Using hypnosis in dentistry

Mohan Lal Photay discusses how to make any patient your ideal patient

How do you set about making someone your ideal patient when the first thing they say when they walk in is “I hate the dentist”? The clinical smile team composed of receptionist, nurse through to the dentist have been conditioned to hearing this for so many years that they begin to believe it. For so many years I have heard a response like “I know” or “yes, not the most pleasant of experiences” or “I understand”, yet there is a way to respond to this type of reinforced negative belief. When you read further it will become clear that it is only this negative belief that keeps you and your patient from sharing a more pleasant experience.

I am Mohan Lal Photay (BSCH) 1998 and I trained at the Birkbeck College UCL in Clinical Hypnotherapy. I have treated dental phobia patients using such techniques as EMDR, reframing and NLP techniques to name just three. Prior to this I managed a dental laboratory from 1977. My time now is spent furthering the uses of hypnosis in dentistry.

Reframing

When a patient brings a negative belief or a negative learnt attitude into the surgery you have to gauge whether it is worth challenging or reframing. Challenging the belief could be considered confrontational and should only be undertaken if you are skilled in the technique. My first gambit would be to ‘reframe’. Reframing, as the name applies, is akin to changing the frame around a picture. Deciding which frame to use to achieve the desired outcome is the role of the frame.

In conversational hypnosis reframing is a simple method used to change someone’s mind. Reframing is actually a technique that comes from NLP (Neuro Linguistic Programming), and it does not require the person you are talking with to be in a trance.

First you should not enforce or strengthen their belief by offering in any way an acceptance in what they say. Next, watch your language. More importantly practice how you put together the words that form your next sentence. Your words should create pictures; this is the most important part of the reframing. The better the picture your words create the more effective the reframe.

Now, when the patient says ‘I hate the dentist’, look at the patient with a half-smile and say “and yet how will you feel when you walk out with a smile”. The next stage is important as you should remain motionless without changing your stance, gaze or smile, wait for the patient, who will know they are supposed to give a response. They will question their own statement for validity. Once they question their statement they cannot continue to feel the same way or continue to hold the same belief pattern they arrived with.

As a result they will either strengthen (unlikely) or they will modify (most likely event) the statement. When the patient responds with something like “that would feel good” this is where you need to reinforce their fledgling belief by changing your stance (open), gaze (full and warm) smile (sincere) and saying ‘I am pleased and I will do my best to give you the smile you will smile about. Shall we start?’

Practice reframing; for example if you hear a colleague muttering “she is always mixing the alginate wrong” look at them and say “Always?” Once again the original statement is under scrutiny. When the reframe occurs take it as your queue to offer a way to show the nurse how to mix consistently good alginites.

Anxiety

Remove anxiety and you remove pain. This is not a utopian goal as there are examples of people who have overcome anxiety to such an extent that they can remove themselves from the situation while the dentist performs the treatment. One technique used by some patients who have overcome anxiety is the visualisation of their favourite place of relaxation. Practice use of anchors at this stage will be of profound help when you need immediate relaxation. Anchors are established by a gentle squeeze of the shoulder when the patient gives a positive response or when a patient enters their favourite place of relaxation. Practice use of anchors, as the use of anchors is one of the most powerful techniques to help with overcoming many phobias, anxiety states and beliefs you are likely to encounter as a dentist.

When establishing and creating the patient’s favourite place, use of anchors is a must. Establishing anchors at this stage will be of profound help when you need immediate relaxation. Anchors are established by a gentle squeeze of the shoulder when the patient gives a positive response or when a patient enters their favourite place of relaxation. Practice use of anchors, as the use of anchors is one of the most powerful techniques to help with overcoming many phobias, anxiety states and beliefs you are likely to encounter as a dentist.

Once the patient is able to go to their favourite place of relaxation ask them to go there in their mind. Help them with encouraging suggestions and remember the more visual the pictures the better. One thing they will notice is that while they were in their favourite place of relaxation, time seemed to pass quickly. This pseudo progression of time helps the clinician to treat while the patient is relaxed.

A thorough understanding of the techniques of NLP, hypnosis and visual direction can help the dentist introduce some calm into the dental procedure. Patients who are taught self-hypnosis and the concept of the favourite place can become some your best patients.

Further reading, as a first book I would recommend the ever popular Hartland’s Medical and Dental Hypnosis [Paperback], author David Waxman.

Could Hypnosis be the way forward to calming patients?