

Successful Repeated Hypnotic Treatment of Warts in the Same Individual: A Case Report

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We report on a case of a female patient who was successfully treated with hypnosis for warts on 2 occasions separated by an interval of 7 years. Of note is the fact that she had low expectations regarding the benefit to be derived from hypnosis and did not at first appear to be highly hypnotizable.

Keywords: Hypnosis, treatment, warts.

The use of hypnotic methods in the treatment of warts has been reported and utilized for at least 70 years (Scott, 1960). Numerous case studies have appeared in the literature, usually with small numbers of patients (Obermayer & Greenson, 1949; McDowell, 1949; Yalom, 1964; French, 1977; Clawson & Swade, 1975; Tasini & Hackett, 1977; Dreaper, 1978; Morris, 1985; Noll, 1988; Reid, 1989; O'Laughlan, 1995), although larger case series have also been reported (Bloch, 1927; Vollmer, 1946; Ewin, 1995). Research into the hypnotic treatment of warts has dealt, in large measure, with the efficacy of the process, the extent to which hypnotic treatment yields results that exceed those expected as a result of spontaneous remission, and comparisons of hypnotic treatments with other modalities (DuBreuil & Spanos, 1993).

Some investigations have also focused on the role of placebo effects (Clarke, 1965; Stankler, 1967; Spanos, 1988) as well as on the impact of differing levels of hypnotizability (Asher, 1956; Ulman & Dudek, 1960; Chandrasena, 1982), and on variations in subjects' cognitive processes and expectations as these relate to the procedure employed (Kirsch, 1985; Spanos, 1988; Spanos, 1990).

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Individual case reports have generally been considered to be a potential source of clinical hypotheses but have not been viewed as proof of the role of hypnosis because of the large number of coexistent factors that cannot be adequately controlled in the individual case (Mott, 1986). Therefore, the case that will be reported here is not presented as definitive evidence of hypnotic efficacy. However, there do not appear to be any case reports that are currently available in which a single individual was successfully treated with hypnosis on two separate occasions separated by a considerable time period and, therefore, it was thought that this case may be of interest to readers of this *Journal*.

History

When seen on the first occasion, the patient presented as a pleasant articulate 16-year-old Caucasian female who was referred to the author at the suggestion of the dermatologist who had been treating her for bilateral plantar warts for somewhat over a year. The warts had, in fact, been present since the patient was 9 years old. Medical therapy had included the application of liquid nitrogen and other topical agents. The patient reported that these had been somewhat helpful since the warts had “come and gone” (i.e., increased and diminished) several times. She reported that at one point they had “almost gone,” but rapidly reappeared when treatment was discontinued. On the most recent dermatological consultation, the patient was offered the options of laser therapy, extensive surgery, and hypnosis. When she learned that neither of the first two would assure that the warts might not recur, she agreed to referral for hypnosis.

The patient described her belief that the warts had been contracted “in the pool” where, as an active competitive swimmer, she spent considerable time. She added that they had seemed to become more troublesome during the swim season. The warts were not described as being particularly painful, but their location, on both heels, was noted to be “annoying.” She described herself as being “sick of them” and as wanting them “to go away.” She stated that she had been led to believe that with the medical treatment that had been carried out thus far, “the average person would have gotten rid of them by now.”

The patient reported no prior history of mental health contacts and had no prior experience with hypnosis, but did mention that her mother had known people who had hypnosis for childbirth and that “it had worked.”

Treatment

Hypnosis was explained to her as being a process in which she could learn to focus her attention and that she would be in full control of the experience. An initial eye roll test (Spiegel & Spiegel, 1978) resulted in a response rated as a 2 out of 4 and hence could be interpreted as indicating a modest capacity for hypnotic responding. Initial induction was accomplished by eye fixation with upward gaze, eye closure, and deepening by backward counting from ten to one together with imagery of descending a staircase. Imagery of a relaxing pleasurable scene was suggested based on her description of her favorite situations; that is, stretched out on a blanket on the grass with her cat or relaxing in a tub of warm water. After approximately 15 minutes devoted to a gradual induction and deepening, communication via finger signals was established and an inquiry was conducted during which the patient indicated that she was comfortable with the idea of ridding herself of the warts and that she had no need to

retain them.

Direct suggestions were then given to the effect that she would give her body permission to do all that was necessary to restore the skin in the affected areas to its normal healthy condition. She was also requested to visualize the way she would like the skin of her heels to appear.

Following preparation for re-induction on subsequent meetings, trance was terminated by having the patient count from one to five. She emerged rapidly from trance, reporting having felt "very relaxed" and estimating the duration of the experience as having been approximately 15 minutes, with the actual elapsed time having been 35 minutes. The patient's mother had been present during the entire procedure.

On the second treatment session, one week later, the patient reported no major changes in the warts, but noted that they had not gotten worse, as had often been the case during a period of active swimming practice and competition such as the one in which she was currently engaged.

A similar induction procedure was conducted but with the addition of a successful right-hand levitation. Right-arm rigidity was suggested and trance was tested by challenging the patient to bend her arm, which she was unable to do until given permission to do so.

Similar suggestions were given; that is, that her body would do all that was necessary to cause the warts to clear up and disappear. Suggestions were also given that she would feel some cooling of the affected areas as she visualized her heels with "clear, natural, pink healthy skin."

At the third treatment session, two weeks later, the patient reported that the warts had completely disappeared from her right heel and that her left heel was clear, but with a slight amount of tissue still being "raised up." She described her heels as being "clean and real nice" and stated that since the initial onset of the warts years ago her heels "had never been as good as this." Her parents confirmed this. She stated that the disappearance of the warts was "weird" and that it "seemed like it just happened overnight."

A further hypnotic induction was carried out essentially replicating the prior session. In addition, suggestions were given that she would be able to induce a self-hypnotic state by the means she had learned and that further visualization could be carried out in order to "continue the effect." She subsequently reported that during the trance she had noticed a slight temperature change characterized by a "line drawn across my ankle, above which the skin would not cool, but instead got warm." A brief telephone contact several weeks later indicated that her condition remained quite satisfactory.

Seven years later, the patient contacted the writer to request assistance with another group of warts, this time on her right index and middle fingers. When seen, she presented now as an attractive young woman who reported that there had been no recurrence of the plantar warts in the 7 years since the initial hypnotic treatment. She did, however, note that the warts on her fingers had been present for approximately 6 years, and that she had sought dermatologic consultation only when they had begun to enlarge and spread during the previous 10 months.

Medical therapy had again involved liquid nitrogen and Duofilm. She felt that there had been some improvement in her condition, but that the consultation with several other dermatologists had been unsatisfactory because each had informed her

that the warts “had gone” even though she did not feel that this was the case. (The warts were, in fact, plainly evident to the writer at the time of this second contact, and the observations of the dermatologists she had consulted remained inexplicable.) The most recent dermatologist had, in addition to medical treatment, suggested that she think of the warts as responding to her placing her hands in warm water while thinking of the warts as “being gone” and her hands as “being perfect.” She had also been instructed to visualize water running under the skin of her hands and there being “nothing there to interfere with it.” She had attempted this repeatedly, but reported that she had been unable to picture her hands without the warts. Nevertheless, she felt that some progress had been made.

The patient reported having been quite busy for some time preparing for her upcoming marriage. Indeed, it was the fact of her impending marriage, some two weeks hence, that had led her to request hypnotic treatment now. She anticipated having to shake hands frequently with guests and family members on her wedding day and both she and her fiancé wanted her to be rid of the warts for that occasion.

On interview, she described herself as “not sold on hypnosis” but as being more accepting of the value of “positive thinking.” She indicated, however, that she did feel that hypnosis had “made a difference” in her prior therapy. She described her father as having recommended that she again consult with the writer for hypnotic treatment and added that “Since he’s willing to pay for it, I’ll do it.”

The hypnotic intervention on this second occasion consisted of a single session, using an induction essentially identical to that employed previously. Finger signals were again used to determine that she had no need to retain the warts. Suggestions again involved her using “all the resources of mind and body to do whatever is needed to eliminate the warts.” Specific suggestions at this time emphasized that these bodily resources would “identify, destroy, and dispose of the viral invader of your fingers.” It was also suggested that she would sense a throbbing or tingling feeling in her fingers as this occurred. Finally, imagery of her fingers having “clean, clear, smooth, healthy, pink, natural skin” was suggested.

An appointment was made for a second session 12 days later, but 5 days after the first session the patient called and left a message canceling this second appointment, stating that “the warts are all gone.” In a brief phone conversation on the day of the canceled appointment, she reported that she had seen her dermatologist since the hypnotic session and that he had confirmed that the warts had fully regressed. The patient described having used “positive thinking” while holding her hands in warm water and that she had become able to do this even without the aid of warm water immersion. A follow-up phone conversation several months later confirmed the continuing absence of the warts.

Discussion

Several factors are of interest in this case. First, it is noteworthy that the patient was able to achieve rapid regression and disappearance of two separate outbreaks of warts, each of which had been present for at least 6 years. The possibility of spontaneous regression after this extended a course would appear to be quite low since spontaneous regression is generally reported to occur over a shorter period of time (Lynch, 1982). The patient had, in each instance, been receiving conventional medical treatment; in the first instance, for a period of 1 year and, in the second, for 10

months prior to the hypnotic intervention. While the rapid response occurred immediately following the hypnotic intervention, one cannot rule out the possibility of 1) a delayed response to the medical treatment or 2) an interaction between the hypnotic procedure and the medical treatment, which allowed the medical treatment to become more efficacious.

Secondly, on both occasions, the patient appeared to have a low level of belief in the efficacy of the hypnotic intervention. Thus, the hypothesis that “believed in efficacy” plays a central role in hypnotic treatment of warts (Johnson & Barber, 1978) is not supported by this case. It has been reported that high expectancy of successful hypnotic treatment of warts is not necessarily predictive of a positive treatment outcome, but that low expectancy is associated with a negative outcome (Spanos, 1988). In the present case, the patient felt that cognitive factors (i.e., “positive thinking”) could be expected to produce beneficial results, but she did not specifically attribute these results to the hypnotic procedure. It is, of course, possible that her belief in the use of “positive thinking” may have played a significant role in the positive results achieved.

Third, although no extensive formal assessment of the patient’s level of hypnotic capacity was undertaken, the clinical impression was certainly that, despite her skeptical attitude and her low eye-roll score, she was able to experience an adequate level of trance depth. The reports available on the relationship between hypnotizability and successful treatments yield mixed results. Studies that used nonstandard measures of hypnotizability have found a relationship between hypnotizability and wart loss (Asher, 1956; Sinclair-Gieben & Chalmers, 1959; Ullman & Dudek, 1960), while those that have assessed hypnotizability by more rigorous means have not found any such relationship. (Spanos et al., 1988; Surman et al., 1973).

All the limitations of single case reports are also obviously present in this case, but it could be argued that somewhat greater significance could be attributed to this case because of the unique opportunity to conduct a second and apparently equally successful trial of the hypnotic procedure in the same subject following an interval of 7 years. In that sense, one might consider this to have been an instance of a within-subject repeat measures model of single subject research.

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