Clinical hypnosis in palliative care

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The January 2018 issue of *Annals of Palliative Medicine* is a focused issue entitled, "Clinical Hypnosis in Palliative Care: Neural Correlates, Clinical, Psychological and Spiritual Therapies" that is guest edited by Dr. Maria Paola Brugnoli. Dr. Brugnoli is on the Interdisciplinary Research Team in Neurobioethics and the UNESCO Chair at Pontifical Athenaeum Regina Apostolorum in Roma, Italy.

Hypnosis generally involves introducing a procedure to a subject and telling the subject that suggestions for imaginative experiences will be presented. In clinical hypnosis, the patient is guided by the practitioner to respond to suggestions for changes in subjective experience, alterations in perception, sensation, emotion, thought or behavior (1).

Clinical hypnosis is playing an increasingly important role in palliative and end-of-life care. As a component of what is generally considered complementary and alternative medicine, hypnosis can be used to control chronic pain, improve anxiety in chronic disease, reduce fatigue, manage depression, enhancing coping capacity, relieve psychosomatic symptoms, and treat brain injuries (2-4). Beyond symptom management, clinical hypnosis can sustain and enhances hope (5).

Clinical hypnosis and meditative states lie at the intersection of cognitive therapy and spiritual healing techniques. Readers of this special issue will easily see that clinical hypnosis can be one modality of an integrative multi-modality approach to improve the lives and quality of life for patients with chronic and terminal diseases, and that it can be used in conjunction with conventional medicines. Furthermore, clinical hypnosis has the benefit of being a safe and non-invasive therapy for patients.

Dr. Brugnoli introduced *Annals of Palliative Medicine* readers to clinical hypnosis in her 2016 review and procedural discussion on how hypnosis can relieve physical, psychological and spiritual symptoms in patients with severe chronic diseases (6,7). In that same vein, this focused issue expanded upon those ideas, discusses the development of different hypnosis methods and treatment protocols, and highlights the use of neuropsychology with hypnosis and spirituality to improve the quality of life for patients.

I remind all readers and investigators that *Annals of Palliative Medicine* is always willing to consider publishing dedicated focused issues on topics of special interest to the palliative care community. Please contact the editorial office at apm@amepc.org or myself with ideas and outlines for focused issue proposals.

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Footnote

Conflicts of Interest: The author has no conflicts of interest to declare.

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Simone. Clinical hypnosis in palliative care

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