

Hypnosis/local anesthesia combination during surgery helps patients, reduces hospital stays

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Using a combination of hypnosis and local anaesthesia (LA) for certain types of surgery can aid the healing process and reduce drug use and time spent in hospital, anaesthesiologists have found. The combination could also help avoid cancer recurrence and metastases, according to new research to be presented today (Sunday) at the European Anaesthesiology Congress in Amsterdam.

Professor Fabienne Roelants and Dr. Christine Watremez, from the Department of Anaesthesiology at the Cliniques Universitaires St. Luc, UCL, Brussels, Belgium, studied the impact of using LA and hypnosis in certain kinds of breast cancer surgery and in thyroidectomy (removal of all or part of the thyroid gland). "In all of these procedures local anaesthesia is feasible but not, on its own, sufficient to ensure patient comfort," says Professor Roelants.

In the first study, 18 women out of 78 had hypnosis for a number of breast cancer surgical procedures – quadrantectomy (partial mastectomy), sentinel node biopsy (examination of the first lymph node or group of lymph nodes likely to be reached by metastasising cancer cells) and axillary dissection (opening the armpit to examine or remove some or all of the lymph nodes) – while the rest had general anaesthetic (GA) or the same operations. Although the patients who were hypnotised spent a few minutes more in the operating theatre, opioid drug use in the first group was greatly diminished, as was time in the recovery room and



hospital stay.

In the thyroid study, the researchers compared the outcomes of 18 patients in the LA/hypnosis group with 36 who had GA. Both groups had video-assisted thyroidectomy, in an attempt to decrease the invasiveness of the procedure without reducing patient comfort. Once again drug use, recovery room and hospital stay times were greatly reduced among the LA/hypnosis group.

"In addition to reducing drug use and hospital stay time, being able to avoid general anaesthesia in breast <u>cancer surgery</u> is important because we know that local anaesthesia can block the body's stress response to surgery and could therefore reduce the possible spread of <u>metastases</u>," Professor Roelants will say.

"Together with other anaesthesiologists at the hospital, we are specialised in hypnosis," says Dr. Watremez. "Although there are special precautions to be taken – for example, only the hypnotherapist should talk to the patient during the procedure and should avoid negatives, which unconsciousness cannot handle, and the surgeon needs to be gentle, avoid any tugging in his movements, and be able to remain cool in all circumstances – it is a straightforward procedure and appreciated by the patients.

"Imagine you are driving your car. You suddenly realise how far you have driven, but for a long time your mind has been elsewhere. This is extremely common, and is nothing more nor less than a mild hypnotic trance – a modified state of consciousness, with a different perception of the world. The principle of hypnosis is to focus one's attention on one particular point," she says.

That point may be eye fixation, progressive muscle relaxation, or the retrieval of a pleasant memory. That hypnosis works in reducing the



perception of pain has been shown by a number of studies, including by imaging the brain with position emission tomography (PET). Similar effects have been shown by using functional magnetic resonance imaging (MRI). Exactly how hypnosis works in this respect is still under discussion. Some researchers believe that it prevents information from reaching the higher cortical regions that are responsible for the perception of pain. Others believe that it permits a better response to pain by activating pain-inhibiting paths more effectively.

"There is still a lot of debate around the exact mechanism that allows hypnosis to reduce pain perception," says Professor Roelants," but what it absolutely clear is that it does so. The result is that one third of thyroidectomies and a quarter of all breast cancer surgery carried out at the UCL hospital are performed under local anaesthetic with the patient under hypnosis."

There are no sex or age differences relating to susceptibility to hypnosis, the researchers say. If the patient is motivated, ready to co-operate, and trusts the doctors, hypnosis will work. In addition to use in <u>breast cancer surgery</u> and thyroidectomy, the practice can be used in a number of other surgical procedures, for example carotid artery surgery, inguinal hernia, knee arthroscopy, gynaecological surgery, ophthalmology, ear nose and throat, plastic surgery and egg retrieval for fertility treatment.

"We believe that our studies have shown considerable benefits for the LA/hypnosis combination, and that such benefits are not only for patients, but also for healthcare systems. By using hypnosis combined with LA we can reduce the costs involved in longer hospital stays, remove the need for patients to use opioid drugs, and increase their overall comfort and satisfaction levels. To date there are few publications about the use of hypnosis in surgery, and we hope that, by contributing to the body of evidence on its efficacity, our research will encourage others to carry out this procedure to the advantage of all



concerned," Dr. Watremez will conclude.

Provided by European Society of Anaesthesiology

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