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1. OVERVIEW

This chapter, written by a dentist, gives a short overview of practical techniques for using hypnosis in dental practice. The information starts with a comparison of direct and indirect hypnotic techniques. The tasks and contributions of the hypnoassistant are described. The indications and contraindications for the dental use of hypnosis are specified.

Clinicians will learn ways to work rapidly and effectively with various hypnotic techniques, to enable patients with dental fear or phobia to experience pleasant treatment –perhaps for the first time in their life. Finally, the chapter discusses control of body reactions, like gagging or bleeding, as well as the therapies of pain, bruxism and children's treatment.

If you use hypnotic techniques to improve your communication skills or as a direct form of hypnosis, you will find profound benefits to the patient and the whole dental team.

The content of this chapter is the opinion of the author, and does not necessarily represent the policy of the American Society of Clinical Hypnosis or it's officers.

2. MODERN HYPNOSIS

The use of indirect hypnosis techniques has been increasing in dental clinics in the last twenty years. For instance, in Germany more than three thousand dentists are using modern hypnosis today. Approximately 50% are using indirect hypnotic techniques, without telling the patient what they are doing. This group does not charge for the hypnotic work, but benefits from better compliance by relaxed patients.

Dentists report that the patients need much less medication, can cope with anxiety and gagging reflex and have faster healing, with less pain and swelling. The patients enjoy coming back to a clinic that is using gentle dental care. The dental team has far less stress, and can work faster because the patient accepts procedures without taking a break or posing questions.

The other half of the respondents, using regular, direct and indirect hypnosis, charge for the hypnosis and utilize it also for dental work without chemical anesthesia. Some also do hypnotherapy.

3. THE "HYPNO-ASSISTANT"

Both groups recommend hypnosis training for the whole team. In dentistry it is practical to use double inductions and delegate parts of the hypnosis to the dental nurses. They often enjoy getting a hypnosis assistance training, because they gain a whole new field of professional skills.

A hypno-assistant's work is comparable to the work of midwifes or anesthesiologists, guiding the patient through a normally pain-and stressful experience. The hypno-assistant is responsible for a peaceful, focused atmosphere and relaxed communication in the clinic.

A hypno-assistant's tasks are:

Before treatment:

Giving positive instructions about the dental treatment's process. This may include a preparative session to explore the case history, carry out suggestibility tests, and reduce stress and anxiety concerning hypnosis and

dental care.

Instructing the patient in using self-hypnosis at home in preparation for the treatment.

Instructing the patient in relaxation techniques and stress coping strategies. Instructing the patient in using hypnotic pain control.

During treatment:

Inducing, deepening and helping the patient to stay in hypnosis during the dental treatment.

Terminating the hypnosis, while the dentist to focuses on other work.

After treatment:

Creating a relaxed and peaceful atmosphere in the clinic, reducing stress for

team and communicating collegially.

4. TIME EFFORT

Many dentists are afraid of a huge time effort for hypnosis. Actually, right after training in hypnosis, it takes some extra time to do the new ways of speaking and to make safe use of hypnosis.

But after some practice and with the whole team's cooperation, hypnosis saves time: The treatment flows faster without interruptions, so the work is more focused and precise.

Many clinics report that hypnosis is a great time saver. When using chemical anesthesia, hypnosis takes only two to five minutes. It can be induced while the injection is developing. Using dental hypnotic audio recordings, there is no extra time at all.

5. HYPNOSIS IN DENTAL CARE

Indications of hypnosis in dental care:

Allergies, Bleeding control, Bruxism treatment, Changing of habits, Children's dental treatment, Chronic pain relief, Control of abreactions, Control of blood circulation, Blood pressure and bleeding, Controlling the gagging reflex, Cranio-mandibular disorders (CMD) treatment, Dental anxiety, fear and phobia, Dental phobias, Dental surgery in hypnosis without medication, Diet guidance, Disability to wear prostheses and prosthodontic appliances, Instructing self-hypnosis, Long-term treatments, Motivation (wearing prosthodontic appliances, splints, oral hygiene), Posthypnotic suggestions after treatment, Psychosomatic disorders concerning dentistry, Reduction and/or avoiding of medication, Relaxation, Stress relief, Suggestive communication, Saliva control. Taking reproducible and exact bites. Treatment of skin and soft-tissue diseases

Contra-indications for Hypnosis in dental care:

Severe mental diseases, Unsolved medical diagnosis, Not enough time, No rapport with the patient, Negative transference to the patient

Here is a good general rule for the use of hypnosis: Trained professionals should use hypnosis when doing health care for conditions that they are competent to treat without using hypnosis.

Hypnosis is an aid, or adjunct to health care. It is unethical for a psychologist with no dental training to extract a tooth just because a patient it hypnotized. In the same way, it may be unethical for a dentist without training in mental health to treat a childhood trauma or adult anxiety just because a patient is dissociated to a happy place for anesthesia.

6. A FRAME FOR FAST AND EFFECTIVE HYPNOSIS IN DENTAL CLINICS

Much can be done to make the patient's experience positive. Reframe negative associations and emotions, the so called negative anchors. The clinic should have noise-lowering rooms and doors. To avoid the "typical" dental smell, put three drops of rose oil into the surface disinfection spray.

Carefully evade negative suggestions on signs, e.g. "Waiting room". Better use positive words on the door to the clinic, like "Relaxation Room". The patient should be greeted by a friendly handshake, without any barrier or obstacle such as a reception desk between them and the dentist.

The first person meeting the patient while arranging appointments or during the oral-hygiene explanations can use indirect seeding and suggestions for calmness and comfort..

When taking the case history, use terms like "discomfort" rather then "pain". The hypno-assisting nurse has to listen carefully to the patient, to get the needed information from normal communication. This is better then posing straight questions that might trigger the patient's fears. Inform the patient about hypnosis and what will happen in dental care to avoid surprises.

Define a certain gesture, a feedback sign, the patient can use later to have a break at any time. The patient should always be accompanied when in an operating room.

7. DURING THE CASE HISTORY

Note carefully:

Sense-Modality preference (Visual, Auditory, Kinesthetic, Olfactory) Antipathy (Why did the patient change the clinic?) Patient's needs (comfort, support, silence. fears, expectations, experiences) Habits (e.g. gagging reflex, need to rinse the mouth often) Resources (intelligence, imagination, good memory) Discussion topics (Hobbies, sports, travel) Prior trance experiences (Yoga, meditation, autogenic training) Dental phobias (What causes fear, what to avoid) Patient's reaction during oral hygiene using a hypnosis CD

8. SUGGESTIBILITY TEST

Under conditions of dental care, patients are more suggestible than in normal life. There is far less resistance to hypnosis than usual, because hypnosis helps to avoid the negative aspects of dentistry.

Therefore suggestibility tests are not necessary. But if a patient asks: "Am I able to undergo hypnosis for surgery, so I will have no pain?" you may answer: "The deeper you go into trance, the less you will feel. In deep trance there will be only a tingling sensation or a very light pressure and you can hardly feel it."

Then, as a suggestibility test, we do Mesmeric passes over the patient's arm and ask him: "What do you feel?" while the patient is observing the passes. If he says "I can't feel anything!" we ask him again about his expectations concerning hypnosis, and deal with any myths. We ask if he can experience real emotions while watching movies.

We imply that he use his imagination. Afterwards we try again. If the patient says: "I feel sensations like electricity or heaviness etc.", we tell him, he's a very good subject to hypnotize.

9. DENTAL ANXIETY AND PHOBIAS

About 70 % of the population has different grades of dental anxiety. Twenty percent suffer from dental phobia, which causes a complete avoidance of a dentist treatment.

This leads to a huge lack of oral hygiene, causing emergency visits – quite often with dramatic experiences – and therefore an increase of the phobia.

The use of hypnosis helps the patient experience being cared for, listened to, and treated gently. The hypnotized patent may be taught to travel in fantasy through time and space, while leaving his mouth for repairs. Thus he gets helped dissociating himself from the dental chair to a place of favor and good memories.

10. PHONE CONTACT TO REDUCE ANXIETY

Every patient should be treated in ways to reduce fear and stress. This hypnotic procedure can be start during the first phone call. Here are some questions to use prior to the treatment, questions that require decisions:

"Do you want to be treated right now, or do you wish to take some time waiting?"

"Do you only want to solve the acute problem, or do you wish to have a systematic treatment?"

"Do you want instructions for relaxation or hypnosis?"

"Do you want to fill out all forms prior to your appointment at home or do you just want to fill them out here?"

"Do you want medication or hypnosis only?"

"Do you wish to get exactly informed about the treatment, or would you rather not like to know what's exactly going on?"

The more decisions the patient has to make, the more secure he feels. The two most important questions before treatment are:

"What are your conditions that need to be fulfilled so you feel carefully and well treated?" This actually helps the patient to report what exactly he does not want during the treatment and what he expects to happen.

"Could you please bring a pleasant memory of an experience that you had?" The question helps the patient to think less about his anxiety and more about a good memory. This will be used at the beginning of the treatment in the 3-words induction, described below.

11. FIRST CLINIC CONTACT TO REDUCE ANXIETY

When the patient enters the clinic we always continue to pose questions, to keep the feeling of safety and positive involvement

"Do you wish to take the chair over there, or do you prefer to take this one here?"

"Do you need help in filling out all the forms?"

"Would you like to have a preliminary talk in a separate room?"

"Do you want to get treated right now?",

"Would you rather not get treated today, but stay for an informative conversation?"

"Would you rather have a preliminary hypnosis session, or one right before the treatment?"

"Normally all we do during the first meeting is a quick look into your mouth, then we start the dental hygiene program – after that, when you're ready, we might start discussing about what has to be done for a good oral health! Will that be alright with you?"

12. HOW TO USE HYPNOSIS

There are two different approaches to utilizing. The first one is to prepare the patient in a separate room for the first appointment, teaching self hypnosis which can be uses during the treatment in addition to the hypnosis that is induced by the hypnotist at the beginning. This is only needed for very severe cases. The second and most common approach is to start the hypnosis right before the dental treatment.

Take a Short case history and build rapport

In dental hypnosis, we don't want to dig in all those bad, old, memories causing the phobic reactions. From the beginning, we try to keep the patient in a good state of mind. If the patient insists on telling bad experiences, we suggest reworking them within a separate hypnotherapeutic session, consulting a psychotherapist.

A successful intervention with a phobic patient having a long case history often takes the following few words:

"You've had many experiences within your life – bad ones and good ones – it is all right, if you start a new future today, forgetting everything that has happened before. You don't have to tell me all those bad experiences, just let go and think of a beautiful future which has started right now! Would you like to have a beautiful smile and a good taste and a fresh breeze inside your mouth?"

This short chat with the patient aims at building up a good rapport. It can be expanded by telling metaphors about other cases and even showing pictures or videos from people who successfully lost their dental phobic and gained healthy teeth and a beautiful smile. In a best-case scenario the dentist has the privilege to touch the patient. If so, ask carefully: "Is it all right, if I touch your shoulder"? Then we can pace and lead the breathing of the patient by gently touching his shoulder and pressing down on the exhale, and releasing in the inhale. The use of kinesthetic trance induction is the most effective way to reduce anxiety and phobic reaction.

If the patient is ready to take a seat on the dental chair and feels all right having the hypnosis, the dental chair will become a positive anchor for entering a deep trance. The higher the anxiety is, the easier it is to reach a deep level of trance, because, it's "the only way out". It is better use a very short trance induction and then immediately start the treatment, because the treatment itself is the most effective deepening technique.

The sooner the dental treatment under hypnosis starts, the faster the anxiety withers. The patient is asked to tell all the conditions that are needed to cause his panic reaction. Then he gets his own symptoms "prescribed" by asking him: "What do you have to do to start trembling, to stop breathing, to create such horror visions? The goal is to make the patient aware that he is able to cause the panic himself. In this way he realizes, that the panic doesn't control him but he provokes the panic.

Useful tools are: EMDR or NLP phobia technique (Inducing the patient to experience his trauma in movie theatre-style scenery, working with submodalities and hypno-analysis combined with change-history techniques.) Heavy phobic reactions need preliminary psychotherapeutic treatment. The dentist and the assistant should have a continuous supervision by a good trainer to get positive feedback and to help most effectively and fast intervention.

13. THREE WORD INDUCTION.

Whenever there is a new patient, we immediately start with the three-word induction. This is a direct and indirect trance induction, helping the patient to focus on former good experiences, which he's going to recall and experience again "live". It's impossible to have fear and pain and experience a real good event from the past at once.

*"Choose a good experience that you had lately. (*Focusing the patient inside, on a good memory as a resource).

"Before you let me know about the details of your memory, please tell me three words which characterize your good memory and the values connected to it (Reactivating the resource by the three-word question).

"If you want, please tell me the details of the situation you have chosen (Second reactivation of the resource)."

"What can you do to get your good memory vivid again? (Induction by utilizing the information from the third question.)

"As you're circling your three words in your mind, what do you experience right now? " Let the patient recall the good memory in all five senses)

Mixing the three words: The assistant repeats the three words and, since both the hypnotist and the hypno-assistant are talking, a double induction evolves. (By overloading the patient with his own resources, by utilizing the breathing rhythm with the help of the touch on the shoulder, as well as by mixing the words and slowing and lowering the voice, the patient enters his good memory.)

After repeating the three words five to ten times, we start the dental treatment without any more suggestions. To deepen the trance we do the treatment as rhythmic as possible .All the sensations of noise and rumbling caused by the drill or the scalar's scratches are used in a specific, constant way. Long, time consuming inductions don't cause a better hypnotic effect.

A quick start to treatment helps the patient into a deeper trance. We avoid giving concrete pictures; we only elicit the inner "video" of the patient. If the patient gives any signs of relaxation, like a sigh or a ideomotor response, it is reinforced by the team with a: "That's right!"

14. POST HYPNOTIC SUGGESTIONS

By the end of the treatment, when still a little, "unexciting" work has to be done, we start with the posthypnotic suggestions.

The patient is taught to use the three words for self-hypnosis after leaving the office. We suggest that the patient should give self suggestions to keep the treated region inside the mouth numb and cool until the healing has completed.

After he leaves the office he will have a good sleep and a regular digestion as well as a regular physiology before dental any treatments by using self-hypnosis with the three words.

When he comes back to the next appointment, as soon as he enters the chair, and we touch the shoulder and the chair goes down, he will once more go into a deep state of trance.

14. ALERTING

After the treatment is completed, the patient is lead out of trance, by asking the patient to return to every day life back in the chair. Instructions are to keep the

good memories, until reaching full conscious awareness while the post hypnotic suggestions are being repeated.

15. LONG-TERM TREATMENT

Dental phobics cannot imagine coming ten times to the clinic. That's why we often offer them a full-mouth treatment in two sessions, lasting about four hours each.

We tell them "Afterwards your 'dining room' will be fixed and refurbished". This is a good sentence to motivate the patient for a long-term treatment.

Usually we do a fast hypnosis induction, like the three-word induction or the turbo induction presented below.

To maintain the hypnosis we use custom trance music composed especially for dental purposes and surroundings with subliminal suction and drill noises. It consists of a very relaxing, constant rhythm of 60 bpm.

It is also possible to use CDs containing trance music mixed with verbal suggestions in a repetitive pattern. It is scientifically proven that constant input by words combined with relaxing music is much more effective than music/words only.

16. CONTROLLING BODY REACTIONS

Keeping the patients in a good state from the beginning of treatment helps most of them to avoid unwanted body reactions. Even if the patient is not "officially" hypnotized, the use of confusion induction is the best way to cope with undesirable reactions.

If the patient is going to faint, we prescribe the symptom: "Oh, so you want to faint? You feel that sweating on your upper lip? You're breathing fast and short? Now please faint immediately, so we can work in peace! We can handle your fainting, please faint now!"

The same can be done with gagging: "You want to vomit? Throw up now! We have a big basket prepared for you!" These suggestions might sound a bit strange. But they are the best method to keep the treatment running.

If somebody says: "I can't be treated because of my high blood pressure!" we tell him, that we have a very good medication against it. We offer the patient hypnosis and biofeedback by the "beep-sound" of a pulse oximeter. We ask the patient first to increase the heart beat and then lower it with the suggestion: "In a few minutes you'll have a heartbeat of about 80 beats per minute as you go into trance. As soon as your heartbeat increases, you go deeper in trance, so your blood pressure will go down!

During dental treatment you will learn how to reduce your blood pressure in trance." To actually achieve a lower blood pressure, we tell metaphors during the dental treatment.

To reduce bleeding, it's most often enough to say, loud and straight forward: "Stop bleeding!" - without a regular trance induction. After five seconds the patient gets rewarded, no matter if the blooding stopped or not: "It's bleeding much less, now stop the bleeding completely!" This is a confusion induction that has to be delivered very directively. The same technique can be used to stop the flow of saliva.

17. STOPPING THE GAGGING REFLEX

The first step is to prescribe the symptom. In addition, the patient is directed to pull his ear. There are acupuncture spots that can be activated by pulling and pressing. In addition, the patient is to pull the toes towards the belly. If that did not help, the next step it is to do needle acupuncture.

This is very often highly effective, if combined with the suggestion: "If you'd allow, I would put a needle in the KG 24 point so the gagging reflex is turned off". The effect can be proven immediately by taking impressions.

The resulting plaster models are given to the patient with the suggestion to put them on top of the TV set, so the patient keeps in mind, that he actually made it.

Only about 10% of the gagging cases need "real hypnosis". In those cases and in cases with surgery without injection we use directive induction techniques, because these are highly motivated to dive into a deep trance and like the "classical style".

18. THE "TURBO INDUCTION"

Our most recommended fast induction is the so called "turbo induction".

The hypnotist induces trance by an eye fixation technique with a Mini Flashlight, pointed onto the patient eyes. The light should be very bright and focused on both of them, then it is swayed in circular motion, beginning above the patients forehead, all the way down to his chin. The patient is asked to him follow the light with his eyes all the way down.

During this twenty seconds procedure, the patient gets the following suggestions:

"While you focus fully on this light, you can feel how your arms get more and more tired, more and more, very tired. Focus on nothing but the light! As I count to three, your eyes will be so tired that they will automatically close and you will not be able to open them anymore".

Suddenly, the flash-light is rapidly driven towards one eye which closes automatically (as a physiological eye closure reflex takes place). "Your eyes are now closed shut and you cannot open them." Saying these words, the hypnotist points the light closely

and alternately to one eye, then the other, rapidly swaying it back and forth. In case the patient opens his eyes again, he will feel forced to shut them immediately.

Afterwards, hypnosis is reinforced by moving the light from one eye to the other, saying the following: "The flashing of the light on your eyes leads you into a deep trance, deeper and deeper. When I count to ten, you will fall even deeper in hypnosis with every number that I count". The hypnotist holds the patients' head and counts quickly from one to ten.

The next step is to lift the patient's arm, utilizing the following suggestion: "Now that you are so deeply relaxed and your arm is fully relaxed, completely limp, it is so loose that it just falls down on your lap". After two to three times of letting the arm fall down on the lap (to test if there is total mobility) the patient is asked: "And now you take a deep breath.... And hold it".

With the maximum inhalation the arm is moved upright by the hand as fast as possible. By pushing the elbow to the border of his movement, arm catalepsy is induced. "Now exhale and continue a pleasant and comfortable breathing, deeper and deeper."

The cataleptic hand then gets touched by the hypnotist's fingertips from above to make it feel numb, suggestions like "Now the blood's flow goes down from the hand, down through the forearm, the upper arm, down to the shoulder into the belly so that the numbness spreads all over the hand."

"Now, when I touch the elbow and the shoulder, the hand can slowly move downwards to the part of the body you would like to be numb. The hand can travel by imagination - to any part of the body and when the hand has reached its destination, this part of the body will be dissociated. You will be aware that all the bad sensations of the body change into a very pleasant feeling, as soon as the hand touches this region of your body". "Let your hand go slowly to that place, just let her take that amount of time that your subconscious mind needs to teach all the possibilities of changing sensitivity into the very pleasant experience of not feeling that certain part of the body."

"And you will be able to cut-off all the bad sensations of your body when it is the right time and when it is supporting your health. During the following days you will do this exercise as often as you need to be absolutely comfortable throughout your entire body."

"Now, please ask your subconscious mind to give you a symbol for this trance state, a picture, a color, a tool that comes to your mind so that you can keep it in memory, to use it for getting back in that trance state whenever you need it for your health and when you've got that symbol, you can nod your head and say thank you to your subconscious mind for this wonderful gift.

"As you got that picture, find a name for that good feeling that you have right now, or a sound that is fitting to it, or a little melody - and when you got that name or sound say thank you to your subconscious mind and nod your head. And then find the most comfortable spot of your body, that part with the best possible feeling and focus on that part and keep that pleasant feeling in your mind so that in future you can reactivate that wonderful feeling at any time you want to feel it again as pleasantly as you are doing now."

"In future, whenever you need to go to trance again you just focus on your symbol, that name or sound, and the most pleasant feeling spot of your body and you will easily get back to the wonderful pleasant trance state that you are in right now. It will always be easy to achieve, without any effort, just go inside you and enjoy."

"In a minute, as I count from one to five you will be awake, feeling fresh, relaxed and with a very good feeling throughout your entire body. And come back with a smile, as it will keep all the good feelings that you want to bring with you when you're back to alert state."

Eye Fixation-techniques and its variations are well suited for patients who have not yet had any experience with hypnosis, and who, because of their case history, have proved to expect a more authoritarian, direct introduction of hypnosis.

The "turbo-induction" is a very good tool to induce rapid analgesia for acute or chronic pain. It is also helpful with gagging and needle phobia. Before the induction the patient should be asked if they mind a touch on their hand and whether the shoulder is free and mobile.

19. THERAPY OF PAIN IN DENTISTRY

Acute pain occurs very often during dental treatment, even if there are good pharmaceutical products. Some reasons are: the drug is not effective (mainly on drug addicts), allergies that don't allow the use of medicaments, under dose of the medicament, extreme turnover rate of the patient (high blood pressure and heart rate), irregular topography of the nerve (block in the lower jaw), and patient's desire to get treated without a shot

In dentistry there are a lot of noises, vibrations and pressures during a treatment. Imagining a save place and using simple relaxation techniques is not always sufficient to pain control. We utilize the resources of the patient by telling him metaphors about events, which would be taking his body to its limits, like running a marathon with the sound of the follower's breath behind. The patient has to activate all his hidden resources to win the race.

While he is really trying hard, he is, at the same time, the TV reporter above, flying in a helicopter and giving a vivid impression of the race to the sportsman's family, watching TV at home. The patient gets a huge motivation to "win". Offering different points of view and alternative perspectives for dissociation creates a huge will to win.

At the same time, constant deep breathing is supported by body contact to the shoulder or (if pain seems to occur) to the belly.

Suggestions like "if you feel more than you want, dive deeper into the trance, because in deep trance there is only well being" are utilizing the pain as a lever for deepening. Every sensation has to be announced with a metaphor: Before the scalpel pinches into the skin, there is a "slight pressure so that the tissues open by themselves, the deeper you got the better I can find the intercellular space and find my way through the free space between the cells."

As long as the cataleptic arm is not moving the dentist may continue his work. If the hand moves, even just slightly, it's a clear signal to take a break for some seconds. Longer breaks are not useful at all. "I see - you really have to take a short break, take a sip of fresh water, smell the air and enjoy how fast your body gains new energy."

The posthypnotic suggestion includes ego strengthening, rewarding and suggestions for a fast and secure healing ("because the natural, regular blood circulation is going on") as well as suggestions to forget the procedure, which is the last pint of acute pain control.

The cataleptic hand can indicate if there is an electrical feeling, if a nerve is close. So this helps to find the right way to a deep impact third molar or for the drilling of an implant. If the induction is successful (mainly turbo induction) and

the patient is motivated for the procedure without injection there is little pain in 80 % of cases. The other 20 % need just a little shot to complete the treatment.

What are the benefits of a surgery without chemical support? If for example a wisdom tooth is taken out, the patient treated without any injections will have absolutely no pain and no swelling afterwards, the healing goes much faster and the patient may use his mouth instantly after the surgical procedure. There is no tension reflex against the raspatorium and the mouth feels soft when the treatment is done gently.

20. CMD AND BRUXISM

Patients chronically wearing down their teeth due to bruxism often have no pain until a dentist or other person observes their behavior and, this way, creates a problem.

Whether it has become a problem by suggestion and/or by pain, hypnosis is very helpful: After exploring the case history and making a clear, medical diagnosis (which only the experienced dentist can do) the patient may be motivated for a hypnotic intervention.

Combining a splint therapy with hypnosis is much better than the single use of each. We mostly use the Joe Barber induction, based on a yes and no signal to the subconscious mind. We can ask if the replacement of the habit chosen by the patient will be a good one, which is able to fulfill the mind's needs.

For introduction, it's the best way to utilize the metaphor of the sleeping miller. He always awakes to keep the millstones from destroying themselves, after having ground the wheat. He wants to save his most precious tools. The patient should, as the habit appears, just wake up so little that he can clench his fist to fulfill the needs of muscular activity of his body.

21. CHILDREN'S HYPNOSIS

Children are highly suggestible and tend to dive into trance very easily. However, one second later they might be back to reality. It is the art of the hypnodontist to keep them in trance. To achieve this, you use a tremendous rapport, constant verbal input and ongoing body contact.

The dentist should totally focus on the child and communicate with nobody else. He must be totally oriented onto his goal – to finish the treatment – and immediately start, before the child can set up any resistance. The child must have the possibility to have a break whenever needed. It's a great help to use electronic toys, e.g. a piggy that begins giggling and shaking when squeezed. The mother or accompanying adult should be told that it is better to watch the treatment outside on a TV screen (without sound). If the mother (in case of a child up to the age of four years) has to be in the room, its best if the child lies on the mother's belly. It is vital that she remains silent and does not make any noises like sighs etc. Her hands should be quietly placed on the child's belly, without any moves or strokes, because stroking disturbs the trance.

If the mother is not compliant, it is the best to start by hypnotizing her. Achieving this can be done by simply overloading her together with the hypno-assistant and reminding her to please be silent and motionless, for the sake of her child.

As children usually dive into trance with opened eyes, we can utilize this during the induction. The dentist himself has to enter his own trance, oriented to the outside, smiling, with deep regular breathing.

Telling stories, fairy tales and giving metaphors for every step, rhyming, singing, while, at the same time the hypno-assistant should be talking constantly, which is a good way to overload and confuse the child. At the same time, "magic arm" is installed. The dentist pulls up the child's left arm in a very quick way, saying: "This is your magic arm, the more you point it up in the air, the less you will feel!"

In 70 % of the cases absolutely no shot is needed, if the child is treated under hypnosis. However, children with bad former experiences often need a shot. We tend to explain the injection using these five sentences:

"Would you like to have those glittering tooth-sleeping pearls with chocolate or do you prefer strawberry taste? (Just in that moment we show the syringe letting out some glittering drops of the liquid).

In the beginning the tooth sleeping drops will be red, then you'll start to feel something, soon they'll become yellow, there will be a tingling sensation as they start to put your tooth to sleep and then, suddenly, they'll become green, when your tooth has fallen asleep."

Starting the injection, we ask the child to take a deep breath, to hold it and to exhale just in that moment we inject, asking: *"Do you taste the chocolate? And now they are*

red, you can feel something tickling. Very good! Now they already change to yellow and the tooth slowly falls asleep. Just like your teeth, you and your mouth can also fall asleep."

Another induction technique, a big time-saver, is the so called "thumb-TV". Big headphones isolating the child's ears from any sound are put on, and a fairy tale is played. A few moments later, we take the child's thumb and lift it up high, inducing arm catalepsy: "This is your magic thumb TV. You see - it's pretty much

like a TV screen and only children can see everything in there. You'll see the story you can hear. As soon as you're able to watch everything you hear in your very own thumb TV, your mouth will open wide. What exactly do you see, what do you hear, what do you smell, and what would you tell?

22. CONCEPTS FOR ONE-DAY TRAINING IN SPECIALIZED DENTAL HYPNOSIS

Here are suggestions for a basic course to train participants to add hypnosis to a dental practice.

- 1 Transference and counter-transference
- 2 Indications and contra-indications for using hypnosis
- 3 Non-verbal inducing and deepening techniques
- 4 Yes-set
- 5 Pacing and leading
- 6 Suggestive communications
- 7 Utilizing sensations like noise, drill, scratching, suction
- 8 Suggestibility tests
- 9 Children's hypnosis

23. CONCEPTS FOR TWO TO THREE-DAY TRAINING IN SPECIALIZED DENTAL HYPNOSIS

For a two or three day course, add the following In addition to the above:

- 1 Practicing the positive way of speaking
- 2 Three-word induction
- 3 Turbo inductions
- 4 Utilizing negations
- 5 Hypnosis for anxiety and phobias
- 6 Controlling body reactions
- 7 Stress-and-pain relief
- 8 Reducing the gagging reflex
- 9 How to incorporate hypnosis into a running clinic
- 10 Documentation of hypnosis
- 11 Use of audio recordings (Tapes, CDs)
- 12 Group training of self hypnosis
- 13 Motivating oral hygiene
- 14 Role play

FULL LIST OF REFERENCES

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