



Hypnotic Interoception

Enhancing our mind-body connection.

“If your mind can affect the way your body functions, and hypnotherapy can affect the way your mind functions, then it stands to reason that hypnotherapy can ultimately affect your body’s responses.”
— **Mike Bryant** and **Peter Mabbutt**, from the introduction to *Hypnotherapy for Dummies*

Polyvagal Theory

Polyvagal Theory (PvT) was proposed 25 years ago by Steven Porges (2018) to provide a deeper explanation of how your nervous system connects your body to your state of mind. It asserts that the vagus nerve, which connects the brain to your central organs, allows communication between our organs and our mind at a subconscious level.

The theory doesn’t have much supporting neurological evidence, but it’s popular among therapists who are looking for a deeper link between body and mind. PvT goes beyond saying brain chemicals affect your organs and says your thoughts have direct but unconscious effects on your metabolism through the vagus nerve. More than that, your metabolism unconsciously affects your thoughts.

This is hard to make precise. It isn’t clear how far this goes or what it means. Certain parts of your brain do connect to organs and various organ functions do affect areas in your brain. These are lower parts of the brain that deal with autonomic functions. These areas are far from the cerebral areas that

deal with conscious thought, but they are associated with aspects of conscious thought such as reflex and memory.

The crux of PVT is that our two emergency activating responses, either to fight or to flee, are not only physical states but are also mental configurations. This much is plausible and intuitive since states of panic are supported both in mind and body. But beyond this, PvT says that traumatic experiences imprint in both our minds and bodies.

Going one step further, PvT says that an emergency freeze response can develop into a mental and physical template that becomes one of our familiar, repetitive responses. Trauma erodes our mental landscape creating canyons of repetitive behavior and mountainous obstacles to change in our thoughts.

People who subscribe to PvT—notably therapists who deal with trauma—use the conjectured neural functions as a neurological basis for psychotherapy. According to this, traumatized people carry a neural imprint of their experience which is expressed in their attitudes and actions. Only by relaxing these habitual reactions in the body and mind can traumatized people recover their equilibrium.

The Polyvagal Theory is full of biological, medical, and neurological complexity. If you have experience following theories from conjecture to exploration to confirmation, which I have, then things like the Polyvagal Theory are uncomfortably assertive. PvT draws on conjectures in evolutionary biology, neurology, psychology, and physiology that are unproved and unproveable.

PvT is sold to people in the psychological field through Porges's website and others (www.stephenporges.com/). Most doctors, psychologists, counselors, and therapists have little scientific training and no scientific experience. They don't know how to be scientifically discerning but don't know they don't know it. The whole field of public health is subject to various fashions and cultural prejudices.

PvT sells to the PTSD crowd, a swelling economic sector that has attracted a number of charismatic characters and cottage industries. On the West Coast, Gabor Maté (drgabormate.com) sells a version of trauma therapy reminiscent of Alice Miller's work on child trauma. On the East Coast, Peter Levine (www.somaticexperiencing.com) offers a therapist certification program in Somatic Experiencing®, a therapy similar to PvT in basing itself on the fight, flight, and freeze reactions.

Emotional Freedom Technique (EFT), Eye Movement Desensitization and Retraining (EMDR), Havening, and Infra-low Frequency Neurofeedback are four other PTSD therapies that are asserted to be "evidence based" and have little plausible, testable, theoretical, or coherent scientific basis. These methods may be correct, they may work, and they may generate evidence, but there's no real idea of how or how much they work, and no one seems to care at a fundamental level. The field of trauma therapy is a hot, money-making industry.



Experts

Polyvagal Theory has much to recommend it, and there is a need for it. It is a plausible attempt to connect many psychological unknowns. Trauma effects us all, and is the source of both pain and opportunity. We'd like to know how to get the best from our traumatic experiences and leave the rest.

I can say the same for these other therapies: they all contain some good ideas and generate some positive results. The problem is, if you don't understand what you're doing, you don't know what it is you're trying to understand and, furthermore, you presume that you do understand and are above being challenged, then nobody learns anything.

Discovery and the growth of understanding are based on the encounter with and the digestion of ignorance. If you cannot find, admit, or engage your ignorance, then you'll never learn anything. This is fundamentally the method of science. It is in this sense that many fields that claim themselves to be scientific are not scientific.

Psychotherapy, psychology, and psychiatry are all fields of this sort. People in these fields are doing the best they can given the uncertainties of their work, but these fields are neither based on nor aimed at being scientific. They are too result-based, materialistic, political, and based on personal ego to take themselves apart in pursuit of finding what makes them tick.

I want to be fair: while the "hard sciences" aspire to follow scientific precepts, the individuals in those fields are just as materialistic, political, and egotistical as people in other fields. As a result, hard science also builds around itself a fictional wall of validity. The wall just has fewer holes.

This is exactly what has precipitated the crisis of trust regarding the Covid-19 pandemic. The scientific fields have sold themselves to corporate masters and managers who have quickly discarded the scientific method. As a result, the goals, pursuit, reporting, and funding of clinical and research medicine has been savaged for profit to the point where it will take decades to repair, and that's assuming anyone tries.

“A sign of expertise is noticing what doesn’t happen.”

—**Malcolm Gladwell**

The corruption of scientific information has resulted in careless investigation and faulty understanding. Authentic experts have been replaced with irresponsible reporters, biased appraisers, self-serving politicians, and profit-oriented technology companies. Unless you can become an expert yourself—and this is the righteous challenge we must all undertake—there are no authorities you can rely on. You must either become your own expert or find your own experts.

What was once and might have been scientific-based progress has been cut free like a fleet of boats without rudders. Each technical initiative, whether in electronics or health care, is fishing in its own waters to maximize its catch. The notion of moving into, through, and onward in the sea of knowledge has been lost. It will become increasingly lost given the interests of those who have taken over.



Interoception

Polyvagal theory should not be called a theory; it’s neither substantiated or demonstrable. It’s an intriguing conjecture that bridges psychology and physiology. The role of one’s mind and the mind’s mechanisms in controlling the body are largely indirect or unconscious. As in much of today’s therapeutic models, the polyvagal conjecture presumes that a person has little aware-state connection with their internal systems.

A step below a conjecture is an *Ansatz*, from the German word meaning a model or an attempt. I'd like to propose a broader connection between the mind and body, a connection founded on general mental states and not on trauma in particular. I call it the Hypnotic Interoception *Ansatz*, or Hypnotic Interoception, for short.

Interoception is your ability to sense the internal organs, parts, or states of your body (Ceunen, 2016). Pain, need, and comfort are three common interoceptive channels through which our body communicates with our mind. Any enervated tissue can generate these signals and our mind generally gives these signals high priority.

We have some conscious control over these signals and we all have some experience with setting them aside. We also have varied and less common experience in overlooking them entirely. When we do overlook our body's internal signals we're often unaware of how we do this and, to a large extent, we're unaware that we're doing it. A good example of something we do with little self-awareness is falling asleep which some people can do well and others poorly.

“A substantial body of research has demonstrated the efficacy of hypnosis as part of the integrative treatment of many conditions that traditional medicine has found difficult to treat... The *Zeitgeist* may be ripe for an integrative medicine between the fields of allopathic medicine and hypnotherapy.”

—**Maria da Graça Pereira** (da Graça Pereira, 2017)

Hypnotic Interoception has three parts: your ability to sense your body, your ability to exert some control over your body, and your body's ability to communicate with you. There is great variety in each of these three aspects.

Sensations are not only as varied as the organs of perception, but our perceptions at least span the range of being chemical, vascular, and hormonal. Taste is chemical, exertion is vascular, and emotions are hormonal. Not only do external things impinge on our awareness, but we create internal self-awareness states.

Our responses range from the simple and direct, such as our conscious speech, to the obscure and perplexing, such as the content of our dreams. We have levels of perception and many—probably most of them—we are unaware of. We can hear things when unconscious and have effects on our bodies that seem intentional yet impossible, such as radical changes in our blood chemistry correlating with major changes in personality (Ram, 2015).

“When we get stressed, our body's cortisol levels are elevated. High levels of cortisol, a hormone released by the adrenal cortex, cause high blood sugar levels. With hypnotherapy and self-hypnosis, though, cortisol levels and blood glucose levels may decrease.”

—**Mary Leighton, RN** (Leighton, 2005, p. 2)

There is little symmetry in our notion of what we do with our body and what our body can do with us. It's almost as if our mind is a separate animal that resides within a body whose autonomic functions have a separate mind of their own. If you think about it, this is roughly the model of allopathic

medicine on the one hand, and psychotherapy on the other. There is not a great deal of communication between mind and body in the Western model.

From a system theory perspective this does not make much sense, at least it doesn't if we take it literally. It might make sense that mind and body seem separate because they manage different affairs, but since their goals are identical, those being survival, procreation, and comfort, it only makes sense to see mind and body as being connected at every level.



To Make Progress

The aim of therapeutic hypnotic interoception is to enhance the mind-body connection in order to improve their cooperation and collective ability. There are obvious ways that greater control of your mind can result in more optimal performance of your body.

- Mental relaxation can slow your heart rate.
- Greater awareness of sensation can improve your balance and response.
- Focused intention can increase or decrease blood supply to your organs and extremities.
- You can develop states of mind that result in improved digestion.
- You can learn to control your self-awareness to alter the nature of your thoughts making them more or less concrete or abstract.

These changes require a change of mental state. Some of these are associated with personalities, such as physical awareness being associated with athletics, but they are actually mental states available to anyone to varying degrees. Most importantly, greater facility comes with practice and guidance.

These are common examples of interoception. Beyond these, athletes learn a higher level of mental and physical control. Using biofeedback, any person can improve their vascular control to alter the temperature of their extremities. Mental puzzles, meditation, and trance states can foster new insights. Few of us test the limits, and there has been little to generally explore all that we're capable of.

Hypnotic interoception is the suggestion that we can enhance our body's function through the application of deeper states of mind. In this we're expanding the notion of the hypnotized state to mean all states: all states of mind are combinations of multiple levels of awareness.

We're looking not to exit from one singular conscious state to enter a singular notion of a hypnotic state. We're saying that consciousness is a mixture of awarenesses, like vision is a mixture of colors, and we can expand the range of "colors" we see while altering, adjusting, and being more sensitive to different states of mind. We want a more generally recognized and applicable means to enhance our mind-body connection.

"We have known for centuries that hypnosis could facilitate the healing of a bewildering variety of medical psychological problems... However, because (the required) clinical skills were not supported by a rational and verifiable scientific theory that could guide further research, (these) methods soon fell into disuse."

— **Ernest Rossi and David Cheek** from *Mind-Body Therapy*, (Rossi, & Cheek, 1988, p. 159).

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