



PRECISION THERAPY

A PROFESSIONAL MANUAL OF
FAST AND EFFECTIVE
HYPNOANALYSIS TECHNIQUES

Duncan McColl

*"Fresh and invigorating."
- The Hypnotherapist*

Precision Therapy
A Professional Manual of
Fast And Effective
Hypnoanalysis Techniques

Duncan McColl



Crown House Publishing
www.crownhouse.co.uk

First published 1995 by Ashgrove Press, Bath

Published 1998 in the UK by
Crown House Publishing Limited
Crown Buildings
Bancyfelin
Carmarthen
Wales
SA33 5ND
www.crownhouse.co.uk

© Duncan McColl 1995, 1998

The right of Duncan McColl to be identified as author of this work has been asserted by him in the accordance with the Copyright, Designs and Patents Act, 1988.

This edition published 2001
Reprinted 2004

All rights reserved. Except as permitted under current legislation no part of this work may be photocopied, stored in a retrieval system, published, performed in public, adapted, broadcast, transmitted, recorded or reproduced in any form or by any means, without the prior permission of the copyright owners. Enquiries should be addressed to Crown House Publishing Limited.

British Library of Cataloguing-in-Publication Data
A catalogue entry for this book is available from the British Library.

ISBN 1899836187

LCCN 2004104683

Printed on demand and bound in the UK by
Antony Rowe Ltd
Eastbourne

CONTENTS

	<i>page</i>
Foreword	9
Overview	11
THERAPY PROMPT SHEETS	
Therapy introduction (PS1)	13
Therapy introduction – rationale	15
Therapy mastersheet (PS2)	18
Uncovering (PS3)	20
Deepening, compounding (PS4)	22
Closing (PS5)	24
Induction (fast) (PS6)	26
Induction (optional) (PS7)	27
Induction (optional) (PS8)	32
Induction (alternative) (PS9)	35
Deepening (short form) (PS10)	36
Deepening (PS11)	37
Link & connect (PS12)	39
Negative responses (PS13)	40
Ideomotor responses/Ego-states (PS14)	43
Deepening . . . confusion technique (PS15)	44
Elman Pinpointing (PS16)	46
Dreamwork (PS17)	47
Testing for behavioural changes (PS18)	48
Birth (PS19)	49
Forgiveness (PS20)	51
Unrelaxed (PS21)	52
Reluctance to discuss or disclose (PS22)	53
Enhanced coping skills (PS23)	54

Induce feeling (PS24)	56
Private therapy (PS25)	57
Deepening (PS26)	59
Four fundamental needs (PS27)	60
Redirecting energy (PS28)	61
Ego-state process (PS29)	63
Attenuating emotions (PS30)	65
Thumb waggle (PS31)	66
Forgiveness (PS32)	67
Initiating process (PS33)	68
Relaxation techniques (PS34)	69
Age regression (PS35)	71
Physical relaxation (PS36)	72
Forest trip – release repressions (PS37)	73
Changing Emotions (PS38)	75
Previous life experiences (PS39)	77
Slow responses (PS40)	79
Talents (PS41)	80
Guilt and shame (PS42)	81
Success (PS43)	82
New skills (PS44)	83
Improve performance (PS45)	84
Phase X relaxation (PS46)	85
The awakening (drop secondary gain) (PS47)	87
Suggestibility (PS48)	88
Phobia release (PS49)	89
Depression (PS50)	90
Habit change (PS51)	91
Reminders (PS52)	92
Critical faculty bypass test (PS53)	99
Seal-breaking (PS54)	100
Pain relief (PS55)	102
Body image (PS56)	103
Getting problems in hand (PS57)	104
Back to the Future (PS58)	106

Previous Life Experiences (2) (PS59)	108
Case Histories	111
Case Summaries	125
Case Results	131
Questiontime	139
Suggested Responses	145
Hints on Lüscher Testing	155
Analytical Tape Scripts	161
Therapy Tapes	175
Quotations	199
Miscellany	205
Bibliography	233
Index by Subject	235

OVERVIEW

Precision therapy is a compilation of many well-known and effective techniques augmented by healing processes that have evolved fairly naturally over a period of years in meeting the need to provide a fast and effective healing and life-enhancing service for clients, many of them therapists, doctors and nurses . . . all of them with uncommon or serious problems.

Clients, in brief, who lacked the time, the need and the tolerance for indulging in protracted mindgames. The aim in precision therapy is focused on stimulating the abrupt shift in personal awareness that creates a 'spontaneous remission' and on achieving this aim, preferably, in one session.

The theme can be used to augment and not necessarily to replace any other discipline. It has been successfully conveyed to experienced hypnoanalysts on a highly selective and individual basis and only to professionals who recognise that effective therapy, including precision therapy, must be subject to continuous review and improvement. It is also recognised that this requires, in the therapist, an unusually high degree of self-understanding, flexibility, dedication and integrity.

It is recommended that you study the contents pages. The therapy summary and prompt sheets are intended to meet most of the eventualities that arise in analytical work. The case histories, with one exception, are provided in summary rather than in novelesque style, pinpointing the lessons learned from them. Drama has been included only to the extent that it is considered essential to do so.

Valuable lessons are learned in helping clients, including hypnoanalysts and medical professionals, who have been subjected to one or several of the types of analysis restricted to the Victorian neo-Freudian concepts. The firmly-held concept, for example, that a protective mechanism of mind represses events from consciousness which are too uncomfortable for the infant-mind to bear is only significant to a minor degree. A far more important and obvious aspect is that significant elements can often fully or partially bypass consciousness. As the conscious levels function strictly on a linear basis, they fail to register more than a fraction of what is happening

around. A significant compounding event, for example, that occurred just ten years earlier in the life of a fifty-year-old analyst was entirely outside his conscious recall until he verified the circumstances later. The event bypassed his consciousness, not because it was repressed from memory but because it never registered. At the time of the significant traumatic event, he was blind drunk.

A more serious aspect of the shallow Victorian concepts of analysis still shared by many therapists today is the belief that a sensitising event, to be significant, must involve a strong element of shame or guilt 'to be repressed'. In effective healing-therapy, any element of shame or guilt clearly telegraphs a compounding event. The sensitising event will be earlier and it will have induced strong feelings of fear or shock.

The too-common practice of merely revealing a shameful event to the client's consciousness and providing ego-boosting suggestions is as effective as dead-heading weeds in a flower-bed. Shame and guilt are shallow-minded concepts, part of our socio-religious conditioning, part of the charade, and our ego is part of the problem, not part of the healing.

The real sensitising events are seeded deeply. Threat-to-life-influences are invariably involved. If they are not released to consciousness, like the roots of a dead-headed weed, they will develop again.

Precision therapy is designed to deal with the root of the problem.

Care has been taken throughout to avoid the herd-mind trap of attempting to describe or define hypnosis. As conscious or our usual everyday state of unconscious self-hypnosis, like love and other forms of confusion, is a natural state of whatever the human mind is constrained to be, something of the unknown and the unintentional inevitably creeps into it. Unavoidably, the same will have happened to this book.

Duncan McColl

Therapy Introduction

Prompt Sheet 1

1. Do you want to live to be a hundred?
2. Breath cycle – in – out . . . is that right? Hand move . . . left – right . . . correct?
3. Which is your dominant arm – the stronger? Press the palms of your hands together . . . why can't you push the weaker arm away?
4. **Visualising . . . know what a telephone looks like? A tree? A flower?** (*The word conveys*)
5. **'Hold up your hand.'** (*Place yours against it. Client will tend to push . . . to resist*).
6. Stress check/reciprocal relaxation/spread fingers.
7. Diaphragmatic breathing/creative relaxation.
8. Fist closed . . . not a heart . . . hand open . . . not a heart. Close – stop – open – stop – close, that's a heart.
9. Hold up open hand . . . what's the important feature?
10. Go to fingers . . . sense tingling.
11. Frown – smile . . . sense difference.
12. Lock hands . . . lock mind so that hands are locked together.

13. Relax . . . anytime . . . creatively/tuned in . . . not tuned out . . . enhanced conscious awareness . . . next step?
14. Two states at this level . . . conscious or unconscious self-hypnosis.
15. **The hand support . . . arm should drop** (*Holding one with the other to illustrate relaxation*).
16. What will be different when change occurs?
17. To change . . . we initiate a process of change.

THERAPY INTRODUCTION – RATIONALE

The objective here is to illustrate the inherent simplicity of the natural healing and problem-solving processes . . . the simple things we tend to overlook in our search for answers. Only some of the points need to be mentioned. It can be useful to include anyone accompanying the client in the introduction.

1. You are seeking an unqualified response. A common one is: 'Yes . . . but not if I have to be a burden to anyone else.' The point here is that we can (at least) influence our own destiny. One eighty-year-old widow answered: 'Yes, young man . . . but why are you limiting me?'
2. Illustrate by moving your hand left . . . right . . . left. Breathing is a four-cycle process . . . in, stop, out, stop. The hand movement is left . . . stop . . . right . . . stop. Significance? Later.
3. You have developed one arm more than the other . . . but there is only one energy . . . for you to direct as you choose. The same rule applies to your psychic energy, to your mindpower. You have fed the linear brain more than your creative, inspirational brain.

Your dominant hand . . . left or right? Right. OK. Start consciously favouring your left hand whenever you can . . . give it more to do . . . you'll be surprised how soon you become ambidextrous . . . mentally as well.

4. Particularly with seriously-ill clients, there is a need to dispel immediately the thought that there is any need to create three-or four-dimensional objects in the air, or that there is any value whatsoever in attempting to do so.
5. Point out that you merely asked the client to hold up his hand. You did not ask him to push against yours. We tend to resist. Creative relaxation is a state of 'let-go'.
6. How do you relax your hand? You do something first . . . you spread your fingers apart, then you stop doing it and relaxation happens.
7. You take conscious control of a normally subconscious process . . . for two or three breaths . . . expanding the diaphragm then

allowing it to relax. You override the startle pattern you developed as a child . . . you condition the physical centre of your emotions to relax.

8. At this vibrational level of reality, learn to go with the natural rhythm in whatever you do.
9. The hand, itself, is temporal. The space, the 'nothingness', like the stop in the breathing rhythm, is where it comes from and where it goes.

(Today a chicken, tomorrow a feather duster . . . a perpetual process of change and renewal).

10. Allow one arm to dangle by your side . . . be aware of the tingling sensation at your fingertips – perhaps a slight pins-and-needles feeling . . . as the blood circulates down there at your fingertips. And as you focus on the tingling sensation, notice that you are hearing me better and I am speaking more clearly as we both move onto the same waveband, because the tingling feeling is the result of you directing part of your thinking process, your psychic energies, to alter the vibrational levels at your fingertips . . . bypassing the thinking-guessing mind and moving more into touch with your senses. And it is your sensing system, not your conditioned thinking mind, that you will learn today to use to see your best options in life.
11. Do it.
12. Clasp your hands together for a moment and at the count of three I'm going to ask you to lock your mind on the thought that your hands are locked tightly together and the harder you try to release them the tighter they get . . . 1 . . . 2 . . . 3 (*click fingers*) . . . just lock your mind on the thought that your hands are locked tightly together and try to release them and find that they lock together even more . . . tighter and tighter . . . that's right – really try . . . and now relax . . . and allow your hands to unlock. Fine . . . you accepted my suggestion because you wanted to . . . and subcon will ensure that you only accept suggestions from me that are for your health and wellbeing.

(Or: Good. You pulled your hands apart because you rejected my suggestion . . . that's fine. It highlights the fact that you can't be forced to do anything against your will in hypnosis . . . conscious self-hypnosis is a consent state, it requires relaxation and acceptance. So this time, as I repeat the suggestion, just

resolve that you would like it to work for you).

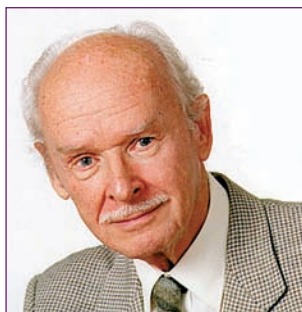
13. Next step – spontaneous right action.
14. The more you capture the knack of conscious self-hypnosis . . . the more you realise that you have been unconsciously self-hypnotised at least since birth.
15. Testing for phase one, physical relaxation . . . both arms must be lazy, limp and relaxed. It may be necessary to illustrate this by holding one of your own arms . . . and allowing it to flop down on your lap.
(Other processes, later).
16. Sometimes worth enquiring, to see if any focus has been directed positively.
17. Emphasise that you are an analyst. You are neither a counsellor nor an adviser. Your function is to illustrate clearly how the client can initiate a process of change. The choices he makes are strictly part of his own birthright. His own powerhouse mind is always his best guide. You will help him to find this source of truth and trust and inspiration in himself. The objective: to bring a great quality and intensity of experience back to the client's lifestyle.

Precision Therapy is a comprehensive manual of fast, effective hypnoanalytic techniques. Designed to be as practical and functional as possible, it presents a series of easily adaptable prompt sheets for therapy sessions, plus a collection of illuminating case histories and supporting resources.

The aim of precision therapy is to stimulate an abrupt shift in personal awareness, creating a 'spontaneous remission', preferably in just one session. This book provides health professionals with all the material needed to tackle the root causes of clients' problems, and initiate healing processes rapidly and effectively.

"Duncan McColl provides a rare and refreshingly eclectic approach to effective hypnotherapy and a welcome source of stimulation to all other therapists."

- Henry N. Merritt MD, PhD



Duncan McColl's unique form of hypnotherapy encompasses many techniques from established schools of hypnotherapy, and from other disciplines such as behavioural science and Zen. McColl has over thirty years' experience as a practising hypnotherapist, although

he previously worked as a business consultant and a chartered accountant in the USA, Canada, Australia, Mexico and Spain.

Hypnotherapy

Cover design Nicky Roper



Crown House Publishing Limited
www.crownhouse.co.uk

ISBN 189983618-7



9 781899 836185

9 0000