

# The Hypnosis Examiner



## HAPPY NEW YEAR: “2020”

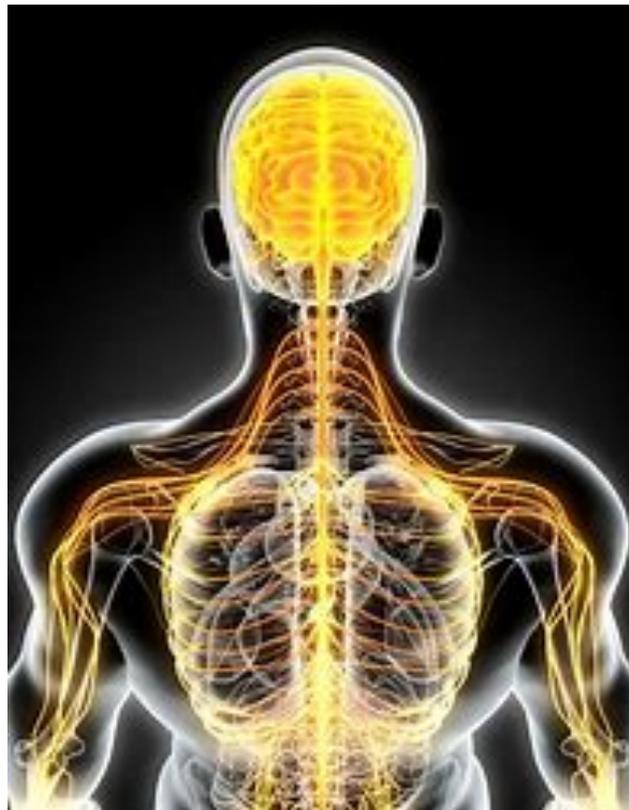
Each new year deserves its own very unique beginning. You’ve never seen this one before so give it an opportunity to produce the best year you’ve seen yet!

Like the new year, give yourself the same unique opportunity to produce a better you than the previous you without preconceptions or lingering prejudice.

One way to make this happen is to extrapolate all the positive experiences from the previous year and carry them forward into the new. Then permit them to grow and flourish throughout the year into a new and better you!

*-The Editor*

## Feature Article: “MARVELS OF THE HUMAN BODY”



The marvels of science and technology in the 21st Century can leave you in a sense of absolute awe! Technology moves so fast these days that you can often find yourself struggling to keep up with the latest in technological advances not only in your community but in outer space as well! What about that International Space Station floating above our heads? Amazing!

BUT, have you EVER considered the marvels of the human body? There are more amazing events happening “within” us than there are happening around us. We generally take for granted what the human body can do for us UNLESS, we encounter a problem with our health.

So, this year, we will focus our attention in the “Feature” articles on the MARVELS OF THE HUMAN BODY. We will look at some of our more commonly visible body parts, their functions and how they affect our daily lives.

We will first explore the human “EYES & SIGHT” in our next issue.

Sports Page  
 “PROPRIOCEPTION”



Proprioception is a sense or perception, usually at a subconscious level, of the movements and position of the body and especially its limbs, independent of vision. This sense is gained primarily from input from sensory nerve terminals in muscles and tendons (*muscle spindles*) and the fibrous capsule of joints combined with input from the vestibular apparatus of the inner ear. This creates an awareness of the position in space, and of the relation to the rest of the body and of any body part.

Proprioceptive information is essential to the normal functioning of the body's mechanical control system and is normally acquired unconsciously from sense receptors in the muscles, joints, tendons and the balance organ of the inner ear.

To put it simply, proprioception is the sense that tells the body where it is in space. Proprioception is very important to the brain as it plays a big role in self-regulation, coordination, posture, body awareness, the ability to attend and focus, and speech.

Also referred to as “kinesthesia,” proprioception is sometimes described as the “Sixth Sense.”

Proprioception is mediated by proprioceptors, mechanosensory neurons located within muscles, tendons, and joints. There are multiple types of proprioceptors which are activated during distinct behaviors and encode distinct types of information:

limb velocity and movement, load on a limb, and limb limits. Vertebrates and invertebrates have distinct but similar modes of encoding this information.

The central nervous system integrates proprioception and other sensory systems, such as vision and the vestibular system, to create an overall representation of body position, movement, and acceleration.

The sense of proprioception is ubiquitous across mobile animals and is essential for the motor coordination of the body. Proprioceptors can form reflex circuits with motor neurons to provide rapid feedback about body and limb position. These mechanosensory circuits are important for flexibly maintaining posture and balance, especially during locomotion. For example, consider the stretch reflex, in which stretch across a muscle is detected by a sensory receptor (*e.g., muscle spindle, chordotonal neurons*), which activates a motor neuron to induce muscle contraction and oppose the stretch. During locomotion, sensory neurons can reverse their activity when stretched, to promote rather than oppose movement.



Proprioception is what allows someone to learn to walk in complete darkness without losing balance. During the learning of any new skill, sport, or art, it is usually necessary to become familiar with some proprioceptive tasks specific to that activity. Without the appropriate integration of proprioceptive input, an artist would not be able to brush paint onto a canvas without looking at the hand as it moved the brush over the canvas. It would be impossible to drive an automobile because a motorist would not be able to steer or use the pedals while looking at the road ahead. A person could not touch type or perform ballet and people would not even be able to walk without watching where they put their feet.

## WHAT ARE PSYCHOLOGICAL DISORDERS?

The term psychological disorder is sometimes used to refer to what is more frequently known as mental disorders or psychiatric disorders. Mental disorders are patterns of behavioral or psychological symptoms that impact multiple areas of life. These disorders create distress for the person experiencing these symptoms.

While not a comprehensive list of every mental disorder, the following list includes some of the major categories of disorders described in the Diagnostic and Statistical Manual of Mental Disorders (*DSM*). The DSM is one of the most widely used systems for classifying mental disorders and provides standardized diagnostic criteria.

### NEURODEVELOPMENTAL DISORDERS -

Neurodevelopmental disorders are those that are typically diagnosed during infancy, childhood, or adolescence. These psychological disorders include:

\* Intellectual disability (*or Intellectual Developmental Disorder*) was formerly referred to as mental retardation.

This type of developmental disorder originates prior to the age of 18 and is characterized by limitations in both intellectual functioning and adaptive behaviors.

Limitations to intellectual functioning are often identified through the use of IQ tests, with an IQ score under 70 often indicating the presence of a limitation. Adaptive behaviors are those that involve practical, everyday skills such as self-care, social interaction, and living skills.

\* Global developmental delay is a diagnosis for developmental disabilities in children who are under the age of five. Such delays relate to cognition, social functioning, speech, language, and motor skills. It is generally seen as a temporary diagnosis applying to kids who are still too young to take standardized IQ tests. Once children reach the age where they are able to take a standardized intelligence test, they may be diagnosed with an intellectual disability.

\* Communication disorders are those that impact the ability to use, understand, or detect language and speech. The DSM-5 identifies four different subtypes of communication disorders: language disorder, speech sound disorder, childhood onset fluency disorder (*stuttering*), and social (*pragmatic*) communication disorder.

\* Autism spectrum disorder is characterized by persistent deficits in social interaction and

communication in multiple life areas as well as restricted and repetitive patterns of behaviors. The DSM specifies that symptoms of autism spectrum disorder must be present during the early developmental period and that these symptoms must cause significant impairment in important areas of life including social and occupational functioning.

\* Attention-deficit hyperactivity disorder is characterized by a persistent pattern of hyperactivity-impulsivity and/or inattention that interferes with functioning and presents itself in two or more settings such as at home, work, school, and social situations. The DSM-5 specifies that several of the symptoms must have been present prior to the age of 12 and that these symptoms must have a negative impact on social, occupational, or academic functioning.

### BIPOLAR AND RELATED DISORDERS -

Bipolar disorder is characterized by shifts in mood as well as changes in activity and energy levels. The disorder often involves experiencing shifts between elevated moods and periods of depression. Such elevated moods can be pronounced and are referred to either as mania or hypomania.

\* Mania is characterized by a distinct period of elevated, expansive, or irritable mood accompanied by increased activity and energy. Periods of mania are sometimes marked by feelings of distraction, irritability, and excessive confidence. People experiencing mania are also more prone to engage in activities that might have negative long-term consequences such as gambling and shopping sprees.

\* Depressive episodes are characterized by feelings of a depressed or sad mood along with a lack of interest in activities. It may also involve feelings of guilt, fatigue, and irritability. During a depressive period, people with bipolar disorder may lose interest in activities that they previously enjoyed, experience sleeping difficulties, and even have thoughts of suicide.

Both manic and depressive episodes can be frightening for both the person experiencing these symptoms as well as family, friends and other loved ones who observe these behaviors and mood shifts. Fortunately, appropriate and effective treatments, which often include both medications and psychotherapy, can help people with bipolar disorder successfully manage their symptoms.

ANXIETY DISORDERS - Anxiety disorders are those that are characterized by excessive and persistent fear, worry, anxiety and related behavioral disturbances. (*See DISORDERS next page*)

DISORDERS *(continued)*

Fear involves an emotional response to a threat, whether that threat is real or perceived. Anxiety involves the anticipation that a future threat may arise. Types of anxiety disorders include:

\* Generalized anxiety disorder (*GAD*) which is marked by excessive worry about everyday events. While some stress and worry are a normal and even common part of life, *GAD* involves worry that is so excessive that it interferes with a person's well-being and functioning.

\* Agoraphobia is characterized by a pronounced fear a wide range of public places. People who experience this disorder often fear that they will suffer a panic attack in a setting where escape might be difficult. Because of this fear, those with agoraphobia often avoid situations that might trigger an anxiety attack. In some cases, this avoidance behavior can reach a point where the individual is unable to even leave their own home.

\* Social anxiety disorder is a fairly common psychological disorder that involves an irrational fear of being watched or judged. The anxiety caused by this disorder can have a major impact on an individual's life and make it difficult to function at school, work, and other social settings.

\* Specific phobias involve an extreme fear of a specific object or situation in the environment. Some examples of common specific phobias include the fear of spiders, fear of heights, or fear of snakes. The four main types of specific phobias involve natural events (*thunder, lightening, tornadoes*), medical (medical procedures, dental procedures, medical equipment), animals (dogs, snakes, bugs), and situational (*small spaces, leaving home, driving*). When confronted by a phobic object or situation, people may experience nausea, trembling, rapid heart rate, and even a fear of dying.

\* Panic disorder is a psychiatric disorder characterized by panic attacks that often seem to strike out of the blue and for no reason at all. Because of this, people with panic disorder often experience anxiety and preoccupation over the possibility of having another panic attack. People may begin to avoid situations and settings where attacks have occurred in the past or where they might occur in the future. This can create significant impairments in many areas of everyday life and make it difficult to carry out normal routines.

\* Separation anxiety disorder is a type of anxiety disorder involving an excessive amount of fear or anxiety related to being separated from attachment figures. People are often familiar with the idea of separation anxiety as it relates to young children's fear of being apart from their parents, but older children and adults can experience it as well. When symptoms become so severe that they interfere with normal functioning, the individual may be diagnosed with separation anxiety disorder. Symptoms involve an extreme fear of being away from the caregiver or attachment figure. The person suffering these symptoms may avoid moving away from home, going to school, or getting married in order to remain in close proximity to the attachment figure.

TRAUMA AND STRESS-RELATED DISORDERS - Trauma- and stressor-related disorders involve exposure to a stressful or traumatic event. These were previously grouped with anxiety disorders but are now considered a distinct category of disorders.

Disorders included in this category are:

\* Acute stress disorder, which is characterized by the emergence of severe anxiety for up to a one month period after exposure to a traumatic event such as natural disasters, war, accidents, and witnessing a death. As a result, the individual may experience dissociative symptoms such as a sense of altered reality, an inability to remember important aspects of the event, and vivid flashbacks as if the event were reoccurring. Other symptoms can include reduced emotional responsiveness, distressing memories of the trauma, and difficulty experiencing positive emotions.

\* Adjustment disorders can occur as a response to a sudden change such as divorce, job loss, end of a close relationship, a move, or some other loss or disappointment. This type of psychological disorder can affect both children and adults and is characterized by symptoms such as anxiety, irritability, depressed mood, worry, anger, hopelessness, and feelings of isolation.

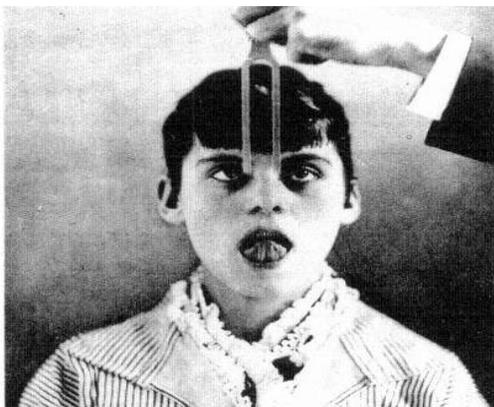
\* Post-traumatic stress disorder (*PTSD*) can develop after an individual has experienced exposure to actual or threatened death, serious injury, or sexual violence. Symptoms of *PTSD* include episodes of reliving or re-experiencing the event, avoiding things that remind the individual about the event, feeling on edge, and having negative thoughts. Nightmares, flashbacks, bursts of anger, difficulty concentrating, exaggerated *(See MORE DISORDERS next page)*



*The Blog Post*  
**“HOME-BASED HYPNOTHERAPY:  
 A GOOD IDEA?”**

*Posted on April 10, 2017*

*This Blog Post is a contribution by Ara Trembly, a Board Certified Hypnotherapist and Licensed Professional Counselor based in St. Marys, GA. He maintains a web site at [www.10-10hypnosis.com](http://www.10-10hypnosis.com) & blog [www.10-10hypnosis.com/blog](http://www.10-10hypnosis.com/blog).*



Today I ran across an interesting article entitled: “Home-Based Hypnotherapy Helps Kids. with IBS.” The subtitle reads: “Non-inferior to individualized hypnotherapy with a therapist.”

The gist of the piece is that a study was done in which kids treated via hypnosis for IBS and related problems using a CD at home were reported to do “as well” as those who actually visited the office of a hypnotherapist for their sessions. While that may seem like hopeful news for those who would rather do their hypnosis at home, it begs a number of questions and omits a number of details.

First and foremost, what was on those CDs? A reading of the fuller journal article tells us that kids used the CD to do “exercises” and that they did so five times per week for three months, but gives no clue as to the content of the CDs or what was involved in the exercises. One would hope that the

CDs were prepared by competent and certified hypnotherapists, but this is not stated.

Another issue is that the kids who got live hypnotherapy only received 6 sessions over the three months (versus the estimated 60 or more sessions on CD for the other group over the same period of time). Thus, the CD treatment modality involved significantly more exposure to the presumably positive hypnosis suggestions that led to some success.

And success is yet another key factor here. According to the study, “After 1-year follow-up, the 62.1% treatment success in the CD group was non-inferior to the 71.0% in the iHT group.” Obviously 62 percent success IS inferior to the 71 percent success rate of the live hypnotherapy group, but statistically, it was judged to be “non-inferior.” When we consider, however, that the CD group had many more exposures to what was ostensibly the same material, the CD success rate should, in fact, have been much higher than that of the live group.

If anything, this study demonstrates the far greater effectiveness of the live model.

This is not to say, however, that listening to CDs at home is not helpful. In fact, when we at 10:10 Hypnotherapy and Counseling do a hypnosis session, it is usually recorded and sent home with the patient on CD to allow listening in between sessions. This amplifies the positive messages of the session and increases the chances of success.

The bottom line is that the best chance of success in your hypnotherapy is achieved when you are in session with a qualified professional who may or may not send home a CD with you in order to strengthen the already powerful positive suggestions in your live sessions.

Do you have an opinion on this topic? If so, let us know!

*\*This blog article is printed unabridged, verbatim, without editing and/or spell corrections. It is not necessarily the same views shared by the editor.\**



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We welcome “your” written material for publication. There are no deadlines for submission. When your article arrives, it will be considered for publication in the next quarterly edition. You do not have to be a journalist or professional writer to submit an article. Just draft it and submit it. We will do the rest. It’s just that simple and easy to do.

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# World Hypnotism Day

## What is World Hypnotism Day?

This is a free event sponsored by thousands of hypnotists around the world. Globally, hypnotists offer special events and appearances to educate and inform the public about the many benefits of hypnotism.

## Do I need an appointment?

No. We encourage everyone to contact a hypnotherapist, ask questions and find out what hypnosis can do for you.

## Have you experienced the Resolution Blues?

Learn how to beat the Resolution Blues and succeed at your goals. What could be a better way to start the New Year than learning about and using the amazing power of your own mind?

## **“FREE EVENT”**

***When:*** Saturday, January 4, 2020

***Where:*** In the privacy of your own home

***Times:*** 9:00 a.m. - 5:00 p.m.

***How:*** It's simple and easy to participate. Choose the option below that's right for you to get involved and try hypnosis during our annual celebration.

1 - Download our **FREE** "Hypnosis HWU" App. Go to "Audios." Select "Relaxation." Then plug in your headphones, listen, and enjoy a beautiful relaxing hypnosis script.

2 - Go to our web site on your desktop, [www.hypnosiswellness.org](http://www.hypnosiswellness.org). Go to "Audio Downloads" and click. Select "Self-hypnosis for Relaxation and Stress Reduction." Then plug in your headphones, listen, and enjoy a beautiful relaxing hypnosis script.

3 - Can't get the app on your device? Get our app on your favorite mobile device by going to [www.hypnosiswellness.org](http://www.hypnosiswellness.org) on your device. It will redirect you to choose the option to load our *Mobile Web App* on your favorite device. Follow the instructions. Then select the "Relaxation" audio. Listen and enjoy the beautiful relaxing hypnosis script.



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Learn the difference between “Fact or Fiction” about common hypnosis myths and misconceptions.



## COMEDY CORNER

This little corner is designated to helping you get through your day with a little bit of humor.

See if this gives you a little chuckle:

“A woman has twins and gives them up for adoption. One of them goes to a family in Egypt and is named “Ahmal.” The other goes to a family in Spain. They named him “Juan.”

Years later, Juan sends a picture of himself to his birth mother. Upon receiving the picture, she tells her husband that she wishes she also had a picture of Ahmal. Her husband responds, “They’re twins! If you’ve seen Juan, you’ve seen Ahmal!”



**HEXAKOSIOIHEXEKONTAHEXAPHOBIA**

Hexakosioihexekontahexaphobia (*can you even pronounce that?*) is the fear of the number 666. The reason for this such a fear is that 666 is the Number of the Beast. This word is derived from ancient greek roots hexakósioi , "six hundred", hexékonta , "sixty", hék , "six", and phóbos , "fear"; literally meaning "fear of six hundred sixty-six". This fear is not common and it doesn't affect their lives much. Severe sufferers may try to avoid the number at all times, like blocking the cable channel 666, driving to change their odometer number from 666 to 667, or changing the address from 666 to the one adjacent to it, for example. In 1989 after Ronald Reagan was elected as the United States president, he and his wife Nancy moved to a new home in the Bel-Air section of Los Angeles on 666 St. Cloud Road. They soon changed their street address to 668 due to their fears of the former number.

It is generally accepted that phobias arise from a combination of external events (*i.e. traumatic events*) and internal predispositions (*i.e. heredity or genetics*). Many specific phobias can be traced back to a specific triggering event, usually a traumatic experience at an early age. Social phobias and agoraphobia have more complex causes that are not entirely known at this time. It is believed that heredity, genetics, and brain chemistry combine with life-experiences to play a major role in the development of phobias.

As with any phobia, the symptoms vary by person depending on their level of fear. The symptoms typically include extreme anxiety, dread and anything associated with panic such as shortness of breath, rapid breathing, irregular heartbeat, sweating, excessive sweating, nausea, dry mouth, nausea, inability to articulate words or sentences, dry mouth and shaking.

**T.H.E. BACK ISSUES**

Missed some issues last year? No problem! You can order back issues to be sent directly to your inbox and catch up on the news easily.

Select from the issues below:

**January 2019 - Vol. 8 #1**

Feature: Habits-What Are They: Part 1

**April 2019 - Vol. 8 #2**

Feature: Good Habits: Part 2

**July 2019 - Vol. 8 #3**

Feature: Bad Habits: Part 3

**October 2019 - Vol. 8 #4**

Feature: Changing Habits: Part 4

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**T.H.E. Editor**

**"9 Years of Publication"**



*Jonathan B. Walker,*  
**PhD, LPN, RMT, CSH, MHT**

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