



## **Toilet Phobia and Clinical Hypnotherapy**

### ***Chat Room Session on Monday 19<sup>th</sup> May with Ursula James***

*“Ursula James is a visiting teaching fellow at Oxford University Medical School, honorary lecturer at St George’s Medical School and Barts and the London Medical School and a patron of the National Phobics Society and the National Centre for Domestic Violence (NCDV).*

*Ursula hosted her own TV series on Channel 5 last year ‘Sex Lies and Hypnosis’ which was a serious look at the use of hypnotherapy in relationships. She has also written three books, the clinical hypnosis textbook, you can be amazing, and you can think yourself thin.*

*Her organisation, Thames Medical Lectures, trains doctors in the use of clinical hypnosis and she teaches at 14 medical schools including Oxford and Cambridge.*

*Ursula set up the hypnotherapy volunteer system with the NPS some 7 years ago which is still going strong.”*

#### **What is clinical hypnotherapy?**

Hypnotherapy is a therapy that uses the hypnotic state; this is a state similar to that of neither being asleep nor awake, with deep relaxation behind it all. This state is a different state of consciousness which can be entered into to allow beneficial corrections to be made to the unconscious mind. This state is created using guided relaxation, intense concentration, and focussed attention. In this state, attention to anything going on around the person is blocked and the person can focus their attention (by the help of their therapist) on specific thoughts or tasks.

#### **Is clinical hypnotherapy like stage hypnosis?**

I wanted to clear up misconceptions people might have and confirmed with Ursula that clinical hypnotherapy is not like stage hypnosis. Ursula said it is absolutely not like this, you are completely in control – aware of what is happening and you can remember everything of importance. She added that no-one can make you do anything you don’t want to do – in hypnosis or out of it.

#### **How does clinical hypnotherapy work?**

Ursula mentioned that some techniques work on “reconnecting” the health response, this works if you can remember what you were like before you had the problem. Ursula gave an example of this in practice; you can try to remember a time when you didn’t have the problem and focus on what was going on then, this is a way of reminding the body how it responded. This is done a few times, first in your imagination and then actually by doing it.

Basically, it is looking back and seeing you didn’t fear it rather than trying to confront it now and come to realise you don’t fear it. Therefore the key to hypnosis is the time before. Ursula suggested this works because memory is malleable. If we can make a connection with a time before we can reinforce the memories – in this case the memories of the health response. Ursula added that it is about making connections on an unconscious or limbic level.

“Titch” mentioned that her problem started when she was 10 or 11 and can’t remember what she was like before then. Ursula mentioned that if you have any good memories from before 10 or 11 you can work on recalling them as a way to access the healthy responses.

Dave mentioned that he had a few sessions years ago and they were based on trying to get to the cause of the problem. He thought that this made the anxiety worse. Ursula mentioned that is only one technique and it does not suit everyone.

### **So, what can be done for people who cannot remember a time before?**

Ursula suggested that sufferers should build their confidence first and then work on mental rehearsal. She mentioned this is all about creating a new memory, which works as a positive connection for future events. Ursula quoted Mark Twain, “I have known many troubles in my life, and most of them never happened.”

She added that part of the problem is predicting it will happen again. “Titch” agreed with this suggesting that she goes to the loo expecting not being able to go when she gets there – so already negatively thinking. Ursula suggested this is the power of the unconscious mind.

Another member asked Ursula if you cannot remember how you were in anxiety provoking situations would it be advisable to picture themselves in similar places before this started and trying to remember that there was no loo problem. Ursula agreed this would be a good approach. This member noted that they would try this as they cannot remember the school loo despite being there until 18 and going hundreds of times. They are therefore going to place themselves in situations like it.

### **What about self hypnosis: Tape Vs Hypnotherapist debate?**

Sandra mentioned she has used hypnosis tapes. Ursula mentioned that self hypnosis can be used as an alternative to seeing a practitioner. Ursula mentioned if people prefer, you can get a self hypnosis CD and make the suggestions for yourself – at home. She added that with a tape, however, you are controlling it yourself and may not make the suggestions properly. “Titch” proposed that both could be used for best results and Ursula agreed. Sandra mentioned a clear advantage to the tape is that it can be done at home with loos nearby(!)

I asked Ursula what tapes she would recommend and she mentioned that she has some self hypnosis CDs on her website ([www.ursulajames.co.uk](http://www.ursulajames.co.uk)). She specifically mentioned the “controlling anxiety” CD produced for the NPS. There are, however, other tapes available including Paul McKenna’s which Sandra mentioned was helpful for her.

### **How many sessions of self hypnosis are required?**

Ursula suggested that self hypnosis taught via the CD would take around three weeks in order to see a benefit.

### **Dave, posed the question, do hypnotists have a real understanding of Toilet Phobia?**

Ursula mentioned that good hypnotherapists should only take on clients they fully understand. She added that a therapist should take the case history and feedback your needs appropriately. Two members mentioned in their experience this had not happened, the therapist’s were not interested in the case history and just went on what was told at the time.

## **I asked Ursula, what are the key things that are apparent, from your experience, when treating sufferers of Toilet Phobia?**

Ursula mentioned that anxiety, habit and predicting negative events are common to all the people she has treated. She also mentioned that there are sometimes general confidence issues. She suggested that reducing any one will help the problem.

## **How is Toilet Phobia treated using clinical hypnotherapy?**

Ursula mentioned that most people just want to get rid of the problem. Ursula noted that everyone is different in how they approach their problem, but there are common elements as mentioned. She suggested that when people are more confident, the problem reduces, but commented the trouble is this can be a chicken and egg situation. She suggests that sometimes it helps to work on general confidence issues and then this has a snowball effect rather than specifically focussing on the problem.

Sandra agreed with the confidence issue in Toilet Phobia, from her experience she mentioned that when an event happens that makes her more confident she does not feel as anxious about the loo. However, two members disagreed suggesting the opposite, they don't have confidence issues, one had spoken at 300 conferences and another is a teacher at a college, but their lives are still affected by Toilet Phobia. Sandra mentioned that confidence is strange; she would rather speak at a conference than be in a social situation.

## **How should someone approach clinical hypnotherapy?**

*Ursula suggested a few steps:*

- 1) Self hypnosis
- 2) Confidence suggestions
- 3) Direct suggestions relating to the situation

Ursula also suggested that if you are going to a practitioner speak to them first and make sure you feel comfortable with who is working with you.

## **How many sessions of therapist led hypnotherapy are required?**

Ursula suggested that three sessions over three months, any more moves into the realms of counselling and psychotherapy. Some members including Cleo were surprised at the low amount of sessions required. With hypnotherapy, after the first session you are meant to feel much better and subsequent sessions are just topping this up. This differs substantially from CBT where it requires long term commitment on a weekly basis. Ursula suggested that a good thing to do would be to use the controlling anxiety CD in the days in between the sessions.

## **Does clinical hypnotherapy work for everyone? What do I do if it doesn't work for me?**

As with all therapies and medication, they do not work for everyone, however, I was interested in whether you have to be susceptible to experience hypnotherapy. Ursula suggested that all personality types are suitable for hypnotherapy; however, some people are more susceptible than others. Ursula mentioned that counselling or cognitive behavioural therapy (CBT) would be another step. She added that for some people, removing themselves from the source of the stress is the answer for example, a stressful job.

## **What is the difference between CBT and Hypnotherapy?**

CBT therapy is about changing negative behaviours that have been learnt whereas hypnotherapy is about making connections to the positive using the unconscious. The behaviour and thoughts change as a response to the newly connected memories, rather than trying to consciously change.

## **What about success rates?**

A few members posed the question about the success rates with hypnotherapy. Ursula mentioned that hypnotherapy is hard to assess through research and there is little co-ordinated research in Toilet Phobia and hypnosis at the moment. This is one of the reasons why it is not available on the NHS.

Ursula mentioned from her experience that she has had good success rates with people who could remember a time before, but not so much with the others. She mentioned all of them felt better but the second group tended to relapse.

## **Final questions from members:**

### **What types of suggestions are appropriate?**

Ursula suggested be confident, look forward to the event and remember to focus on the positives and NOT the negatives.

### **Can the problem be cured?**

Ursula suggested the problem can be cured but to be wary of therapies promising cures. Ursula added working on it yourself as well as with a therapist is the best way forward. I suggested that it is all about gaining enough control in order to live with Toilet Phobia and Ursula agreed.

## **Further sources of information**

Ursula suggested two good sources of further information, firstly her own website ([www.ursulajames.com](http://www.ursulajames.com)) for the controlling anxiety CD and secondly ([www.bsch.org.uk](http://www.bsch.org.uk)) for hypnotherapists.

## **What do we do at the National Phobics' Society?**

As Ursula mentioned Clinical Hypnotherapy can be used for people with Toilet Phobia. Through our nationwide network of trained therapists we are able to offer CBT both face to face and over the phone at much reduced rates. If you would like to find out more about the benefits of the society you can visit: <http://www.phobics-society.org.uk/membersservices.php>.

As many of you may already know we have specific funding to support and raise awareness of Toilet Phobia and due to this we offer a monthly professional chat sessions to help likeminded suffers. if you haven't visited for a while, don't worry it is very much open to new members. To find out more you can visit: [http://www.phobics-society.org.uk/condition\\_toiletophobia.php](http://www.phobics-society.org.uk/condition_toiletophobia.php).

If anyone would like any help or support don't hesitate to call (08444 775 774) or email the National Phobics' Society ([support@phobics-society.org.uk](mailto:support@phobics-society.org.uk)).

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