## Impact of hypnotherapy on weight loss



The battle of the bulge: a war of two minds!

Obesity in the developed Western world is increasing. Research from the World Health Organisation (2016) states that worldwide obesity has more than doubled since 1980. More people die from being overweight and obese than they do being underweight. Obesity, however, is preventable so why, in an age when we have easy access to healthy, fresh food is there an obesity explosion?

The NHS Choices website (2016) gives various reasons as to why people become obese. A combination of unhealthy food coupled with inactive life styles causes health problems in adults and children. Being overweight can lead to issues of low self-esteem, lack of confidence and low mood but some of these issues may be present anyway and underlie the eating difficulties (Heap and Aravind 2002).

There are also some health and genetic conditions that can cause a person to become overweight, such as hypothyroidism and polycystic ovarian syndrome. Medications can contribute to this as well as a lack of sleep. Sleep helps to maintain a healthy balance of hormones that make you feel hungry or full. (National Heart Lung and Blood Institute 2012).

In the western world, there is a greater abundance of food available including a great proportion of fast food restaurants and a huge amount of easily accessible snack foods with a high calorie-to-nutritional-value ratio.

The fridge means that foods of all descriptions are constantly accessible.

(Heap and Aravind, 2002). This, coupled with an underactive lifestyle, means that the pounds pile on.

To lose weight successfully, obese people need to reduce their net intake of calories over a period of time – this will depend on how much weight they have to lose. Recommended weight loss is no more than 1kg (2lb) per week; this may be higher, depending on how much weight is to be lost. Studies show that people who lose weight too fast end up putting it back on again (NHS Choices 2016).

In 2010, the Department of Health published a technical report, which outlined daily exercise recommendations for adults and children. Adults should spend 150 minutes of moderate-intense aerobic activity such as cycling or fast walking in addition to muscle strengthening activities; e. g. weight training, stair climbing, the use of resistance bands or ankle weights.. This research has been provided to GPs, local authorities, consumer magazines and the basis of the research is freely available for all to read.

Despite all the information in the public realm about healthy eating, exercise and the dangers linked to obesity, the battle of the bulge has never been so prevalent. Regardless of the amount of information and knowledge that people have, there is a chasm between thought/will and action: it's as if the conscious mind is at war with the sub-conscious.

For clients who visit a hypnotherapist to lose weight, there is every possibility that they are already experts in dieting and calorie values. However, unless the hypnotherapist is also a registered dietician, it would be unwise to provide any nutritional advice, other than what is readily available online and in books and magazines.

The hypnotherapist can come into their own through 'talking' to the subconscious mind to strengthen the will of the conscious mind. If hypnotherapy sessions go hand-in-hand with the client's plan to reduce calorie intake and increase activity levels, there is every chance for lasting success in weight reduction.

Previous research has shown remarkable results using hypnosis: a research paper (Kirsch 1996) found that the effect of adding hypnosis to cognitive-behavioural treatments for weight reduction found that the mean weight loss was 6. 00 lbs (2. 72 kg) without hypnosis and 11. 83 lbs (5. 37 kg) with hypnosis. An earlier study in 1986 (Cochrane and Friesen) concluded that hypnosis is an effective treatment for weight loss.

Clients should know from the outset that a course of hypnotherapy sessions will not be a quick fix but rather a slow, gently way to lose weight and make healthy eating a lifetime habit. Hypnotherapy will be a new approach to their problem that involves altering their eating habits whilst still enjoying food yet losing weight (NCHP 2011).

Clients will have to do some work outside of the sessions which will be reinforced through tailored hypnotherapy to ensure that they get the best outcome. This work may entail keeping a food diary and recording all exercise/physical activity undertaken during the time between sessions. However, this is something that therapist and client should make a joint decision on as each person is different (Heap and Aravind, 2002).

Hypnosis isn't meant to be a 'diet' but a tool to help people be successful with their weight loss programme by addressing underlying psychological https://assignbuster.com/impact-of-hypnotherapy-on-weight-loss/

problems that cause them to dislike exercise, binge eat, or eat mindlessly. It will help to identify the triggers and change the way clients think about food and eating, allowing them to be calmer and more relaxed in their lives.

A full assessment to establish what type of eater the client is should be undertaken at the first assessment e. g. habit eater or compulsive eater as this will dictate the approach taken. There is a difference in the way that compulsive eaters are treated; an approach much like smoking cessation is taken but over a longer period of time, inducing relaxation and constant suggestions of less, less, less (NCHP 2011).

Once you know when and how the client overeats, the hypnotherapy sessions will be tailored accordingly and would include ego-strengthening along with various methods of including suggestions: i. e. metaphor, psychodynamic methods, active-alert methods (Heap and Aravind, 2002).

The evidence suggests that, if the client plays an active role in their weight management, hypnotherapy can really help people to lose weight and to change their way of eating for good. Unlike smoking cessation, which is one session, weight management takes place over a course of sessions and allows a professional relationship to build between client and therapist; a relationship that may call a truce to the war between the conscious and the sub-conscious mind.

## Bibliography

Cochrane, G. and Friesen, J. (1986) Hypnotherapy in weight loss treatment Journal of Consulting and Clinical Psychology Vol 554 (4), August 1986. Available fromhttp://psycnet. apa. org/psycinfo/1986-30794-001[Accessed 08. 02. 17]

Department of Health (2010) *Physical Activity Guidelines in the UK: Review and Recommendations* . Loughborough: Loughborough University.

Heap, M. and Aravind, K. K. (2002) *Hartland's Medical and Dental Hypnosis* . 4 <sup>th</sup> edn. Edinburgh: Elsevier Health Sciences

National Heart Lung and Blood Institute, *What causes overweight and obesity?* (2012) Available fromhttps://www. nhlbi. nih. gov/health/health-topics/topics/obe/causes. [Accessed 07. 02. 17]

NCHP (2011) Foundation course notes. Loughborough: NCHP

NHS Choices - Work out how much weight you need to lose (2016)

http://www. nhs. uk/Livewell/weight-loss-guide/Pages/set-your-target-weight. aspx[Accessed 07. 02. 17]

NHS Choices – *Causes of Obesity* (2016). Available fromhttp://www. nhs. uk/Conditions/Obesity/Pages/Causes. aspx[Accessed 08. 02. 17]

World Health Organisation – *Obesity and overweight* (2016). Available fromhttp://www. who. int/mediacentre/factsheets/fs311/en/[Accessed 08. 02. 17]