

THE TREATMENT OF ASTHMA BY HYPNOTHERAPY

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There is extensive literature on the psychogenic aspects of asthma (1-3). Hippocrates, over two thousand years ago, shrewdly remarked that the asthmatic, if he were to master his condition, must "guard against his own anger" (4). Salter (5) himself a martyr to this condition, expressed the prevailing view that "its cause lies within the nervous system." A pioneer contribution from the psychoanalytic viewpoint was made by French and Alexander (6) of Chicago, who regarded asthma as a substitute for crying. Abundant clinical evidence points to a close association between feeling states and bronchial asthma. Many asthmatic patients are aware that an emotional disturbance, e.g., feelings of intense anxiety or unexpressed resentment, may provoke or aggravate an attack. The classic story of MacKenzie, 1886, of the asthmatic lady, reputed to be allergic to roses, who had an attack of asthma on smelling an artificial rose, supports the hypothesis that emotions or ideas, *inter alia*, may act as casual agents (7). Magonet (8) mentioned the case of a patient who was sensitive to ragweed pollen, but who, interestingly enough, did not have these attacks when his mother-in-law was out of town. A boy working in his father's flour mill was allergic to flour. He was told to move to a different town and to avoid working in a flour mill. He moved, but, as things worked out, the new job offered was in a flour mill, yet he was no longer allergic to flour. When he returned, however, and worked for a brief period in his father's mill the asthma returned (8). Thus, it is reasonable to regard bronchial asthma as a "neurosis" of the lungs." Characteristically, these patients suppress all intense emotions involving threats to their dependent relationships, deprivation and insecurity induced by sexual conflicts. As children, they are anxiety-ridden, lack confidence and are dependent to an extreme degree. Numerous authors (9-13) have treated asthma by hypnotherapy, and often the results were dramatic. Recent observations (14) showed that typical attacks of asthma could be hypnotically produced, and the attacks thus provoked could

be immediately terminated by appropriate hypnotic suggestions.

Methodology: Usually the asthmatic patient has a long history of suffering and seeking of help from various sources, often to no avail. Such patients by the very nature of their illness are anxious, fearful, and highly motivated in their search for help. Consequently, they are usually good subjects and develop deep trances easily. My procedure is ordinarily two-fold. First, an effort is made to regress the patient to the time of his first attack and to re-educate him to the effect that the cause of that first attack is no longer operative and that he need no longer have fears and tensions about the constantly recurring need to breathe. Posthypnotic suggestions are given that he will enjoy sound physiological sleep, and that should he awaken, there still will be no asthma, and that in the morning he will feel at ease and comfortable and will so continue. In many cases, in one or two sessions, despite long previous sufferings, lasting therapeutic results can be secured. In more resistant subjects and where precipitating situations are not recovered a second methodology is employed. It is that of encouraging the patient, when he feels an attack developing, to sit down or to lie down, to close his eyes, to breathe deeply, then to hold that breath deliberately for a brief while; then slowly and comfortably to exhale with ease and comfort and without fear. This procedure is to be repeated at least five times and has the immeasurable effect of re-educating the patient's breathing attitudes, relieving his fears and tensions, and so it tends to abort the attack. Thus the patient is given the confidence of a ready and sufficient remedy in times of need.

Cases: The following cases are illustrative.

Case 1. Girl age 20, had asthma since menarche at 14, several attacks each month. She was regressed to the time of her first period, and it was learned that the onset was one of complete surprise, fear, anxiety and actual terror, and occurred when her mother

was not at home. Two hypnotic sessions were sufficient to give her permanent relief. Asthma could be hypnotically induced and terminated in her.

Case 2. Housewife age 42, had asthma for 16 years, husband a mechanic and had six children ages from 7 to 16 years. She was a tense, sensitive woman, worried about her children, about their poverty, etc. During the past few years her asthma was so bad that she had to pay daily visit to the Hospital past midnight and early hours for adrenalin injections. Finding no improvement in her condition she went in despair from G.P. to G.P. She showed dramatic relief after the first sessions. Four sessions cured her completely.

Case 3. Staff nurse age 30, had asthma for 2 years. Attack occurred a fortnight after birth of first child. Had to take ephedrine tablets every night. Marked improvement after the first session. During the second session, a week after the first, I asked her while she was in a trance whether she knew the cause of her asthma and she abreacted in tears that it was due to "anger." She wanted her own mother to nurse her baby when she returned to work, but her mother-in-law did not allow her. Two sessions gave her a lasting therapeutic cure.

Case 4. Girl age 6, had asthma for 1 year. Onset found to be associated with severe bronchitis. Whenever she had coughs and colds, and these were quite frequent, she had attacks. Four sessions stopped the asthma.

Case 5. Undergraduate science student age 24, had asthma since childhood. In recent years attacks occurred every night. Hospitalised many times and on several occasions "lost consciousness" on arrival in hospital. Under a trance it was learnt that his asthma dated back to the age of 4 or 5 when one of his grand parents died and he was forced to kiss the forehead of the dead man, which terrified him. He was a tense and irritable young man, and had a strong dislike for cats. There was marked relief after the first session. After three sessions at weekly intervals, he was comparatively free from attacks and they were so mild that half a tablet of Tedral

would stop them. Normally he had to take 2-3 tablets Tedral, and often had to resort to cortisone tablets.

Case 6. Boy age 16, had asthma for 8 years. Onset of asthma started from prolonged bronchitis. After five sessions he was free from attacks. Asthma could be hypnotically induced and terminated in him.

Case 7. Age 26, housewife, had asthma for 20 years. For the past 1½ years she had attacks almost every 1-2 days, and had to take tablets daily. After 6 sessions she was relatively free from attacks.

Case 8. Housewife age 40, had asthma since a very small child. Recently attacks occurred every day, and she had to take increasing doses of tablets. After 6 sessions she was relatively free from attacks.

Case 9. Schoolgirl age 9, had asthma for 4 years. Onset of asthma started after measles when she had severe prolonged bronchitis. Attacks occurred every day, and on many occasions she had to be warded in hospital under oxygen tent. After 5 sessions she was relatively free from attacks.

Case 10. Girl age 24, had asthma since the age of 9 when she had chronic cough. She was able to go into a very deep trance. Four sessions led to a lasting cure.

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