere di riallacciare i rapporti con la società federata russa, ora nuovamente parte dell'ESH, un segnale che speriamo possa preannunciare una risoluzione pacifica nella regione.

L'ipnosi può essere applicata in vari ambiti — clinico, naturalmente, ma anche sportivo e di counseling. Alcuni hanno persino tentato di promuoverne l'uso in campo educativo. Promesse di un apprendimento potenziato attraverso l'ipnosi compaiono su siti web e pubblicità, sebbene manchino prove scientifiche a sostegno di tali affermazioni. L'uso dell'ipnosi nell'educazione non è però una novità: già un documento del 1965 affermava che "l'ipnosi e la suggestione offrono immense promesse di successo nel campo dell'educazione. Le prove sono chiare. Eppure, l'ipnosi rimane sottoutilizzata in questo ambito". Tutto ciò, di per sé, sarebbe già sufficiente. Ma per alcuni, l'ipnosi era considerata uno strumento non solo educativo, bensì anche morale: "moralizzare sotto ipnosi quei bambini che si mostrano viziosi o recalcitranti".

Fu questa l'idea alla base dell'"ortopedia morale", proposta in Francia dall'Ispettore dell'Istruzione Pubblica, Félix Hément. Hément seguì le indicazioni di un giovane medico, Edgar Bérillon, che — con intenzioni apparentemente benevole — propose di reintegrare "gli studenti più ribelli nell'ambiente scolastico comune" attraverso "una nuova tecnologia medica, dotata di presunta legittimità scientifica: l'ipnotismo". Questa proposta trovò consenso, poiché i bambini erano considerati "buoni soggetti" per l'ipnosi. Nel congresso in cui queste idee vennero esposte, solo un professore di filosofia, Eugène Blum, espresse "le più forti riserve nei confronti di questa pedagogia ipnotica, che trasforma il bambino in una macchina, ne mina la libertà morale e appare del tutto incompatibile con la morale kantiana". Da autentico filosofo, Blum distinse con precisione cosa significasse definire un bambino "recalcitrante": si tratta di un soggetto malato o di un soggetto moralmente cattivo? Nel primo caso, il bambino è un paziente, e l'intervento del medico è giustificato; nel secondo, Blum — con ironia ma anche con fermezza — mise in discussione l'autorità del medico. Avvertì dei possibili abusi dell'ipnosi e dei suoi effetti indesiderati, sottolineando la differenza tra educazione e addestramento. Invocando la maieutica socratica, Blum sostenne che il compito del maestro è aiutare il bambino a sviluppare autonomia e personalità, permettendogli di far emergere ciò che già è dentro di lui. Un approccio incompatibile con un sistema che riduce il bambino a soggetto automatico, privandolo della propria volontà. Pur riconoscendo che l'influenza del maestro è reale anche al di fuori dell'ipnosi, Blum sottolineò che essa deve essere liberamente accettata dal bambino, che resta cosciente. Aggiungeva inoltre che, così come non si può insegnare la vera moralità senza concedere la libertà di sbagliare, lo sviluppo morale autentico richiede libertà, non mera obbedienza. La preoccupazione di Blum era la libertà della persona, non l'efficacia dei risultati. La sua posizione era pienamente kantiana, non consequenzialista: rifiutava l'idea che contassero solo gli esiti. L'approccio materialista, che riduceva le azioni a una catena di eventi, trascurava la libertà dello spirito: "la moralità sostituita dall'igiene e l'educazione dall'addestramento". I bambini formati in questo modo potevano obbedire alle regole, ma restavano "amorali". L'obiezione di Blum, fondata sulla filosofia socratica e kantiana, fu tanto solitaria quanto coraggiosa.

Oggi, come professionisti dell'ipnosi, dobbiamo esercitare una cautela simile. Sovrastimare ciò che l'ipnosi può ottenere, alimentare false speranze o avanzare affermazioni prive di fondamento scientifico è problematico. Ciò non significa che l'ipnosi non possa essere utile: può ridurre lo stress, aumentare la fiducia e favorire la concentrazione nello studio. Uno dei nostri compiti, come professionisti della salute, è anche quello di consigliare genitori, studenti e operatori del mondo della formazione, ricordando loro quanto sia necessaria un'estrema prudenza prima di accettare qualsiasi promessa di risultati eccezionali in questo campo — come espressamente prevede il nostro codice etico. Vi auguro una buona lettura e un rientro pieno di energia, ispirazione e nuovi traguardi.

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Editor's Letter
KATHLEEN LONG



As editor of the ESHNL I get quite excited to be the first to read some of the fantastic articles from our contributors. This autumn ESHNL is no exception with the variety of different perspectives on hypnosis and the news that comes in regularly from our constituent societies.

Our President Gerard Fitoussi has wise words for those who full of enthusiasm for the benefits of hypnosis sometimes ignore the need for good foundations and research. Gerard also welcomes the Russian society and introduces Wasim Biroumi as head of CEPE and encourages us all to take part in the ESH Research project. The French Corner lets us know about a day dedicated to Jean-Martin Charcot (1825–1893), on 22nd November 2026 and Gerard also reviews Peter Naish's book, Hypnosis, Psychosis, and the Consciousness Conundrum. The article by Sophie-Richet Jacob - Trauma Treatment in Older Adults: Integrative and Somatic-Hypnotic Approaches give treatment options and a clinical case.

Peter Naish in the pursuit of research asks us to try and tickle ourselves. Not something I recommend you do in public! As he predicted it is not possible! An equally thought-provoking Public Perceptions and Cultural Context of Hypnosis: Findings from a Survey Conducted in Milan (2017) tells us about the myths still attached to hypnosis by the public and how medical application of hypnosis can change the public's perception for the better. There is a report from the 1st Consensus Meeting on Dental Hypnosis & Therapeutic Communication in Dentistry that took place on August 27–28, 2025, at theTheodor Fontane Brandenburg Medical School (MHB), in Germany. Central Office send us some updated information on becoming an accredited training society.

An Anthropological View of Depression by Dr Teresa Robles, Centro Ericksoniano de México is, as always, insightful and thought provoking. Teresa writes of a metaphor to fill the inner void insightfully described as the emptiness they feel when depressed.

There is the usual update on the ESH XVII Congress in Glasgow and I will update on HWB as so soon as I hear from OSCR on the charity application. As you will all know there has been a huge earthquake in Afghanistan and if any of you have contacts there who would want to access our online resources, please send me the contact details.

Autumn in Scotland is a season of change. The weather changes, the colours in the countryside are spectacular with hues of orange and yellow and fabulous sunsets. It's a peaceful season before the harshness of winter. I wish you all a peaceful autumn and hope that the coming changes are all good.

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Short Report From Central Office

By Nicola McIntyre



Did you know that your Constituent Society can apply to become an Accredited Training Society within ESH?

Your Constituent Society would need to provide training that would consist of Basic Theoretical Hypnosis Training of at least 50 hours and Supervision in Hypnosis applications of at least 50 hours.

Submission would require an application form to be completed along with content of training program, trainee criteria, trainee criteria & trainer CV's and supervisor criteria and supervisor CV's.

This would then all get sent for evaluation and approval by the Committee on Educational Programmes in Europe (CEPE). Once approved a certificate would be issued valid for three years.



If you would like anymore information please contact mail@esh-hypnosis.eu



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Ideas From the World of Clinical Hypnosis



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AN ANTHROPOLOGICAL VIEW OF DEPRESSION

By
Dr Teresa Robles
(Centro Ericksoniano de México)



M.A. in Social Anthropology Ph.D. in Clinical Psychology Training in Hypnosis and Family Therapy
Founder of the Centro Ericksoniano de México and creator of the Ericksonian Psychotherapy approach grounded in Universal Wisdom.
Member of the Board of the ISH for ten years.
Author of more than ten books and audios and articles translated into various languages.
She regularly teaches in different countries around the world.
She has received numerous international awards, including une in 2011 from the Milton H. Erickson Foundation and the Pierre Janet Award for Clinical Excellence from the ISH in 2015.

Introduction

Depression is a universal experience. It is important to distinguish it from sadness caused by life's losses. When this emotion becomes persistent, disabling, and deteriorates a person's health, it is then referred to as depression.

It is among the most frequent reasons for seeking therapy. According to the WHO, it affects approximately 3.8% of the world's population and its incidence increases in the presence of chronic illnesses (Parkinson's disease, diabetes, cancer, multiple sclerosis, epilepsy, etc.).

Globally, it is one of the leading causes of disability, following cardiovascular diseases, cancer, and road accidents.

There is extensive research on depression. Psychiatry classifies it according to its duration, characteristics, and origin. Practically all schools of psychotherapy offer one or more models for addressing it. The anthropological view of depression I propose here is intended only to complement those of other disciplines and schools.

I will also share the points that I consider important to work on, along with some exercises that you may adapt to your own practice.

An Anthropological View

We have all learned things in our environment that generate problems. We absorbed them before having the neurological maturity to analyse, question, or contradict them. They became anchored within us unconsciously, largely through the mirror neurons.

Much of their strength comes from the fact that they entered our minds as hypnotic suggestions—perhaps through proverbs, songs, or phrases repeated by our parents during emotionally intense moments, when we were feeling more than thinking. In other words, we were in a trance.

We learned, for example, that we had to be good, obedient, studious, well-mannered children… in order to be loved. Yet a natural child is anything but that. We were taught to control ourselves, to behave "properly", to aspire to ideals… and of course, we failed on many occasions, because we were going against our nature. Each failure reminded us that we might not be loved in the way we needed—to receive Absolute Love.

We confused ideals with reality, believing that reality had to match the ideal.

That Absolute and unconditional Love we thought was promised does not exist in the external world. No parent can love their child exactly as the child needs. Each person loves in their own way, with their own limitations, character, and interests.

We grew up making superhuman efforts to be the ideal child, sacrificing our spontaneity in order to obtain a love that, in truth, would never come.

And when we realised our parents could not give it to us, we desperately sought it in a partner. But again, there is no person capable of loving us exactly as we need.

We turned relationships into obligations. And when one partner fails to play their role, the other blames them for not fulfilling the implicit or explicit agreement…

This vicious circle is sometimes even reinforced by certain therapists who ask each partner to make a list of things to change in order to please the other, thereby reinforcing the idea that one must go against oneself to be loved.

I believe that behind almost all depressions there is a form of self-abandonment: the person renounces being who they naturally are, represses emotions considered "bad" by society, strives to conform to what they "should" be, and never fully succeeds. And since the reward (ideal love) never arrives, this leads to deep dissatisfaction.

I believe that behind almost all depressions there is also the despair of not achieving or finding that Absolute Love… which we seek outside, even though it does not exist externally. The only person who can give us that absolute, unconditional love, in the way we need, is ourselves.

If we learn to love ourselves unconditionally, we can be at peace with ourselves and receive what others offer as a gift of life, without impossible expectations. Relationships and differences between people then become genuine opportunities.

If we fully accept ourselves, the pressure of the "Must Be" disappears; we can return to being ourselves and enjoy life. And then, depression no longer has a place.

Suggestions for Intervention

Since these learnings are unconscious, hypnosis is a highly effective tool for working with them. Trying to change them through rationality alone would be a long and uncertain path.

We must help the person to distinguish the ideal from reality: to accept that the ideal is a construct that does not exist, whereas they, as a human being, are real—with their qualities, flaws, and limitations.

A first step is to use hypnotic conversation to suggest that there are many ways of being and living that are equally valid.

It is essential to learn to love oneself and to stop expecting from others what they cannot give. A key exercise for this is found in the Manual to Continue Developing in Groups, chapter 2, where I discuss responsibility for our own wellbeing.

In the same chapter there is another very important exercise called The Wall. It addresses the importance of distinguishing between who I am—my desires, projects, tastes, abilities—and what others are and expect from me: their desires, their plans, what they would like me to be. Once this distinction is made, it becomes much easier to see what we truly want to be and to fight for it. Another important exercise is to make two lists:

1. "What I have tried to change so far in order to please others"

2. "What I want to change to please myself"

The simple act of writing these lists, without analysing them, avoids immediately engaging the rational part. Making them alone already fosters awareness.

But breaking free from these rigid patterns is not easy. For years, we have internalised these social mandates and external expectations that lead us to believe there is only one way of Being.

These processes become easier and faster if we entrust the work to Universal or Inner Wisdom, as I explain in the early sessions of the three Manuals for Group Work.

I like to use the following metaphor: within us, there are two parts. One wants to help us be "a good person" according to the rules. The other wants to help us be happy. In a depressed person, the first crushes the second. A useful exercise, therefore, is to invite these two parts to work together, to restore balance.

But even after all this, a person may still have difficulty doing what they want, living as they wish, and making their own decisions. In that case, I ask them to imagine all the important people in their life and, if their beliefs are connected to religion, also religious figures from antiquity. Then, facing them in their imagination, I suggest they ask for permission to be happy and to live life their own way, even if it is different from what is expected.

They should thank those who give them this permission and tell the others: I am letting you know, I am going to be happy living my life differently from what you expect. Now you know. And that's how it will be.

Next, I reinforce this work by asking them to imagine themselves at every stage of their life, from the newborn baby to a very elderly person, fully satisfied with what they have lived. Then tell them all: Now we are going to give ourselves the most important permission of our life. And ask them this question: Shall we give ourselves permission to be happy, to live our life our own way, no matter what others say or think? And frankly, it would be very strange for them to answer no.

Finally, I ask the person to promise them that they will make sure this truly happens.

A Metaphor to Fill the Inner Void

Many depressed people speak of an emptiness within them. To work with this, I use the following metaphor:

We all have a navel on our body, reminding us that we were once connected to our mother in the womb. Eastern traditions believe that we also have a spiritual navel. We were once part of the Whole, like tiny sparks that detached and fell to this Earth in a human body.

We can imagine the Whole as an extremely bright light or an immense golden mass, which, with its rays, sends us to Earth. And upon detaching, we are left with a golden navel, a navel of love, because the Whole is Love.

Sometimes, we retain a memory of what we felt before arriving here, when we were part of the Whole. We have a kind of nostalgia, a sense of lack that we cannot quite explain. And then, when we meet someone with whom we feel a certain connection, we sense the love within that person—that little spark in them, that golden navel. And we think: Ah, this is it, this is what I need! Because we have forgotten where we come from.

So, we fall in love, draw closer to that person, and believe they will fill us, give meaning to our life. But once closer, we realise they do not truly fulfil us… Because in fact, all we detected was another tiny spark like ours. It is not the Whole, that vastness from which we came…

What we seek outside, we already have within us. Love is infinite. Whenever we feel that emptiness, we can close our eyes and repeat this mantra:

"I AM THE EMPTY VESSEL THAT ONLY LOVE CAN FILL"

Breathe deeply and feel Love filling us.

And this exercise can be repeated as often as necessary.

Conclusion

I share this vision of depression with joy, hoping it may enrich your own approach and offer useful insights for your work.

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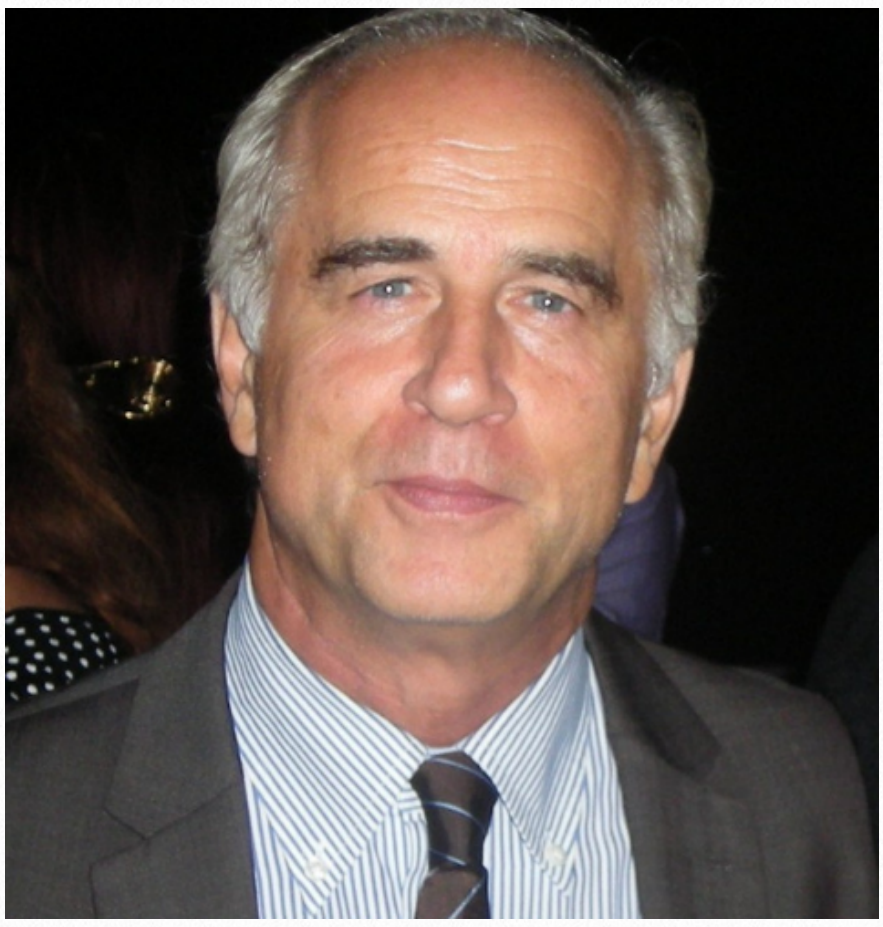
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FROM SUGGESTION TO EVOCATION: THE SILENT REVOLUTION OF HYPNOTIC THERAPIES

By
Camillo Loriedo



The hypnosis of the past, which for countless centuries was sustained first by mystical conceptions and later by the power of suggestion, depended on authority and charisma. It was an artificially constructed hypnosis, built on the formal premises arbitrarily imposed by these very principles.

By contrast, contemporary hypnosis has taken a path in an essentially opposite direction, asserting itself as a natural and widespread condition, not easily distinguishable from the waking state—a condition that can occur spontaneously and repeatedly throughout the day. What was once regarded as an exceptional state has now become what Haley (1978) called the common everyday trance, alternating and integrating with the waking state, moving through a rich spectrum of intermediate gradations (Edelstein, 1982).

The so-called New Hypnosis (Araoz, 1985), grounded in a naturalistic conception of the trance state, no longer envisions the hypnotist as an authoritarian and charismatic figure who applies ritualistic procedures artificially. Instead, it conceives of the hypnotist as a therapist primarily engaged in recognizing and respecting the characteristics of the individual.

Even more significant is the transformation of the subject's role. No longer placed in a position of passivity and submission, as often occurred in the past, the subject is now considered an active protagonist in both the inductive and therapeutic processes. Trance becomes a relational, natural, and physiological experience—an ordinary rather than extraordinary state—capable of mobilizing and making accessible abilities and resources that once seemed unreachable or even nonexistent.

Evocative interventions represent an effective therapeutic tool, capable of avoiding resistance while simultaneously activating internal resources. Evocation may be triggered by a therapist's stimulus containing a rich array of evocative elements, or by a single essential element capable of eliciting multiple responses from the subject. In both cases, the most significant component does not lie in the specific content of the stimulus, but rather in the way the subject responds—allowing new and previously unavailable perspectives to emerge.

Consistent with the principles of Ericksonian naturalistic philosophy, therapy based on evocation reaffirms the centrality of the subject and the therapist's trust in the client's experiential participation in the therapeutic process. Other essential components include this very trust—which fosters a particularly solid therapeutic relationship—the evocation of emotions that are usually unexpressed, within a condition of optimal safety, and the recognition of the subject's identity and uniqueness. While it cannot be said that Erickson himself frequently used the term evocation, numerous authors have made either implicit or explicit reference to it when describing the operational methods, attitude, and naturalistic perspective characteristic of the Ericksonian approach. To mention only a few: Erickson, Rossi, & Rossi (1976); Zeig (1980); and Zeig & Tanev (2019). Not all of these authors used the term evocation in its most explicit form. Other terms employed with an equivalent meaning and similar intent include activate, arouse, elicit, bring forth, facilitate—and, most frequently of all, elicit.
It is, however, interesting to note that over time, the word evocation has appeared with increasing frequency in the Ericksonian literature.

The decisive step in this direction came from Jeffrey Zeig, who, after informally introducing the concept of Evocation in his seminars, began publishing works emphasizing the centrality of Evocative Communication (Zeig & Tanev, 2019), asserting its essential nature: "Hypnosis is defined within the context of a relationship, just as love is defined within the context of a relationship. To evoke love, evocative communication is essential. Likewise, to evoke hypnosis, evocative communication is essential, because the goal is to evoke a change in the client's state."

Zeig's position is to view the evocative approach as an orientation in which experiential realities are brought forth, rather than concepts explained — to evoke rather than to inform. In his own words (Zeig, 2019):"The essence of the Ericksonian evocative approach is to consider experience first, while information is 'served' afterward. Thus, information can be the dessert, not the main course."

Up to this point, evocative communication, widely employed by Erickson, had been regarded as a particularly effective mode of interaction within both hypnotic and psychotherapeutic contexts — one capable of eliciting images, emotions, and internal resources, with the significant advantage of avoiding the generation of resistance in the subject. In Zeig's vision, however, evocation is no longer conceived as a technique to be used occasionally (especially when resistance is anticipated), nor merely as one of many aspects to consider during therapy. From this point onward, Zeig proposes that evocation should be seen as the most important component — the main course — of the Ericksonian perspective itself.

At the heart of the evocative approach lies the refined use of symbolic and narrative language, understood not merely as a vehicle of communication but as a transformative instrument.

Therapeutic narration — encompassing analogical stories, metaphorical imagery, and symbolic constructions — functions as a catalyst for internal restructuring, capable of triggering processes of profound change.

As Alter (2025) highlights, clinical hypnosis employs metaphor and storytelling to redefine the narrative fabric of the self: these evocative forms activate neural circuits involved in brain plasticity and the modulation of subjective experience. From this perspective, the intentional integration of narration — and especially of metaphor — represents the essential fuel of hypnotic transformation.

Milton Erickson himself encouraged therapists to master the full palette of communication — words, rhythm, tone, gestures, posture — in order to elicit emergent meanings, not directly transmitted but co-constructed within the clinical encounter. In this view, the evocative hypnotherapist becomes an artisan of the sign, where every communicative element functions as a referential cue — echoing Peirce's semiotic insight that a sign is not a static representation but a dynamic component of a triadic process (sign, object, interpretant).

Within this process, meaning is not fixed but continuously generated and transformed through the interpreter's experiential engagement.

Finally, both in theory and in clinical practice, one must not overlook the process of reciprocal evocation between subject and therapist.

The therapist must ask themselves what the patient has evoked in them, and—when appropriate—share and utilize this awareness to generate further evocative processes.

We believe it is particularly important that full historical credit be given to Erickson's naturalistic approach for having restored to hypnosis a dignity and efficacy that are not the result of manipulative interventions or arbitrarily induced alterations.

We also believe that the decline of suggestive hypnosis and the progressive affirmation of evocative hypnosis within the scientific community represent the clearest testimony to a silent revolution—one that is leading contemporary hypnosis toward the fulfillment of its own evolution, both epistemologically and clinically.

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RESEARCH AND HYPNOSIS: TOWARD A NEW CLINICAL AND NEUROSCIENTIFIC PARADIGM. THE AI PERSPECTIVE

By
Fabio Carnevale

Over the past two decades, research on hypnosis has undergone a profound transformation. What was once viewed as a marginal or suggestive phenomenon has become one of the most fertile fields for understanding consciousness dynamics, brain plasticity, and mind–body regulation. This epistemological shift arises from the convergence between the clinical study of subjective experience and the methodological rigor of neuroscience. Neuroimaging techniques such as fMRI, high-density EEG, and TMS have shown that hypnosis is not a mere state of suggestibility but a distinct cognitive configuration characterized by reduced connectivity between the default mode network and executive control regions, increased activation in the *anterior cingulate cortex* and *insula*, and a temporary disintegration of the narrative self (Oakley & Halligan, 2013; Terhune et al., 2017). These findings have reshaped clinical research, shifting the focus from whether hypnosis "works" to how the mind constructs, modulates, and transforms experience through the hypnotic process. Contemporary hypnosis research has thus become a science of experiential modifiability, in which quantitative data intertwine with phenomenological observation and the clinician becomes both facilitator and investigator of emergent processes within the therapeutic encounter. The methodological landscape has expanded beyond the laboratory toward transdisciplinary approaches that treat the clinic itself as an empirical field. Evidence is no longer conceived as the repetition of identical events but as the recognition of patterns within complex adaptive systems. Modern techniques such as real-time neurofeedback, dynamic causal modeling, and hyperscanning demonstrate that change arises through reciprocal neural coupling—a synchrony between brains mirroring empathic attunement. Within this perspective, the therapeutic dialogue itself becomes data: micro-oscillations in tone, pause, and gesture constitute measurable correlates of affective regulation and intersubjective coherence. Hypnosis thus emerges as a laboratory of intersubjectivity, integrating neurophysiological, linguistic, and experiential dimensions. Artificial Intelligence further extends this frontier. Machine learning algorithms now identify latent dimensions in clinical communication, tracing shifts in prosody, semantic density, and emotional resonance throughout hypnotic dialogue.

When used ethically, such tools offer not a mechanization of therapy but a new mirror for the clinician's intuition. In research, AI-driven analyses of EEG and fMRI data reveal that hypnosis involves a reorganization of predictive processing rather than suppression of executive control. This view aligns with the theory of active inference (Friston, 2018), where consciousness is understood as a continuous process of prediction and revision.Hypnosis, in this light, represents a temporary relaxation of predictive hierarchies, enabling new meanings and perceptual configurations to arise—both neurobiological and narrative in nature. For the clinician, these findings redefine what it means to conduct hypnosis. The hypnotic setting becomes less a site of suggestion and more a context of relational modulation, where language, emotion, and physiology form a unified ecology of change. This resonates with Bateson's (1972) and Rossi's (2002) ecological models, in which every communicative act reorganizes both neural and experiential systems.

The future of hypnosis research thus lies in hybrid methodologies capable of capturing the living texture of transformation—combining neurophysiological monitoring with micro-phenomenological interviews, integrating computational models with narrative analysis, and fostering dialogues between neuroscience and the humanities so that the meaning of experience is not lost in the measurement of its correlates. Ultimately, this evolution is not merely technological but epistemic and ethical: it recognizes the clinician as both observer and participant, the brain as both biological substrate and narrative field, and research as a co-creative act between science and subjectivity.

What AI brings to hypnosis research: techniques and early results

Three classes of AI methods have proven particularly influential in recent hypnosis studies. Machine learning applied to electrophysiology (EEG): Researchers have used supervised and unsupervised ML models to extract EEG features that correlate with hypnotic depth, susceptibility, and specific experiential states. Studies report that features such as gamma power, betaenvelope correlations, and networkconnectivity metrics can be combined by classifiers (random forests, SVMs, and more recently deep networks) to discriminate hypnotic from baseline states and to provide continuous estimates of “depth.” These approaches enable objective, timeresolved quantification of hypnosis that complements selfreport and behavioral scales. Representation learning and crosssubject models:

Autoencoders and other representationlearning architectures have been used to capture latent EEG patterns across participants and, in some pilot work, to explore synchrony or similarity between hypnotist and subject brain states. Such latent representations can reduce dimensionality and highlight features that generalize across sessions—an important step toward robust biomarkers. Pilot preprints and conference papers have shown encouraging but preliminary results. Natural language processing and behavioural data mining: NLP methods applied to clinical notes, session transcripts, and selfreport measures allow largescale, retrospective extraction of outcomes, adverse events, and contextual moderators of hypnotic interventions. Work in mentalhealth NLP demonstrates that automated text analysis can flag symptom trajectories and predict risk when combined with structured data; similar pipelines are being adapted to psychotherapy and hypnosis datasets to study effectiveness and safety outside randomized trials.

EMERGING DIRECTIONS IN HYPNOSIS RESEARCH

Dimension	Traditional Approach	Contemporary Paradigm	Clinical and Research Implications
Epistemology	Mechanistic, reductionist	Systemic, ecological, neurophenomanological	Integrates subjective and objective data
Focus of Study	Suggestibility, behavioral response	Consciousness modulation, experiential plasticity	Hypnosis as transforma- tion of predictive and
Methodology	Controlled laboratory experiments	Hybrid designs (EEG, fMR), qualitative interviews)	Combines quantitative precision with phen-
Clinician’s Role	External observer of operator	Co-researcher and co-participant	Emphasizes relational attunement and
Tools and Technologles	Behavioral measures, scripts	Neurofecdback, hyperscan- ning, AI-based semantic and affective analysis	Enables multimodal exploration of the hypnotic field
Concept of Evidence	Replicability and control	Complexity, emergence. and pattern recognition	Redefines validity through coherence acress
Therapeutic Model	Directive, suggestion- centered	Ecological, dialogical, embodied	Views hypnosis as a context of co-created
Ethical Orientation	Researcher neutrality	Reflexive, relational accoun-	Recognizes the mutual transformation of

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https://asch.net/newsletterarticle/artificialintelligenceinclinicalhypnosisadeeperdive/?utm_source=chatgpt.com "Artificial Intelligence in Clinical Hypnosis: A Deeper Dive"

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TRAUMA TREATMENT IN OLDER ADULTS: INTEGRATIVE AND SOMATIC-HYPNOTIC APPROACHES

By
Sophie-Richet Jacob



Sophie-Richet Jacob is a clinical psychologist in a French university hospital, specialising in geriatric mental health and trauma care. Her work focuses on integrative, non-pharmacological approaches including hypnosis and somatic therapies.

Introduction

Post-traumatic stress disorder (PTSD), as defined in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), involves exposure to death, serious injury, or threats to physical integrity, accompanied by a reaction of intense fear, helplessness, or horror. While much of the literature has focused on trauma in younger populations, PTSD in older adults remains under-recognised and often manifests atypically. This paper aims to (1) contextualise trauma treatment within historical and contemporary theoretical models, (2) describe the specificities of PTSD presentation in older adults, and (3) propose an integrative treatment framework grounded in hypnosis, somatic regulation, and narrative reprocessing.

Historical and Theoretical Background

Pierre Janet (1889), a French psychologist and student of Charcot, was among the first to conceptualise trauma as a dissociative response to overwhelming physical and emotional stimulation. According to Janet, the traumatic memory is not verbally encoded but is imprinted in the body. The excess stimulation leads to a dissociation that isolates the conscious awareness linked to the traumatic memory, acting as a foreign body within the psyche and producing maladaptive automatic behaviours. Janet employed hypnosis to alter the subjective experience of the traumatic event, enabling the realisation of previously inhibited actions through reparative scenarios.

Peter Levine later proposed three fundamental responses to danger: fight, flight, and freeze. Trauma, he argues, occurs when the freeze response is paired with fear. While initially adaptive, this immobilisation becomes pathological when it persists beyond the moment of threat. Stephen Porges (2021), through the polyvagal theory, further demonstrated that unprocessed autonomic energy associated with trauma may lead to biological, emotional, and behavioural dysregulation.

PTSD in Older Adults: Clinical Specificities

Among older adults, PTSD symptoms often diverge from conventional diagnostic profiles. Clinical presentations may include chronic fatigue, somatic pain, memory disturbances, and relational withdrawal. The delay between the original traumatic event and its reactivation frequently exacerbates mechanisms of freezing and avoidance. Additionally, historical traumas—such as wartime experiences or forced displacement—may be reawakened by contemporary stressors including confinement, hospitalisation, or sensory loss. An integrative approach, paced to the individual's cognitive and symbolic capacities, is essential.

Stabilisation and Symptom Reduction

In addition to building a therapeutic alliance, Van der Kolk (2014, 2018) emphasised the necessity of establishing internal safety prior to trauma processing. He asserts that the association of intense bodily sensations with experiences of comfort and security lays the foundation for self-regulation. Accordingly, patients are systematically guided to construct an internal 'safe place', rooted in embodied and affective experiences.

Processing of Traumatic Memories

Several complementary methods are employed:Eye Movement Integration (EMI): Based on Beaulieu's protocol (2013), this technique uses slow bilateral eye movements during memory recall. EMI facilitates the diminution of distressing images, emotions, and bodily sensations, and aids in the release of frozen autonomic energy.

Conversational Hypnosis: In line with Janet (1889) and Brassine (2023), conversational hypnosis is used to symbolically transform traumatic content. Patients are invited to reduce and externalise the traumatic scene, for instance by visualising it on a small screen, and to introduce reparative elements. Completing a previously inhibited action (such as fighting back or fleeing) constitutes a symbolic 'act of triumph' (Ogden, 2021). This may include combat, flight, or sensory regulation through modifications of the VAKOG modalities.

Somatic Approaches:

1. Haptic Gamma Embodiment (HGE), developed by Marcello Muniz, focuses on safety, bodily anchoring, spatial orientation, and multisensory support.

2. Levine's Pendulation involves alternating the patient's focus between a zone of bodily discomfort and an area of comfort. Clinically, many patients appear to release the residual autonomic energy (described by Porges) via the feet, reported as tingling, cold, warmth, or tremors.

3. Sensorial Focusing engages the body as the primary mediator of trauma integration. Levine (2019) reminds us that trauma cannot be healed through cognition alone; sustainable resolution requires the integration of both sensations and emotions.

Clinical Vignette: Trauma Following Domestic Violence

A 78-year-old female patient presented with persistent anxiety, restricted mobility, and post-fall syndrome following an attempted homicide by her former partner. Bilateral movements were used to initiate trauma processing. Through conversational hypnosis, she was guided to symbolically alter the traumatic memory by imagining her aggressor trapped inside a small snow globe. She then enacted a defensive gesture, miming the act of crushing her attacker. Targeted bodily mobilisation (fist compression, grounding through the feet), combined with bilateral stimulation, induced somatic discharges (tremors, tingling). The patient reported significant relief after the first session, confirmed at the second session. In cases of hospitalisation or reduced imaginative capacity, symbolic tools such as Playmobil™ figures are used to assist with narrative transformation.

Discussion

Clinical observations suggest that effective trauma resolution in older adults involves two key mechanisms: (1) the release of blocked bodily energy and (2) the transformation of the traumatic narrative. These processes contribute to the reduction of distressing sensations, emotions, thoughts, and images associated with the traumatic memory. Tailoring interventions to the neurocognitive resources and emotional rhythms of older patients is fundamental to therapeutic success.

Conclusion

The treatment of PTSD in older adults necessitates a nuanced approach integrating bodily, emotional, and symbolic dimensions. Hypnosis and somatic therapies offer valuable means for facilitating the resolution of frozen trauma responses and fostering narrative reintegration. Further research, particularly controlled longitudinal studies, is needed to assess the long-term efficacy of these interventions in geriatric populations.

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PUBLIC PERCEPTIONS AND CULTURAL CONTEXT OF HYPNOSIS: FINDINGS FROM A SURVEY CONDUCTED IN MILAN (2017)

By
Živný, Cavagni, Veselá, Boschek

Introduction

Hypnosis, derived from the Greek word hypnos meaning “sleep,” has long been a subject of fascination and controversy. Popular culture and historical misconceptions have contributed to the belief that hypnosis involves unconsciousness and absolute submission to the hypnotist’s authority.

In reality, hypnosis is a psychophysiological state characterized by focused attention, increased suggestibility, and altered perception, without the loss of awareness or volition (Oakley & Halligan, 2013). Despite substantial evidence demonstrating its therapeutic value in medicine and psychology (Montgomery et al., 2010; Lynn & Kirsch, 2006), hypnosis continues to be burdened by cultural myths and public prejudice. The aim of this study was to explore public beliefs about hypnosis, identify prevalent misconceptions, and examine cultural
differences in hypnotic practice.

Methods

In 2017, a structured survey was conducted in Milan, Italy. A total of 130 respondents (50 male, 80 female) were asked to answer
questions regarding:

1. Their general understanding of hypnosis.
2. Whether they believe hypnosis is equivalent to sleep.
3. Whether hypnosis entails loss of consciousness and control.
4. Whether a person can be hypnotized against their will.
5. Their willingness to undergo hypnosis by a trusted physician.

Responses were analyzed descriptively for gender differences and thematic patterns.

Results

Survey responses:

1. General understanding of hypnosis: Yes 93%, No 7%
2. Hypnosis equivalent to sleep: Yes 45%, No 46%, Not sure 9%
3. Hypnosis entails loss of consciousness/control: Yes 65%, No 24%, Not sure 11%
4. Can a person be hypnotized against their will: Yes 65%, No 24%, Not sure 11%
5. Willingness to be hypnotized by a trusted physician: Yes 47%, No 46%, Not sure 7%

Key findings:

- Misconceptions: The majority of participants believed that hypnosis involves loss of consciousness and voluntary control, and that an individual can be manipulated against their will.
- Cultural roots of myths: The etymology of the word hypnosis (hypnos, “sleep”) contributes to misunderstandings.
- Willingness to undergo hypnosis: Despite concerns, many respondents indicated that they would undergo hypnosis if performed by a physician they trusted.
- Gender differences: No statistically significant differences were found between male and female responses.

Discussion

The findings confirm that misconceptions about hypnosis are widespread, even among educated populations. These myths appear to be reinforced by cultural and historical narratives, particularly the association with sleep and loss of volition. From a cross-cultural perspective, the practice of hypnosis varies depending on prevailing educational and social traditions. In societies with authoritarian upbringing models (e.g., former USSR, certain Arab countries), directive techniques tend to predominate. By contrast, in regions influenced by liberal pedagogical models (e.g., Western and Central Europe, North America), indirect Ericksonian techniques are more common.

Acceptance of hypnosis also differs globally. It has strong roots in the Czech Republic, France, Austria, Germany, and the United Kingdom, and is especially widespread in the United States, where public prejudice is minimal thanks to influential hypnologists such as Barber, Erickson, Hilgard, and Kline. Russia continues to maintain a strong hypnological tradition, while Israel regulates hypnosis strictly by law, limiting its practice to licensed physicians and psychologists.

Conclusion

This survey demonstrates that public understanding of hypnosis remains strongly influenced by myths and misconceptions, particularly regarding loss of consciousness and autonomy. Nevertheless, trust in medical professionals increases acceptance of hypnosis as a therapeutic intervention. These findings underscore the need for systematic public education about hypnosis, its clinical applications, and its scientific foundations. By dispelling misconceptions, the therapeutic potential of hypnosis can be more fully realized across diverse cultural contexts.

The European Society of Hypnosis could in the future exert more influence on the relevant authorities within the European Union, achieve legal recognition including ethical standards, and systematically strive for the application of hypnotic techniques not only in healthcare but also in education, sports, and the military.

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The World of Research



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Research Reflections

By Peter Naish

It is generally accepted by today's researchers that the brain is a prediction machine. If you are not familiar with the concept it may sound as if I am suggesting that the brain knows which horse is going to win the next race. You may well be thinking, "Hmm, it's not very good at it!" The time scale of the predictions I have in mind is not the duration of a race, nor even as long as a minute. It is probably of the order of a second or less, depending upon the situation. What use is that? Well, our interaction with the world would be far less efficient without it.

By the time we managed to deduce that we were spilling our drink, for example, the entire contents could be on the floor, and chatting with someone about the accident would be impossibly slow while we worked out the meaning of each word as an independent utterance, rather than part of a predictable sentence.

It was presumably evolutionary pressure to be as quick as possible that pushed animals beyond simply registering stimuli; they evolved to 'get ahead of the game', so that the merest confirmatory hint that things were progressing as expected would be sufficient to move on to analysing and predicting the next stimulus. Whether it is the laws of physics, the norms of animal behaviour, or the rules of the language we use, our world is very rule-bound, very predictable. It would be silly not to make use of all this predictability.

Of course, life is not 100% predictable and occasionally, in our haste, we hear what we expected to hear, or do a 'double take' when something turns out not to be what we thought. These mistakes are a reminder of how we process incoming information from the senses, but we make such errors surprisingly infrequently. We are remarkably good because we can adjust the ratio of the two sorts of information we use: between the prediction, which is already processed, and the sensory information which requires processing.

We can't simply rely on the prediction, but on the other hand, if we process everything thoroughly and refuse to be influenced by any predictions as to what it might be, then it will be very slow. How much do we permit each route to define our experience? Well, it depends on the circumstances. If you are in a bit of a hurry, and the situation is very familiar, then you can afford to lean more heavily on the predictions. If, on the other hand, the situation is unfamiliar, and is also an occasion when you can't risk being wrong, then you are likely to be rather more slow and deliberate, placing less weight upon the prediction route. Of course, these adjustments are made largely outside conscious awareness.

So, how does all this relate to hypnosis? Some people are able use prediction alone, remaining oblivious to any conflicting signals from the senses. They base their predictions upon the suggestions they receive: we call these people 'Hypnotic Highs'. If we tell them that their hand will start to feel numb, then they believe that to be the case. Their

expectations are so strong that they place their reliance entirely upon the prediction, and as a result it is the sole element used in generating their experience. Only a very few ‘Hypnotic Virtuosos’ can achieve this kind of effect for every type of suggestion (I referred to one in my last Newsletter piece) but a sizeable number can certainly do very well.

From a clinical perspective it is something of a surprise that clinicians achieve better results than would be expected on the grounds of hypnotisability. In other words, if volunteers are tested in a university setting, which is the case for much of the research in this field, then it is found that there are plenty who don’t respond sufficiently well for us to believe that they are ignoring information from their senses.

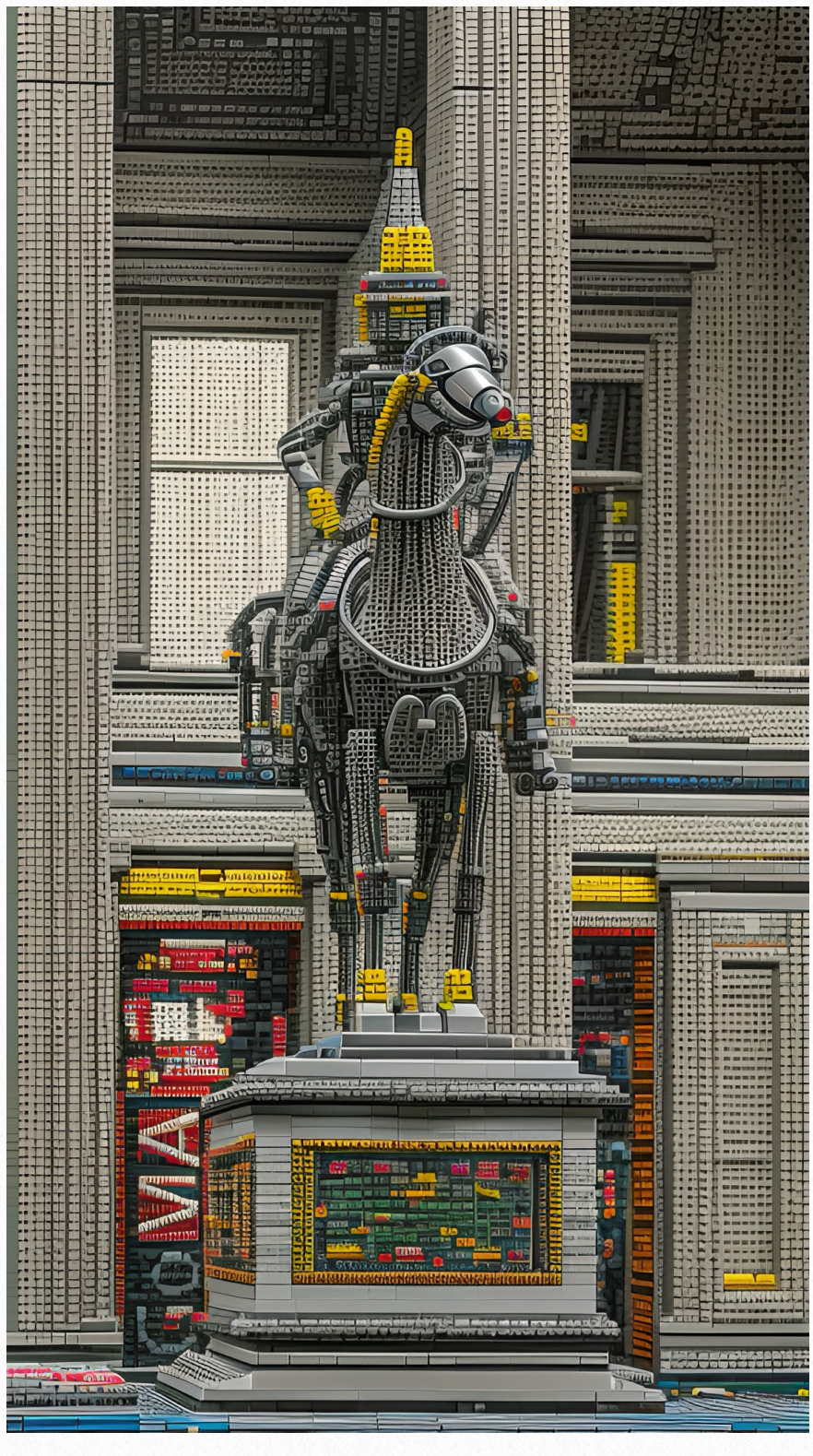
However, ask a clinician what proportion of patients/clients benefit from hypnosis, and the answer is remarkably high. Of course they have the occasional failure, but that is very much the exception. If the patients are drawn from a similar population to the university volunteers, then we would expect rather more failures. There are two possible explanations, the first being that the populations are probably not entirely similar. However, there is another, more important difference: the overall setting.

Universities encourage a degree of scepticism and foster an atmosphere of independent thought. In contrast, medical doctors tend to be seen as ‘people who know’; they are trusted and believed. They preside over an environment in which a patient can forget her/his senses, because the doctor knows best; the prediction route is relied upon. We had better conclude with a little research – fun research! It is generally the case that we can’t tickle ourselves; it needs someone else to do it. However, if you have managed to convince yourself that it is not you who is initiating the tickling movement but someone else who is causing your hand to move, then in those circumstances it should feel more ticklish. Vince Polito and his colleagues in Australia (Polito et al., 2025) tried this with hypnotised individuals, and sure enough, when hand movements were not believed to be self-initiated, the resultant tickling sensation was rated as more intense. There was more to their research than this brief account captures, but that is the key message.

Hypnosis is so fascinating!

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UPDATE FROM ESH RESEARCH PROJECT MAY 2025

By
Randi Abrahamsen



We are still including more patients from various countries, but we desperately need more clients/ patients to be included in the project.
The ESH research webpage is now working in Danish, Dutch/Flamish (VHYP), English, French, German, Italian, Spanish, Swedish and Ukrainian. We know, that you all are working for the project in your spare time. We really appreciate your contributions.
We have started to upload all the documents and powerpoints of the different societies on our ESH webpage, so you should be able to find the documents for the research project there.
Angela Cotza from SIPMU, Italy has once again been very effective together with Peter Naish, she made an informative video to recruit clinicians for the research project. The video is now subtitled in the different languages of our societies participating in the project. Angela has also made a great cartoon information video for clients/patients talking about the project in an easy understandable way. This video has different versions with speaking in the different languages of the societies participating in the project.

You can access the video on the ESH Research Project Channel on You Tube with the links from the ESH webpage. We hope that these videos will help to encourage clinicians to participate with their clients/ patients and we are of course are very grateful to Angela for this important contribution.

ESH YouTube channel.

Best wishes
Randi

Med venlig hilsen

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Constituent Societies Overviews



French Corner

By Gérard Fitoussi

Congress

L'AFHYP présidé par le Dr E. Gibert, proposera le 22 novembre une journée exceptionnelle consacrée à la personnalité de Jean-Martin Charcot (1825-1893), figure majeure de la médecine moderne et fondateur de l'école neurologique française. Cette journée aura lieu dans les lieux mêmes où Charcot a travaillé, à L'hôpital de la Salpêtrière

Médecin, enseignant et chercheur, Charcot a profondément marqué l'histoire de la Salpêtrière et de la neurologie, en ouvrant des voies nouvelles dans la compréhension des maladies du système nerveux.

Cette rencontre sera aussi l'occasion de revenir sur son héritage scientifique et culturel, en soulignant particulièrement la place qu'il a donnée à l'hypnose dans ses recherches. À travers ses démonstrations publiques, ses travaux sur l'hystérie et ses débats passionnés avec ses contemporains.

Charcot a contribué à installer l'hypnose comme objet d'étude central au XIX^{e} siècle, influençant durablement aussi bien la médecine que la psychanalyse naissante, la littérature et les arts.

Son influence en France comme à l'étranger a été majeure pour que l'hypnose soit à nouveau reconnue comme une approche légitime par le monde scientifiques et académique

Conférences, discussions et moments d'échange permettront d'explorer l'actualité de cet héritage : comment comprendre aujourd'hui le rôle de Charcot dans la construction du regard médical ? En quoi ses expériences d'hypnose résonnent-elles encore dans notre manière d'envisager la conscience, le corps et la suggestion ?

Une journée pour découvrir ou redécouvrir un médecin visionnaire, dont l'œuvre continue d'inspirer et de questionner.

More info : drgerardfitoussi@yahoo.fr



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French Corner

By Gérard Fitoussi

Book

Peter Naish, Hypnosis, psychosis and the consciousness conundrum, Austin Macauley Publishers, London 2024.

Je voudrais aussi évoquer l'ouvrage de Peter Naish, Hypnosis, psychosis and the consciousness conundrum, qui bien que modeste par sa taille n'en soulève pas moins d'importantes questions.

Le livre est une lecture à la fois intellectuellement stimulante et profondément provocatrice. L'auteur y explore les états altérés de conscience en reliant l'hypnose, la psychose et le fonctionnement cérébral, offrant une perspective originale qui laisse le lecteur avec de nombreuses questions ouvertes. Dès l'introduction, une interrogation cruciale est posée : pourquoi associer psychose, hypnose et conscience dans un même débat ? La réponse est claire et pertinente: ces trois phénomènes remettent en question notre perception de la réalité, chacun à sa manière, avec des degrés de détresse ou de contrôle très différents. De plus, notre compréhension de ces concepts est loin d'être complète. L'idée que l'hypnose peut reproduire certains symptômes de la psychose — par exemple les hallucinations auditives — sans la souffrance psychologique associée, ouvre une voie de recherche éthique et contrôlée sur les états altérés de conscience, offrant aux chercheurs un terrain d'expérimentation riche et sûr.

Les chapitres suivants se distinguent par leur clarté pédagogique. Le style, élégant et précis à l'anglaise, permet "d'entendre la voix" de l'auteur, mais le texte exige une lecture attentive et progressive pour ne rien perdre de la finesse des explications.

La présentation des mécanismes neuronaux, illustrée par des phénomènes comme l'effet McGurk, montre combien même de subtiles discordances sensorielles peuvent tromper notre perception. L'idée centrale qui m'a le plus marqué est que le cerveau ne se contente pas de recevoir passivement le monde : il le prédit. Notre expérience de la réalité devient ainsi une construction faillible, mais profondément humaine. Les chapitres sur l'hypnose et les distorsions perceptives mettent en lumière les frontières floues entre réalité objective et expérience subjective. La corrélation observée entre hypnotisabilité et traits schizotypiques offre un lien fascinant entre neurosciences et psychopathologie.

Une autre section particulièrement marquante est celle consacrée au libre arbitre. L'auteur y discute des expériences de Libet et de l'idée que le libre arbitre pourrait n'être qu'une illusion, même si notre cerveau nous fait croire le contraire. Cette réflexion, à la fois fascinante et déstabilisante, rappelle les propos de Spinoza sur l'illusion de liberté : nous croyons être libres parce que nous ignorons les causes qui déterminent nos actions, et non parce que nous les maîtrisons réellement. (EII prop. XXXV sc) J'ai aussi apprécié le rigoureux ancrage scientifique de l'ouvrage, notamment le choix de ne pas s'aventurer dans les théories quantiques spéculatives de la conscience, souvent trompeuses dans le contexte de l'hypnose. L'auteur ne perd pas non plus le lien avec la clinique : les exemples de la femme pakistanaise "possédée par un djinn" ou de la témoin anglaise des attentats de Londres en 2005 illustrent la jonction entre science et expérience émotionnelle, voire existentielle.

En conclusion, The Hypnosis, Psychosis, and the Consciousness Conundrum est une lecture éclairante et stimulante, qui soulève de nombreuses questions — marque des travaux réellement engageants. Merci à Peter pour ce voyage intellectuel, riche en découvertes et en réflexions.

French Corner

By Gérard Fitoussi

Congress

L'AFHYP will host, in the Salpêtrière Hospital, on November 22 an exceptional day devoted to the figure of Jean-Martin Charcot (1825–1893), a leading personality of modern medicine and founder of the French neurological school.

Physician, teacher, and researcher, Charcot left a profound mark on the history of La Salpêtrière and on neurology, opening new paths in the understanding of nervous system diseases.

This gathering will also be an opportunity to revisit his scientific and cultural legacy, with particular emphasis on the place he gave to hypnosis in his research. Through his public demonstrations, his studies on hysteria, and his passionate debates with contemporaries, Charcot helped establish hypnosis as a central subject of study in the 19th century, exerting a lasting influence not only on medicine, but also on the emerging field of psychoanalysis, as well as literature and the arts.

His impact in France and abroad was decisive in ensuring that hypnosis would once again be recognized as a legitimate approach within the scientific and academic world.

Lectures, discussions, and exchanges will allow us to explore the contemporary relevance of this legacy: How should we understand Charcot's role today in shaping the medical gaze? In what ways do his experiments with hypnosis still resonate with our ways of thinking about consciousness, the body, and suggestion?

A day to discover—or rediscover—a visionary physician whose work continues to inspire and to challenge us.

More info : drgerardfitoussi@yahoo.fr



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French Corner

By Gérard Fitoussi

Book

Peter Naish, Hypnosis, psychosis and the consciousness conundrum, Austin Macauley Publishers, London 2024.

"I would like to mention Peter Naish's book, Hypnosis, Psychosis, and the Consciousness Conundrum, which, although modest in size, nonetheless raises important questions.

The Hypnosis, Psychosis, and the Consciousness Conundrum is an intellectually stimulating and thought-provoking work. The author examines altered states of consciousness by linking hypnosis, psychosis, and brain function, offering a perspective that challenges readers and leaves many questions open.

From the outset, a key question is posed: why discuss psychosis, hypnosis, and consciousness together? The answer is clear and compelling: all three challenge our perception of reality, albeit in very different ways, with varying levels of distress or control.

Furthermore, our understanding of these phenomena is less complete than we might assume. The fact that hypnosis can mimic certain symptoms of psychosis — such as auditory hallucinations — without the accompanying psychological suffering opens an ethical and controlled avenue for research on altered states, providing scientists with a fascinating experimental framework.

The subsequent chapters stand out for their pedagogical clarity. The author's precise and elegant prose allows readers to "hear their voice," though the text requires careful, line-by-line reading to grasp fully the complexity of the arguments.

The explanations of neural function, illustrated by phenomena like the McGurk effect, show how even subtle sensory misalignments can distort perception. What resonated most is the idea that the brain does not passively receive the world — it predicts it. Reality, therefore, becomes a constructed and fallible experience, yet one that is deeply human.

The chapters on hypnosis and perceptual distortion further highlight the blurred boundaries between external reality and subjective experience. The observed correlation between hypnotizability and schizotypal traits provides a fascinating bridge between neuroscience and psychopathology.

The discussion of free will, particularly in the chapter on Libet's experiments, is especially striking. The suggestion that free will be an illusion — even if our brain convinces us otherwise — is both fascinating and unsettling. This resonates with Spinoza's observation that humans mistakenly believe themselves free simply because they are unaware of the causes that determine their actions.

"Men are thus mistaken in thinking that they are free; and this opinion consists solely in their being conscious of their actions, while ignorant of the causes by which they are determined. Their idea of freedom, therefore, is simply that they know no cause for their actions. For they say that human actions depend on the will, but these are mere words, corresponding to no real idea. For what the will actually is, and how it moves the body, no one knows; and those who boast of knowing it, and imagine a seat and dwelling place for the soul, usually provoke either laughter or disgust."» (EII propo XXXV sc). I also appreciated the author's scientific rigor, especially the decision to avoid speculative quantum theories of consciousness, which can mislead rather than illuminate in the context of hypnosis. At the same time, the book remains grounded in clinical reality: examples such as the Pakistani woman "possessed by a jinn" or the English witness to the 2005 London terrorist attacks illustrate the intersection of hard science with emotional and existential experience.

In conclusion, The Hypnosis, Psychosis, and the Consciousness Conundrum is an enlightening and challenging read. It raises numerous questions, which is the hallmark of truly engaging scholarship. Thanks to Peter for this intellectual journey, rich in insight and reflection.

CHP SWEDEN

By
Inger Lundmark

We start a new traumafocused education in hypnosis in august, 200 hrs plus supervison 50 hrs.
We have found a great need for this among our fellow psychotherapist colleagues. (We have a thought that since Sweden wasn´t in the world wars, we have had less training in traumatherapy.)
But, with the large amount of refugees that came to Sweden during 2012 - 2020, we have quickly found ourselves in the need of methods for treating crisis & trauma. Nowadays we have an increased amount of violence, shootings and gangs, which affects the whole society. So our education is systemic, with a neurologic body/mind perspective, and aims to provide professionals with tools for stabilizing and healing treatments.
One of our members, Lina Skantze, has written a new book on shame in swedish; Skam: uplevelse, funktion och behandling.
(Shame: experiences, functions and treatment.)
Her earlier book: Polyvagal teori i psykoterapi, (Polyvagal theory in psychotherapy) was very appreciated and she is one of the teachers in the education mentioned above.
This fall we will hold a public open house, "Hypnotic evening" in order to spread knowledge about clinical hypnosis. We will give short lectures, some little snippets to try, like the lemon exercise and such, we´ll answer questions, inform about the swedish hypnotic app; Hypnosis & Health, and try to wash away some prejudice or preconceived notions about hypnosis, that still exist in Sweden.
We have done" The day of Hypnosis" several times during the years, but this time we will have just an evening in the middle of Stockholm. Apart from that, groups for hypnotic supervison is continuing.
I am also participating in an educational TV-program about couples therapy, where we of course use hypnosis, when needed.
Daniel Cremonini (another teacher from the education) is also participating in TV-programs and pods about hypnosis.
We do have a lot on our plate, besides seeing our patients, but we do enjoy our work and hypnotic lifes and communities.
We look forward to get together in Glasgow next year!

Best regards,
Inger Lundmark
chairwoman of CHP - Center of Hypnosis and Psychotherapy, Sweden.

Fil.Kand, leg.Psykoterapeut, Familjeterapeut, Cert.Hypnosterapeut, Psykoterapihandledare

inger.slussen@gmail.com

Italian Corner

By Fabio Carnevale

It is a period full of commitments and activities for the Italian Society of Hypnosis (SII). The courses of the four-year school for psychotherapists have reached their final trimester.

The advanced training programs (Masters) for psychotherapists are continuing with great success in various Italian cities.

The organizing committee, led by President Camillo Loriedo, is finalizing the arrangements for the XIX Italian Congress, which will take place in Lucca and Viareggio from November 6 to 9.

Meanwhile, preparations are also underway for the XXIII ISH Congress, which will be held in Paestum from September 29 to October 3, 2027.

https://www.societaipnosi.it/xxiii-hypnosis-world-congress-2027/



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German Corner

By Stella Nkenke

Liebe Kolleginnen und Kollegen,

wir würden euch und Sie gerne auf die Möglichkeit hinweisen, wissenschaftliche Arbeiten im Bereich der klinischen Hypnose oder Hypnotherapie in Form eines Posters auf der Jahrestagung der Milton Erickson Gesellschaft (M.E.G.) einzureichen, die jedes Jahr im März in Kassel stattfindet (nächster Termin: 19.-22.3.2026). Einreichungsfrist für die nächste Tagung ist der 05. Januar 2026. Zudem kann jedes Jahr ein Nachwuchsförderpreis für eine Abschlussarbeit (Bachelor-, Master- oder Doktorarbeit) mit empirischer klinischer oder experimenteller Ausrichtung durch die M.E.G. vergeben werden. Bewerbungen dazu sollten an kontakt@meg-hypnose bis zum 31. Dezember 2025 gesandt werden. Mehr Informationen zum Nachwuchsförderpreis können hier eingesehen werden:

https://www.meg-hypnose.de/m-e-g-nachwuchsfoerderpreis/

Für beide Ausschreibungen können Arbeiten in deutscher sowie englischer Sprache angenommen werden.

Mit freundlichen Grüßen

M.E.G.-Geschäftsstelle für den Wissenschaftlichen Beirat der M.E.G.

Dear colleagues,

We would like to bring to your attention the opportunity to submit scientific work in the field of clinical hypnosis or hypnotherapy as a poster at the annual conference of the Milton Erickson Society (M.E.G.), which takes place every year in March in Kassel (next date: 19-22 March 2026). The submission deadline for the next conference is 5 January 2026. In addition, the M.E.G. can award a young talent prize for a Bachelor's, Master's or PhD thesis with an empirical clinical or experimental focus every year. Applications should be sent to kontakt@meg-hypnose by 31 December 2025. More information on the Young Investigator Award can be found here:

https://www.meg-hypnose.de/m-e-g-nachwuchsfoerderpreis/

For both calls, papers can be accepted in German and English.

Yours sincerely

M.E.G.-Office for the M.E.G. Science Council

Eine Initiative des wissenschaftlichen Beirats der M.E.G.
https://www.meg-hypnose.de/ueber-uns/wissenschaftlicher-beirat
Trauma, Trance und Therapie: Der Körper im Fokus
19.-22. März 2026 im Kongress Palais Kassel
www.MEG-Tagung.de
Milton Erickson Gesellschaft für klinische Hypnose e.V.
Waisenhausstraße 55, 80637 München, Germany
tel.: +49-(0)89-340 29 720

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The Second Asian Congress of Clinical Hypnosis in Beijing, China

By
Randi Abrahamsen

I participated in the Asian Congress, which took place on August 14th - 18th 2025. The congress was very well organized with 745 participants, out of these 71 from other countries.

There was a possibility to participate in pre congress workshops with Camillo Loriedo, Woltemade Hartman and Ben Furman and post congress workshops with Mark Jensen, Berhard Trenkle, Viviane Ehret and Stella Nkenke. A warm welcome greeting by the president of the Asian Society Xin Fang, was followed by 12 keynote speakers, a few of them online: Mark Jensen, Jeffrey Zieg, Michal Yapko, Hans Markowitch, Camillo Loriedo, Mehdi Fathi, Giuseppe De Benedettis, Woltemade Hartman, Ben Furman, Xudong Zhao, Buxin Han, Hongfeng Yan, and Jun Gao. Translation was provided simultaneously by earphones between English and Chinese for the keynotes. It was very interesting to get an update of the research in hypnosis and the different perspectives and ways hypnosis is used throughout the world. In the following days the program was very full with 9 options of workshops at the same time. It was often very difficult to choose between the many interesting options. For these workshops there was consecutive translation from English to Chinese and AI generated text form Chinese to English. The workshop participants showed great interest and asked questions eagerly. At the congress dinner there was entertainment with Chinese song, dance and music and a demonstration of Tai Chi. I had the opportunity to travel and see more of China. It was great to get an insight into the old history and experience Chinese culture.





1st Consensus Meeting on Dental Hypnosis & Therapeutic Communication in Dentistry

By
Riccardo Colombo

On August 27–28, 2025, the 1st Consensus Meeting on “Dental Hypnosis & Therapeutic Communication in Dentistry” took place at the Theodor Fontane Brandenburg Medical School (MHB), Campus Brandenburg an der Havel, Germany. The event was supported by the University of Bern, the German Society for Dental Hypnosis (DGZH), and the Brandenburg Medical School, and brought together leading international experts in the field. The conference was a great success, creating a unique atmosphere of scientific exchange and clinical reflection. Its central purpose was to highlight the necessity of concentrating research efforts, to define common needs and directives in both dental hypnosis and therapeutic communication, and to strengthen the foundations for broader recognition of dental hypnosis in medicine and dentistry. The major output, that has been set in motion and is now being opened for consultation, is a consensus report on dental hypnosis (clinical application, ethics, indications, evidence, and future research) and on therapeutic communication in dentistry (with emphasis on anxiety management, paediatric dentistry, and interdisciplinary collaboration).

The program featured keynote lectures in a 5×15 format, interactive workshops, and hybrid sessions with colleagues from abroad, offering a rich platform for dialogue and collaboration. Beyond these immediate achievements, the meeting aims to build stronger academic structures and to encourage multicentric research projects, with a particular focus on anxiety and pain control.Special thanks are due to Prof. Thomas Wolf and Prof. Gerhard Schmalz, whose vision and initiative made this pioneering meeting possible.

The full organizing committee — Dr. Albrecht Schmierer, Dr. Brice Lemaire, Prof. Gerhard Schmalz, Dr. Marcello Romei, and Prof. Thomas Wolf — are warmly acknowledged for their dedication and expertise.

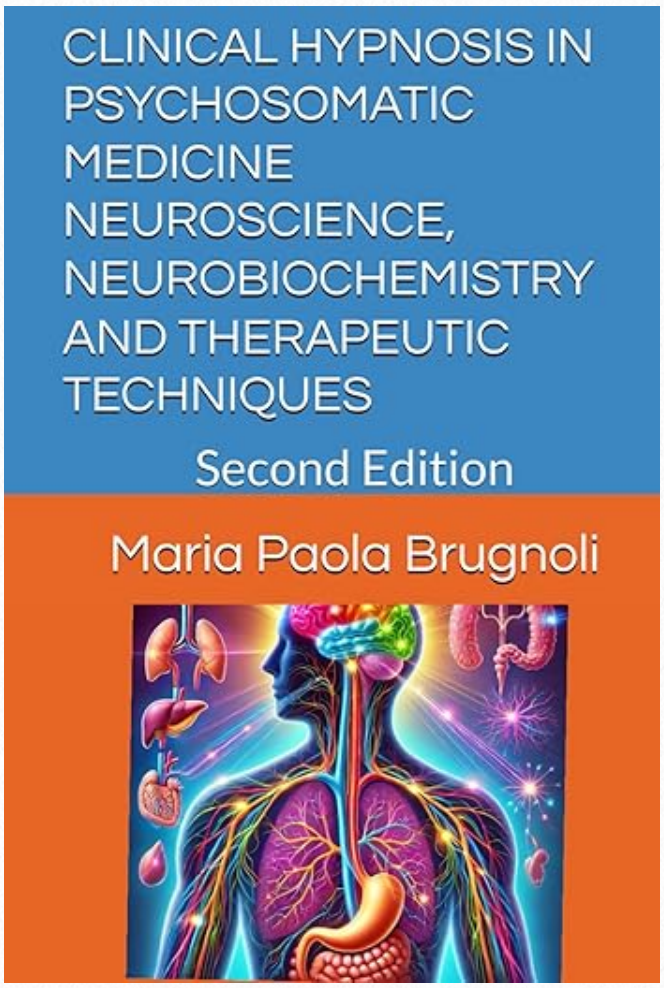
The consensus document is currently under consultation and will be circulated within the international community in the coming months.



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BOOKS

"CLINICAL HYPNOSIS IN PSYCHOSOMATIC MEDICINE. NEUROSCIENCE, NEUROBIOCHEMISTRY AND THERAPEUTIC TECHNIQUES"



It is available for purchase on Amazon.

Clinical hypnosis in psychosomatic medicine is not simply a technique—it is a bridge between neuroscience and the human experience of suffering.Grounded in decades of research, hypnosis has proven to modulate pain, anxiety, and stress-related disorders, while fostering resilience and self-awareness. This book explores clinical hypnosis as a therapeutic tool in psychosomatic illnesses, studying solid neuroscientific and neurobiochemical foundations, supported by a rigorous scientific review.

It demonstrates how hypnosis acts on the patient's nervous system and neurobiological processes, but always with a focus on the person's integral well-being, through humane and caring clinical practice. With clarity and empathy, it shows how hypnosis can transform suffering into a pathway toward healing, dignity, and renewed meaning.

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Past Medical Staff and Researcher at the Department of Anaesthesia, Intensive Care and Pain Therapy, University of Verona.

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Calendar of Events

HYPNOSIS FOR PAIN MANAGEMENT: EFFECTIVE TECHNIQUES FOR HEALTHCARE PROFESSIONALS
For further info or to book:
https://bscah.co.uk/events/hypnosis-for-pain-management-effective-techniques-for-healthcare-professionals/
ESH discount code: esh04
When: **16/10/2025**, 12:00 am

CLINICAL HYPNOSIS IN ACTION: PRACTICAL SKILLS FOR HEALTHCARE PROFESSIONALS
(F2F LIVERPOOL)
For further info or to book:-
https://bscah.co.uk/events/clinical-hypnosis-in-action-practical-skills-for-healthcare-professionals/
ESH discount code: esh05
When: **25/10/2025**, 12:00 am
Details
For further info or to book: https://bscah.co.uk/events/clinical-hypnosis-in-action-practical-skills-for-healthcare-professionals/

II NATIONAL CONGRESS OF HYPNOSIS – ORGANIZED FROM THE BULGARIAN ASSOCIATION OF HYPNOSIS AND HYPNOTHERAPY (NATIONAL CONGRESS)
Venue:
Hotel Anel , Sofia , Bulgaria
Invited Speaker: Consuelo Casula
Main Language Bulgarian
Translations: The English panel of Consuelo Casula will have Bulgarian interpretation on site
Registration: bahh.bulgaria@gmail.com
bahh.bulgaria@gmail.com
Telephone:
+359 885 13 67 40 (secretary of BAHH) &
+359 899 46 90 99 (president of BAHH)
When: 21- 23/11/2025

RESOLVING NEGATIVE EMOTIONS WITHOUT DRAMA: A PRACTICAL APPROACH FOR HEALTHCARE PROFESSIONALS
For further info or to book:
https://bscah.co.uk/events/resolving-negative-emotions-without-drama-managing-phobias-negatively-charged-past-events/
ESH discount code: esh06
When: **22/11/2025**, 12:00 am

HYPNOSIS FOR FUNCTIONAL SYMPTOMS: EVIDENCE-BASED APPROACHES FOR HEALTHCARE PROFESSIONALS
For further info or to book:
https://bscah.co.uk/events/hypnosis-for-functional-symptoms-evidence-based-approaches-for-healthcare-professionals/
ESH discount code: esh07
When: **12/12/2025**, 12:00 am

SMSH ANNUAL CONGRESS
ESH Constituent Society: Swiss Society for Hypnosis (SMSH)
When: **6th to 8th November 2025**
Venue: CH-4710 Balsthal
Invited Speaker(s): diverse
Language: German / single Workshops in English
Translations: no
Fees ESH Constituent Society:
Members
until June 30th, CHF 850.- (single day 450.-)
from July 1st, CHF 1000.- (single day 450.-)
Non-Member:
until June 30th, CHF 975.- (single day 450.-)
from July 1st, CHF 1075.- (single day 450.-)
Registration Website: www.smsh.ch
Email: info@smsh.ch
Telephone: +41 41 281 17 45

XIX CONGRESS OF SII - ITALIAN SOCIETY OF HYPNOSIS -
“OLTRE LE MURA VERSO IL MARE.
UN PERCORSO EVOCATIVO"
When:
06/11/2025 - Lucca (Pre-Congress)
07-09/11/2025 - Viareggio
Hybrid Event: In person:
Lucca (Scuola IMT)
Viareggio (Grand Hotel Royal)
Details:
https://www.societaipnosi.it

Tieteellinen hypnoosi ry:n järjestämä syventämiskurssi
RAPID HYPNOSIS APPROACHES AND INTERVENTIONS
This two-day highly practical and interactive seminar is focused on rapid hypnosis approaches and techniques. You will also gain a practical overview of Hypno-EMDR (no prior experience of EMDR is necessary).
Day one starts with activities to help you brief clients to gain optimum engagement, and is then followed by an exploration of creating and intensifying the hypnotic state using rapid hypnosis inductions and deepeners specifically designed for therapy purposes. We then move on to the application of rapid therapy techniques for habits and behavioural change, as well as techniques for identifying and changing unhelpful beliefs and cognitive distortions.
Day two starts with an exploration of rapid analytical and regression therapy approaches, which is then followed by a practical overview of Hypno-EMDR (no prior experience of EMDR is necessary)..
By the end of the two days participants will have gained the knowledge and skills to hypnotise clients and use hypno-therapeutic techniques to address a wide range of presenting issues.
Further information can be found on link:-
Rapid Hypnosis -esite
When
06/02/2026 - 07/02/2026, 10:00 am - 3:30 pm
Rapid Hypnosis -esite





We would like to invite you to join the new platform for networking in the hypnosis community world-wide: www.whoISHwho.com.

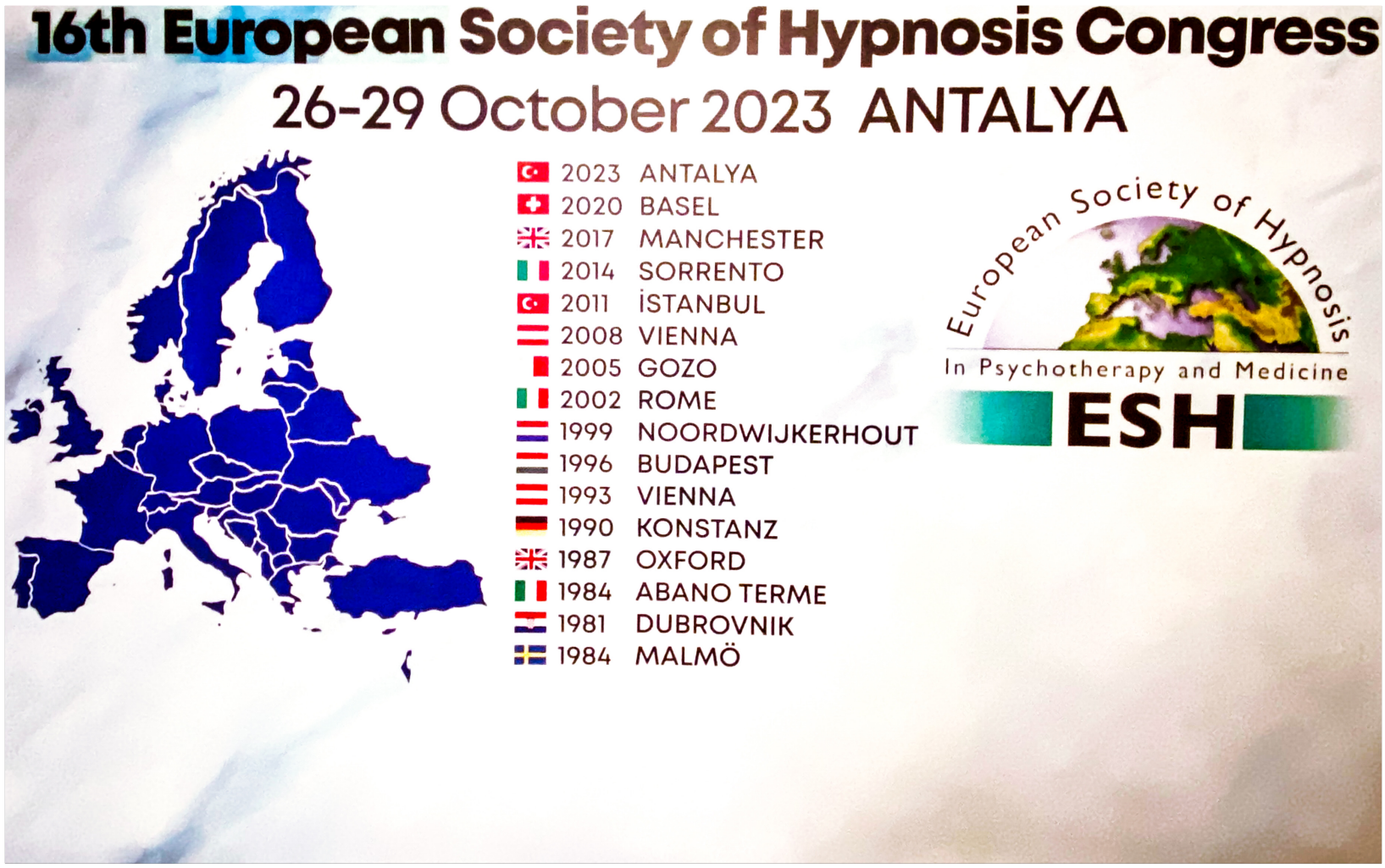
Please send us your CV, photo and if you have also your publication list to us at contact@whoishwho.com.

This platform will also be used for organizing ISH congresses more easily.

In the future, for example, if the planning committee needs to see the CV to learn about the experience of a potential speaker, his or her CV would already be easily available on the whoISHwho platform. Also if you are moderator planning a symposium and want to identify potential co-presenters, you could use the whoISHwho platform to identify theseindividuals. Of course, there are many more possibilities for encouraingnetworking in our community (and getting information about you to otherlike-minded people) for such a system.

You also can upload your profile yourself, which makes it easier for us. But please - do not hesitate to just send us things by email and we will do this for you.

ISH President



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Visuals Fabio Carnevale ©

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