

Healing with advanced hypnotherapy: A science of spirituality

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Introduction

This paper explores consciousness in relation to the new concept of spirituality suggested as a science within modern psychiatry. It will also suggest that modern physics can be used to explain altered states of consciousness during hypnosis. By using an advanced form of hypnosis with Life Between Lives (LBL) therapy introduced by Dr. Michael Newton Ph.D. in the USA ^{1, 2, 3}, it is possible to achieve healing through higher-dimensional full integration of the human soul and brain.

Once hypnosis reaches the subconscious mind, it starts modifying emotions, physiology and cognition. This introduces state-dependant learning, forming the basis for symptom removal and conflict resolution. With careful and slow facilitation, the subject can reach a superconscious state, where the subject can access the higher levels of his/her multidimensional being, reaching the blueprint of his/her own soul plan as revealed between lives.

Independent of religion, ethnicity, language and culture, most clients responding to this therapy form, will recover, heal and regain full control of their own bodies and souls. As explained in this paper, research into the possible existence of the soul is still in an embryonic stage.

Four cases are presented in order to describe the therapeutic process. These clients provide evidence of complete healing from previous traumatic conflicts, establishing the basis for integration of the human body and soul.

Hypnosis is an extra-ordinary and invisible tool that is explained by using a cross-section of scientific disciplines.

The psychiatrist's role as healer of the heart

Throughout human history, healers and shamans have played an important part in medicine and culture. Their sometimes ridiculed and alienated behaviour has managed to give us a deeper understanding of a psychology that goes beyond cure. Despite disbelief and rejection we have discovered that healing can occur through metaphysical events.

As doctors, psychologists and nurses, we are equally sanctioned to practice healing. The main difference is that we lack the strength of having a clear socio-cultural, religious and spiritual acceptance ⁴. We are legally accepted practitioners of health and we cure the body and the mind. We have no clear concept of healing the soul, since it has not been a part of our educational concept and normal practice. Scientific training has for historical, secularised reasons considered thinking to be the only path to the holy grail of science. The body has been left to the doctor and the soul to the priest. It should though be possible to unite science and spirituality for the benefit of mankind.

Some researchers like Strupp ⁵, claim that the modern psychotherapist relies to a large extent on the same psychological mechanisms used by the faith healer, shaman, physician, and priest. The results as reflected by the evidence of therapeutic outcomes appear to be substantially similar.

The Artist of the Heart was an early psychiatrist, when he assisted anxious people to access Imhotep's dream temples in ancient Egypt. Long before Freud's method of dream interpretation, dream temples were a part of ordinary peoples contact with deeper aspects of themselves and the spiritual world. In those days it was easier, since many religions were still to come, and religious leaders were not yet present to claim the spiritual world as their divine personal property.

This historic secularization made people seek alternative medicine. It seems that in this environment we have been able to re-connect the past with the present, despite being taught from an early stage to differentiate, judge, and think of separate concepts. As a consequence of these divisions, conflicts and separation have become an integrated part of human existence. Since the birth of industrialization, science has taught us that knowing is valid through thinking and sensing, with a corresponding devaluing of feelings and imagery. The spirit/soul became the property of religions, and the body a property of science.

Throughout history, emperors and Kings have been tempted to access the unknown by using state oracles and psychics in order to predict battles and politics. The commoners have equally always been attracted by predictions of the future. Modern leaders, too, have secretly been involved and attracted by remote viewing (clairvoyance). All this had one thing in common: attempting to access information through altered states of consciousness. Very few succeeded but others persisted trying to find answers beyond and within themselves.

The first President of The Royal Society of Medicine, 1838, John Elliotson, was not only Professor of Medicine but also Professor of 'Principles and practice of Physics' at UCH, London. His protégé James Esdaile, a Scottish surgeon working in India, performed several hundred operations painlessly using only hypnosis as an aesthetic whilst in charge of a hospital in India 1845 ⁶. Ether was introduced by Morton and Elliotson was forced to resign from his post. More than 100 years after Elliotson, a new dawn of hypnosis came during the 1970s. This was possible through the major achievement of the American psychologist Milton H Erickson.

In relation to Medicine, most psychotherapy and education would have us believe that humans are composed of objective parts, interrelated like parts in an engine that just appear to be organic. By changing and affecting these parts, we can be modified either positively or negatively. But it is impossible to explain thoughts and consciousness by reducing humans to neuro-synaptic firing and neurochemistry.

Current neurobiological descriptions of the brain are based on Newton's Physics ⁷, although Newton's Physics has its limitations. Newton's Physics is an offshoot of Descartes division of the Universe in matter and spirit ⁸, and it deals only with matter. As already pointed out, neurobiologists assume that the brain and its parts behave like classical objects, and that quantum effects are negligible, even while the 'objects' they are studying get smaller and smaller.

When we try to explain consciousness by reducing it to electrochemical processes, we put ourselves in a situation similar to a scientist who decides to explain electrical phenomena by using gravity. Consciousness is unlikely to arise from classical properties of matter and the more we understand the structure and the fabric of the brain, the less we understand how consciousness can occur at all. This is well known and well testable. Therefore, as no current brain theories can explain consciousness; a logical explanation is that consciousness must be a physical property.

It is challenging to know that the physicist Heisenberg's principle of uncertainty⁹, states that by just observing a phenomenon, you will alter the outcome of a certain event or the result of your observation. What makes our reality even more interesting is the fact that by observing, you might cause a collapse of the 'real' event or the observation, something called the collapse of the wave function. This will of course have implications on our understanding of science and how we interpret our results. Does modern science really present the truth about our existence?

Quantum theory states that an electron is a point particle while the wave function of the electron is spread over space. Further this means that there is a finite probability that particles may 'tunnel' through space, and make a quantum leap through impenetrable barriers. It would, at least in theory, according to modern physics be possible for information or even matter to penetrate space and matter. It would then be possible to access higher dimensions or vice versa. If quantum mechanics were wrong, one could not possibly listen to beautiful music, which represents wave functions of dancing electrons^{10, 11, 12}.

Roger Penrose is one of the leading British physicists of our time. In his opinion, consciousness is a quantum phenomenon¹³ since neurons are too big to account for consciousness. Penrose believes that consciousness is a manifestation of the quantum cytoskeleton state and its interplay between quantum and classical levels of activity. The brain could actually work as an interface between matter and spirit. Others like Reinis et al.¹⁴, have equally discussed that parallel and serial interactions between millions of neurons would take a very long time, too long for individuals to adequate normal interaction with the environment. Electrons fill a large space and their precise positions cannot be exactly determined when moving.

It is now becoming increasingly clear, through systematic observations of fetal behaviour, that babies have a consciousness far beyond what has previously been thought. They seem to hear before they have ears, see before they have eyes and move gracefully and spontaneously before they have much brain^{15, 16, 17, 18, 19, 20}.

During deeper states of hypnosis, my clients report themselves as spiritual beings. Surprisingly this happens just as often to those without a religious belief as those belonging to a specific religion. Indeed, they report themselves as spiritual beings with a very high degree of integrity and consciousness, far beyond that which we currently understand.

By using imagery and hypnosis we challenge old ways of thinking and sensing. The brain's right hemisphere becomes active, which can be monitored with an electroencephalogram (EEG). And there is evidence to suggest altered brain waves, from normal awakening through to altered states of consciousness. Theta (4-8 Hz) waves are particularly important signs, but also different amplitudes and localization of alpha (8-12 Hz) - and beta (12-19+ Hz) waves are present ^{21, 22, 23}. This is further supported by studies showing increase of occipital regional Cerebral Blood Flow (rCBF) and delta activity during EEG ²⁴.

The imagery process challenges thinking and our sense of control. Hypnotherapeutic sessions suddenly disclose processes that are usually protected by barriers of consciousness. By living under the illusion that we have control and can master our reality, we can remove uncertainties and what is worst of all, fear. One of the reasons Sigmund Freud turned away from hypnosis was this lack of control. Instead he chose the path of control and catharsis through psychoanalysis.

Traditional psychiatric methods like medication with hypnotics and Cognitive Behavioural Therapy, aim for cure, and utilise everyday consciousness to understand and cope with psychiatric symptoms. Hypnosis, in contrast, searches the subconscious mind in order to identify the origin of the illness. Its dynamic is short term and it emphasizes causes rather than symptoms, explanations rather than descriptions and subconscious instead of conscious forces as the cause of the pathology.

Despite its past, hypnosis has survived controversies, mistrust and open hostility, to reach its present position. It has now been proposed as a therapy to be provided through the National Health Service ²⁵.

The process

Clients are recommended to rest in a recliner. The procedure is facilitated by carefully guided breathing, in order to facilitate stimulation of brain areas producing alpha and theta waves. The induction continues with soft instructions which facilitate visualization and imagery in order to close off conscious interference. Low and intermediate states of hypnosis are well recognized by Rapid Eye Movements (REM). Autonomous reactions consisting of lower body temperature, slow breathing, slow pulse and lowered blood-pressure are usually detected ^{26, 27}. The environment is kept calm with a few dim lights and isolation from external stimulation. During hypnosis many clients experience the alteration of time-space. This is often recognized by minutes of delays responding to questions. When back in a conscious state the client thinks that 20-30 minutes has passed, when often 60-90 minutes have lapsed. The facilitator continuously emphasizes the fact that previous suffering and pain does not have to be re-experienced, and that the client is in total control of him/herself. Instead, pain and suffering are understood in the context of similarities between past lives and the present life in order to break repetitive traumatic circles. The client responds to a technique consisting of complete relaxation with careful guidance in to deeper and deeper sub-conscious levels and finally a super-conscious state of all knowing.

The sub-conscious has the extraordinary ability to access previous life events. The super conscious state expands the altered state and, in turn, gains access to previous lives where a higher dimensional order suddenly becomes available.

When facilitating regression to higher dimensions, no matter what you believe, it is important to make the transition smooth. This is achieved by regression through childhood, back to the womb and then back to the last life before the current one. Exiting from the last death of the person, the journey becomes a natural return through a rapid tunnel (silver cord) or 'wormhole' and the soul can be brought back to a stage between two lives. The entrance in to the spiritual world is The Gateway. Most clients responding to this form of hypnosis will independently report a spirit world with many almost identical attributes.

Among all clients currently responding to and completing treatment, 70% of all women partially or completely recover. Fewer men than women request psychiatric help through this method, but 60-65% of all men recover partially or completely after completing their treatment. It is striking that a high number of clients become discharged back to their GPs from our service.

There are indeed clients that do not benefit or should avoid LBL. Poor responders to hypnosis and LBL are generally clients with higher levels of personal control and in particular fear of losing control. Rigidity and lack of imagery/visualization are also a negative factor. One in ten clients is expected not to respond to hypnosis or LBL. Clients with psychotic disorders, illicit drug dependence and severe personality disorders should generally be advised to avoid this method.

There is evidence to clearly suggest that high and low responders use different cognitive strategies in response to hypnosis. High responders seem to use much higher integrative strategies, sustained attention abilities, and decreased arousal. They also experience their emotions more vividly with possible facilitation of visual imagery. High responders also show more theta and beta-activity in occipital parts of the brain^{28, 29, 30, 31, 32, 33}.

The path to recovery – case illustrations

Mrs. A was referred by her GP with a history of 4 - 5 years of worsening depression. She contemplated suicide, but agreed not to harm herself during her therapy. Mrs. A felt isolated and lonely. She had chronic financial problems and faced threats of eviction.

She grew up with parents and two sisters. Mrs. A often felt physically and emotionally neglected. From the age of 12 she was sexually abused and harassed by a teacher.

She never abused any illicit drugs. Occasionally she enjoyed a glass of wine. She married early and gave birth to four very intellectual and gifted children. Her husband was extremely psychologically abusive, and after he left her, she brought up all her four children alone. By the time of her referral she had been living in extreme poverty and deprivation for 17 years. She described herself as a burden to her children. She was 'on the road to nowhere', either contemplating suicide or literally to disappear and live on the street.

Mrs. A had started feeling increasingly depressed many years before she attended our outpatient clinic. She received psychotherapy with a consultant psychotherapist, group cognitive behavioural therapy (CBT), and private counselling. She was referred for psychodynamic psychotherapy but was turned down since the Psychotherapy Department thought it presented too high a risk.

Mrs. A was treated with different anti-depressants by her GP, and she had been put on the anti-depressant Venlafaxine before I assessed her. She waited more than a year before the therapy started, and during that time she continued to feel low in a mood, having lost any interest in continuing her life.

She was in an alarming mental state when the therapy started. After being carefully informed about the therapeutic process she gave consent to start the treatment. Mrs. A described her feelings during the hypnotic stage:

'I was very mentally unwell then...but I didn't know it...and I had...I had anorexia...I had panic attacks...I had high anxiety...I had self image problem...I hated myself...I hated everything about me....and I couldn't cope...with my spiritual side at all. So I closed it.'

During sessions with a mix of PLR (Past Life Regression) and LBL she became increasingly firm, inspired and clear. She told me that she was a Spiritual Observer, and that she was disappointed that it had taken her such a long time to realize her true self. At this stage I felt confused but decided not to judge or interpret, but rather explore this new dimension. She tried to explain.

'I think youv'e got to...when you are an observer...observing the souls...youv'e got to try to save as many of them as you can. Save...by guiding...youv'e got to steer them away from...anything that's going to touch their life that is wrong and bad.'

Mrs. A found it easy to reach the Gateway of Spirit where she met her father. He told her that he didn't want to go back to *'this wicked and evil world'*. He told her that in a distant life they used to be lovers and that this was the reason that he became obsessed about controlling her life as her father in her present life. He allowed his two other daughters to have boyfriends, but never Mrs. A. He made her feel that she was responsible for her ill health and she on her own thought that there was something terribly wrong with her. In her altered state of consciousness she described herself transformed in to a very advanced being. She continued to report from the spiritual world.

'We have to function on a human level. When you go back when you have finished a life, it's like, just...been watching a film for an hour. But a lot of people in this world don't understand. They are not in touch with any spiritual side of themselves. They think too logically. They think too scientifically. They use their conscious mind too much.'

'And what happens if people remember the spiritual world as humans', I asked.

'The rest of society would think that they were insane.'

'Why did you decide to reincarnate? Wouldn't you do a better job on the other side?'

'Mmm, no, it takes the physical form to touch a person who is not aware of the spiritual side. You need to be a human to do that. It's about...it's about what we are, and it's also about how we are with people. It's not first who we are. It's how we behave.'

At the Gateway Mrs. A described being greeted by all her soulmates. The loveliest party was arranged, and she felt completely accepted by everyone around her. She felt equal, not criticized and definitely not manipulated, which was something she repeatedly mentioned. Suddenly she realized that she had been living her present life not on her own terms, but on others. During this moment she suddenly alluded;

'I am a very old soul...my colour is a mix of blue and purple and at least six or seven members of my soul group are incarnated on earth now, but others were spread around other worlds. There is a higher order and a higher meaning. I don't have any sense of time here. I don't have any influence on society around me. It's pure. It is going to take the human race a very, very long time to understand it, and it is not necessary for my soul.'

'Why are we not allowed to fully know what the spiritual world is like?'

'Because we wouldn't stay here, and we wouldn't do our task...we would want to be there all the time. There would be no learning, no growing. The spiritual world is like trying to understand computer programming. They are not the way we see them...circles...shapes...they are multidimensional...you see...we're not seeing them as they really are. But my intellectual side keeps interfering ...because I try to understand it...shapes crossing over...makes it all multidimensional... there are different levels in the spiritual world. There are...its like layers. You tend to think of it in terms of a human mind, and it isn't a human mind. It's about...it's about what we are, and it's also about how we are with people. It's not first who we are. It's how we behave. It's about...letting go of base motivations, base human motivations.'

After 18 sessions consisting of 1 – 1½ hours, she realized that she had been neglectful and possibly wasted her life time, initially being controlled by her

father and then her husband. She understood that there was a lesson to be learned, and that she now was capable of releasing herself.

The most important moment was when Mrs. A described how she was able to forgive both her father and former husband.

Today Mrs. A works full-time in a hospital. She is off all medication, and she regards herself as being completely healed. She has been discharged from the psychiatric clinic. She felt that the two polarized side of being physical and spiritual finally merged together. It made it possible for her to acknowledge her real self, and to see the world in a completely different way. She thinks that the LBL has saved her life.

Mr. B, a 35 year old British man, was admitted to one of our hospitals under section 3 of the Mental Health Act (MHA), diagnosed with borderline personality disorder. He was extremely self-harming, making long cuts along his arms. He even tried to sever his neck on the glass of a hospital window. He absconded and tried to jump in front of the traffic on the A130. During previous admissions, my colleagues had tried almost every antipsychotic, anxiolytic and mood-stabilizing drug without success. After discussions with the nurses at our secure ward, I reluctantly decided to offer him hypnotherapy as a last resort. We only made one agreement. He made a promise to me not to attempt suicide as long as the therapy continued.

During the therapy Mr. B almost immediately started to have overwhelming and violent experiences from past lives. He told me that during the Spanish invasion of South America he was a 'conquistador', a mercenary that did not distinguish between male, females and children. He killed them all. Finally he was usually killed or he committed suicide in every life.

He lived his last life before the current one in Ireland as a poor farmer. His family had managed to buy him a ticket to go to America. One day he discovered that his brother had stolen the ticket and left for America. He was devastated but stayed at the farm, trying to care for his mother. One day the IRA approached him and asked him to hide some weapons. He was paid money and the weapons were hidden in the barn. Later, British troops arrived and found the weapons. As a punishment they flattened the whole farm, and the family was left homeless. In light of all this he hung himself.

When Mr. B realized this, it suddenly struck him that he had been repeating the suicide theme life after life. From that moment his life changed dramatically. The healing process continued throughout all the sessions and when he asked to have his medication reduced, I agreed. He was later transferred to an open ward and later discharged.

Today he is employed by NHS in the UK. He lives with a partner and they have a baby. I have spoken to him over the phone and he is now off all medication. He has been completely discharged from our service. The staff at the secure ward still wonders at how it was possible for Mr B to change so dramatically.

Mrs. C was referred by her GP due to years of depression. Antidepressants seemed to have no effect, and psychotherapy with a NHS psychologist for 4 years, never gave her any true relief. When she commenced

her therapy during the summer of 2006, she was severely depressed. She took Buspirone (anxiolytics), antidepressants and painkillers. Since birth her pelvis had been tilted and her right leg shorter than the left. Her GP had diagnosed her with diabetes mellitus type II and she was also waiting for surgery for a prolapse. She was living alone after going through three previous divorces. She was unemployed and lived on state benefits. She was much 'grounded' and not religious.

The first important experience Mrs. C had was from the womb of her mother. She suddenly reported that her father physically abused her mother, and she continued:

'Oh, I understand now where my disability came from. I was born with it but the doctors couldn't understand what it was...it's my father kicking my mother's stomach...it hurts...'

She then continued to explore many different previous lives; one in Egypt as a maker of beads and jewellery, another as an Indian woman in Canada, where she was particularly fond of making beads of bones and skins. She died in her thirties when a herd of hunted buffalos unexpectedly turned and killed her.

In most of these lives she met her closest relatives, and there seemed to be unresolved issues between her and her abusive and angry father.

After discovering this spiritual hidden life, her whole posture changed. She was smiling, and her confidence grew day by day. She had always cooked her father's dinner. One day she told him she couldn't; he asked where she had her loyalties. Years of domination ended when she told him that she could only care for him if she cared for her own health, and then she told him she was off for her hypnotherapy.

Today she has been discharged back to her GP. As with most of the clients, she has gradually discontinued her medication. Without symptoms, she has realized that she doesn't need psychotropics.

Mrs. D was treated in Sweden and she was the sister of a highly respected businessman of a multinational company. She was married with two grown up children. She had been on sick benefit for 2 years from her own accountancy company, when she was referred by her GP. She had been seen by six different doctors, and she expressed disappointment with many different antidepressants (SSRIs), which had been prescribed without any improvement of her severe anxiety and depressive symptoms. Mrs. D could hardly leave her lovely house. She did not use any alcohol or illicit drugs and she was generally healthy. She asked me to help her without drugs. Although I initially refused, she demanded that I try hypnotherapy. Mrs. D was grounded and sensible and not particularly religious.

A major part of her spiritual journey was when, as a child, she revisited the mines where her father was an engineer. Suddenly she started to experience severe anxiety, but through guided breathing and support she stayed in trance. By using this crucial point as a potential trigger, she was asked to go to the point of origin of her anxiety. Suddenly she was back in Italy 1500 years earlier. Her

husband had accused her being unfaithful, and he demanded that the tribe punish her. She was put in a cave that was sealed, and she was left to die a slow, frightening and painful death.

Mrs. D continued to explore many past lives, but she also reported a spiritual life hidden behind her conscious barrier of defence mechanisms. Her depression immediately lifted and her anxiety slowly disappeared when she re-integrated a trauma she thought would stay with her for ever. Repeatedly she told me that she experienced a re-joining of her body and her true higher self. She slowly discontinued and came off her medication without signs of relapse. She is still healthy nearly five years after her treatment.

Conclusion

LBL therapy is a new form of facilitated hypnosis introduced by Dr. Michael Newton in America. This therapeutic form seems to induce spirituality beyond normal left hemispheric and cognitive functioning. A high number of patients achieve inner spiritual healing and integration of the higher self, introducing state-dependant learning. This creates a vehicle for symptom removal and conflict resolution.

The anxious, depressed, phobic and bereaved client experiences relaxation as a by-product of hypnosis, just like meditation and yoga. Utilizing altered states of consciousness like LBL, therapeutically opens information channels not accessible to ordinary consciousness.

In order for past traumas to be fully released, the exact details sometimes have to be elicited by the therapist with all the precision of a surgeon removing shrapnel from the tissue of a bomb victim. Previous psychotherapeutic training is essential.

The deep hypnotic stage transforms emotions, physiology and cognition. As a by-product, non-spiritual, non-religious clients experience a transformation equal to clients reporting NDEs (Near Death Experiences) and OBEs (Out of the Body Experience). They suddenly and unexpectedly find a higher meaning of their life, often challenging and encouraging family, friends and colleagues.

Coping strategies continuously improve during treatment. Spiritual integration seems to introduce a subjective and objective visible change of the individual's approach to life itself. Clients seem to re-connect with an inner happiness that is independent of religious experiences.

This personal transformation will indeed lead to a slow but irresistible change to our society. This means that LBL hypnotherapy would then become a preventive method for the relief of individual suffering, instead of having to live in a society full of disillusion, hate and anger.

Through the healing art of psychotherapy in any form, the therapist/healer must feel the emotion of acceptance and unconditional love towards the client. Transference and counter-transference are strong and should always be recognized. The love is not sexual, but simply respectful acknowledgement that the client is on his or her own healing path that has an inner integrity and wisdom, which must be honoured and regarded as a sacred quest. If this attitude of compassion is not cultivated, true healing cannot occur. If compassion is

cultivated, then mutually resonating energy fields can envelope both therapist and patient in a transpersonal trance that can be profoundly healing for both participants.

LBL therapy is a remarkable method that needs to be considered more than just placebo. It should be regarded as a major stepping stone to full integration of mind, body and soul, and calls for further exploration by a collaboration of scientists.

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