
Reconceiving Hypnosis and Acupuncture

Towards Integration of Health Care Modalities

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During the 1950s and 1960s Chinese and Japanese researchers provided scientific information about the bioelectrical character of acupuncture diagnostic and therapeutic processes when they discovered that every acupoint is a locus of relatively low electrical resistance. Surrounding tissue—even one or two millimeters away—has a higher resistance, that is, a relatively lower conductance. This discovery resulted in the use of galvanometers to locate acupoints and to the finding of new acupoints that were missed by the intuitive explorations of ancient physicians.

During the 1970s, when a national interest in acupuncture first made its appearance in the United States, conventional medicine, oblivious to the previous two decades of research, declared that acupuncture was hypnosis. During the 1970s and 1980s irrefutable scientific information demonstrated the precise chemical mechanisms of acupuncture analgesia,¹ as well as the chemical mechanisms involved in acupuncture therapeutics and prophylactics,² which eventually resulted in a modification of conventional

medicine's position about acupuncture. Although a smaller number of physicians continued to assert that acupuncture was hypnosis and suggestion, the majority retreated to the hypothesis that acupuncture may possibly work, but science has no idea about how acupuncture works, still oblivious to the research that made the mechanisms of acupuncture even more scientifically apparent than the mechanisms of many drugs in wide current usage.

Now in the 1990s, paradoxically, I would like to return to the proposition that acupuncture is hypnosis, in order to reveal still another important aspect of the acupuncture process, and to help us reconceive the intersections of hypnosis and acupuncture in the context of the present planetary crisis.

Briefly, both hypnosis and acupuncture induce a so-called "altered state of consciousness" characterized by two interrelated phenomena: (1) a slowing down of dominant brain wave frequencies from normal waking states that typically produce frequencies greater than 14 Hz;³ and (2) a shift from left to right brain dominance,⁴ the significance of which is discussed below.

The following propositions define the paradoxes of hypnosis and acupuncture in the context of the present historical moment, a time that many researchers define as a unique turning point.⁵ The implications for hypnotherapy, for acupuncture, and for all forms of alternative medicine are explored as interrelated expressions of a critical rebirthing process.

Paradoxical Terminology

- *Acupuncture is not just acupuncture.* It is a method of diagnosing, treating, and preventing bioenergetic imbalances, which can result in, or be consequential to, organ disturbances. There are many methods of triggering this energetic rebalancing, for example, stimulation of the acupoints by needle, heat, finger pressure, mechanical tools, electronics, magnets, laser, cupping, small seeds, or metal balls, as well as by manipulating the bioenergetic field or aura (therapeutic touch)⁶ or by meditation, mental imagery, breath control, and movement, as in *qigong*.⁷ The word *acupuncture* derives from the Latin word for needle, *acu*, and the suffix, *puncture*, that is, a method that utilizes *needle puncture*. In Chinese, it is called *Zhen Jiu*, literally *needle-heat*, the two main classical ways of stimulating the acupoint. A French priest who happened to observe needles being used, and had no idea that there were other methods of triggering the energetic response, or even that the method was all about altering the body's energetics, called it *l'acupuncture*, and we came to be stuck with this misleading nomenclature. To compound matters we now utilize the terms electro-acupuncture, laser-acupuncture, acupressure, and acupaid to indicate methods of nonneedle stimulation. Indeed, acupuncture is not just acupuncture!
- *Hypnosis is not literally hypnosis.* The term *hypnosis* derives from the Greek word *hypnos* meaning *sleep*. But hypnosis is not sleep, though in both hypnosis

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and sleep, the same two interrelated changes in brain frequency and in hemispheric dominance take place. However, hypnosis may be differentiated from sleep and from acupuncture by its content of suggestion, which is communicated through the language functions of the left brain.⁸

Two types of suggestion may be differentiated: (1) interactive or benign suggestion, which is characteristic of early forms of hypnosis developed, for example, by James Braid, M.D. (1795–1860),⁹ and more recently by Milton Erickson, M.D. (1902–1980)¹⁰; and (2) coercive suggestion, which is characteristic of classical hypnosis. Two premises in this presentation are: (1) that benign suggestion can be therapeutic and free of contraindications, while coercive suggestion is as fraught with potential iatrogenic consequences as pharmaceuticals; and (2) benign suggestion supports healthy right brain function, and coercive suggestion challenges healthy right brain function.

The Western development of hypnosis and acupuncture has a common ancestor: Franz Anton Mesmer, M.D. (1734–1815).¹¹ Mesmerism is a method of redistributing the vital energy that the ancient Chinese called Qi to reestablish an energetic homeostasis. The method is very similar to the healing methods of Chinese qigong. The Western development of vital energy concepts and applications took another great leap through the creative research, writing, and clinical work of Wilhelm Reich, M.D., a young colleague of Sigmund Freud, M.D. It is not coinci-

dental that both Drs. Mesmer and Reich suffered from unrelenting persecution by conventional medicine. Dr. Mesmer was forced to flee from Austria to Switzerland to France by medical authorities who condemned his work as fraudulent.¹² Dr. Reich was tried in a U.S. court for his “heresies” and sent to prison, where he died in 1957. Hypnosis also had its origins in mesmerism, and was clinically validated by James Esdaile, M.D. (1805–1859), a surgeon who utilized his methods (without suggestion) to induce anesthesia in more than 300 patients.¹³ It was Dr. Braid who introduced suggestion to mesmerism and eliminated its physical component, that is, the stimulation of the bioenergetic field called *qi* by Chinese medicine, *orgone* by Dr. Reich, and *animal magnetism* by Dr. Mesmer.

• *Hypnosis is not acupuncture, though acupuncture is mesmerism, the parent of hypnosis. As already pointed out, acupuncture and hypnosis are also linked by their common inducement of right brain dominance.*

Allopathic Medicine: An Anachronistic Paradigm

• *The premises, methods, and technologies of conventional medicine are not rooted in science so much as in socioeconomic mind-sets. With all its claims to be scientific, the predilections of modern medicine for pharmaceutical solutions are driven more by the economic hegemony of the pharmaceutical corporations over the medical schools, whose research they fund, than by any presumed scientific*

objectivity. Beyond this financial “love affair” between modern medicine and its pharmaceutical breadwinner is the devotion of medicine and science to objective exclusivity, which is more of a function of the marketplace mentality that pervades our culture than an inherent expression of the nature of healing or of the universe.¹⁴

- *The still dominant Newtonian-Cartesian socioeconomic mind-sets have begun to be anachronistic. This is to say that many of the assumptions of modern medicine need to be modified.¹⁵*
- *The assumption of conventional medicine that it is objective, and that only objective methods are scientific and appropriate for clinical use is false. This is implied in premise 4 above. Both acupuncture and hypnosis have important subjective components though, paradoxically, both disciplines often struggle to make themselves as objective as conventional medicine, thus putting their potential to transcend the narrow parameters of conventional medicine in jeopardy.*
- *Modern civilization produces behavioral, mental, emotional, and spiritual dichotomies that result in cultivating a universal schizoid character. More specifically, all our institutions are designed as mechanisms of coercion, which for the most part violate our needs to fulfill ourselves as loving, spontaneous, creative, and cooperating human beings.*
- *The mental mechanism by which manipulation replaces loving relationships is the dichotomization of the two cerebral cortex hemispheres.⁸ The left hemisphere is the only one of the two hemispheres that*

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can be taught by coercion, and so our institutions establish the hegemony of the left brain by conditioned reflex training. It is, in fact, the primary function of all schools to create this hegemony of the objective, rational (as well as irrational and rationalizing) left brain while subordinating and suppressing right brain intuitive and totally human function.¹⁶

- *Conventional medicine, as all our mainstream institutions, also relegates its modus vivendi to the objective control of the left brain. The premises and procedures of these controlled processes are proudly called “the scientific method.” Reactions between doctor and patient, doctor and doctor, and patient and patient are also largely relegated to the same alienated left brain control.*
- *More specifically, in allopathic medicine, doctors are trained to take charge in the doctor-patient relationship, just as their methods of treatment take charge over natural physiologic and psychologic functions. The doctor is the general who gives the orders. The patient is the soldier who carries them out, preferably with as little questioning as possible.*

In “alternative” medicine, the patient is in charge and the doctor functions only as a guide, as a teacher, and as a respectful and caring helper to processes that essentially are those that the individual’s own body, mind, emotions, and spirit are trusted to carry out. No orders are given since the process is one of reestablishing the natural harmony which is disturbed by excessive “orders” of one kind or

another, including those self-imposed, that violate the patient’s basic needs.

- *Hypnosis and acupuncture, as well as most modalities that are currently known as natural, alternative, or holistic medicine, are mediated predominantly through the right brain. To engage the full potentialities of every organism’s homeostatic mechanisms requires that both the doctor and the patient release left brain dominant, coercive hegemony and allow the right intuitive hemisphere to function normally.*
- *Conventional medicine, rooted in the hegemony of the objective left brain, is characterized by coercive premises, methods, and technologies. Specifically, conventional medicine views what it calls “disease” as an “enemy” to be destroyed by drugs, surgery, chemotherapy, and radiation which invasively take over functions supposedly corrupted by the “enemy.” In contradistinction, natural medicine views what allopathy calls disease as signals to the organism that the normal homeostatic mechanisms are not functioning. It is the task, then, of natural medicine to support these homeostatic mechanisms so that harmony is restored in the individual.*
- *Given the above premises, we might define all so-called “disease,” from the point of view of natural medicine, as the consequence of exceeding the homeostatic potentials of the individual. This extreme condition is the result of forcing the body-mind-emotions-spirit to experience levels of stress for which the entire evolution of the human species never equipped us. That is to say, all “dis-*

ease” may be seen as the consequence of coercion. Such a premise makes conventional medicine itself one cause of pathology because allopathic methods and technologies are almost entirely coercive intrusions, interfering with the natural defense mechanisms of the patient (despite the good intentions of many physicians).

- *The tendency for classical hypnosis to utilize left brain commands to engage right brain responses provides a contradiction of method and process. What is suggested here is that manipulations and commands compromise the healing potential of hypnotherapeutic processes, turning them into typical left brain allopathic coercions which, by definition, become part of the problem, rather than part of the solution. For example: “The next cigarette you smoke will be nauseating and will make you vomit.” Such is not the case with more benign forms of hypnosis.*
- *All of the above should not lead us to conclude that left brain allopathy has no role in modern therapeutics. Rather the conclusion should be that allopathic medicine’s role is critical and essential but needs to be reevaluated. Clearly, the need and place for allopathic medicine is in emergency conditions when there is no time for the defenses of the body, even when fully supported and enhanced by natural therapeutics, to overcome a compromised condition.*

A secondary, more powerful implication is that natural methods, such as interactive hypnosis and acupuncture, should replace allopathic intervention in perhaps

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85 percent or 90 percent of the disorders that allopathic medicine attempts to "cure." The mythology that pharmaceutical intervention *cures* "disease" is as much of a fantasy as the concept of "disease" itself. *At best*, pharmaceutical intervention can negate the self-negating processes that the patient's body has set into motion, processes that originate as "friendly messengers" but, when not heeded, tend to become louder signals, the very strength of which can turn into pathologic—even life-threatening—conditions. *At worst*, pharmaceuticals can induce iatrogenic illness that might become even more life-threatening than the "diseases" against which they are designed to "make war."

• *We are living today in a period of evolutionary transformation from allopathic to natural medicine predominance.*¹⁵ This transformation does not issue simply from a spontaneous rise in the consciousness of physicians but rather from a new social polarization that places our species on notice—either seize the unique opportunity to fulfill the evolutionary promises of all past ages or add our species to the long list of those we have caused to be extinct.

Human Evolution: Forward or Backward?

This arrival of our "species reckoning day" derives primarily from the new ultimate technologic polarization of—on the one hand—the creation, for the first time in our multimillion-year hominid existence, of the potentiality for planetary abundance and—on the other hand—the simultaneous creation, for the first time in the entire evolution of the species, of several

technologic means¹⁵ for us humans to achieve omnicide [this term was coined by John Somerville, Ph.D., (1900–1994), a professor emeritus, Hunter College, to define the annihilation of all life on our planet], the ultimate negation of earth. This crisis is clearly manifested in the present universal search for alternatives in human relations and institutions, and, at the same time, in the extreme dehumanization of the existing relations and institutions.

• *Clearly, we are living in a period of the grand transition to the greatest leap or crash in our entire evolution.* This fact provides the primary context for all of us living today. Each and every one of us is defined, whether we choose it or not, as either part of the problem or part of the solution. We are not given a third option. Those of us who are professionally engaged in hypnotherapy, acupuncture, or any natural medicine alternative have *per se* committed ourselves to the evolutionary rather than the devolutionary side of the polarization. We are the midwives of the new health care. We can differentiate four developmental stages in this transition for which we are responsible:

Four Developmental Stages in the Transition

• *Acquisition of the most advanced methods for achieving an alternative health care consciousness through our profession.*¹⁷ Specifically, that means, for example, gradually replacing therapist-centered coercive methods with patient-centered, benign, and interactive methods that support the patient's own homeostatic processes, and that increasingly place the patient in

charge of those processes. It means incorporating into clinical *hypnotherapy* new processes,¹⁸ such as neurolinguistic programming (developed by Richard Bandler and John Grinder, Ph.D., and relying on the innovative hypnotherapy of Dr. Erickson),¹⁹ voice dialogue,²⁰ and eye movement desensitization and reprocessing (developed by Francine Shapiro, Ph.D.). It means incorporating into clinical *acupuncture* new processes, such as German electroacupuncture,²¹ Japanese electroacupuncture,²² French auricular therapy,²³ and microacupuncture systems.²⁴

• *Linking with other natural therapy methods and therapists to form a more inclusive health support system.* That means the gradual clinical shift from exclusive modality practices to those offering multimodalities. After all, hypnotherapy, acupuncture, and other modalities do not claim to be panaceas. The more inclusive the clinical practice is, the more effective it is likely to be.

Another intriguing possibility in linking is the simultaneous integration of two or more modalities—for example, two common effects of both hypnotherapy and acupuncture, as already indicated, are the shift from left to right brain consciousness and the slowing down of dominant brain wave frequencies. Explorations of the simultaneous (or alternating) use of hypnotherapy and acupuncture may generate an amplification of these effects that might produce significant improvements in therapeutic results. George A. Ulett, M.D., a research psychiatrist at the Columbia School of Medicine, University of Missouri, St. Louis, has recently

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offered one such promising method.²⁵

- *The shift from specialization training, a typical characteristic of the old medicine, to holistic education. This implies the transformation of schools that teach hypnosis, acupuncture, herbology, homeopathy, or nutritional therapy exclusively to holistic schools that prepare doctors who are capable of integrating the various natural modalities in their practices. Ultimately, these natural modalities should be integrated with conventional emergency medicine for a holistic diagnostic-therapeutic-prophylactic approach to health care that will replace the specialized approach to “disease” care.*
- *The final stage of this evolution of natural health care may be envisaged as the transfer of the principal functions of clinical practice to patients who, by virtue of reacquiring their natural prophylactic lifestyles, will transcend their roles as patients. Such lifestyles would be characterized by reconnections with nature, with other human beings, with the environment, and with the selves that have been lost ever since civilizations have set us at war with all that is “not-I.” The liberation from all alienations and the reestablishment of the “Great Harmony” has been the dream of all utopian philosophers from the entire recorded past. How fortunate we are that it is our generations, living today, that have been given the greatest challenge and opportunity of all ages: to create the transitions from fragmentation to holism, from alienation to harmony, from sick care to health care, from sectarianisms to global community! Here’s to our accepting this chal-*

lenge to transform what used to be utopian dreams to twenty-first century realities! If we fail, there may not be another chance. □

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