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### Massage and Self-Hypnosis: Methods For Tension Release

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MASSAGE AND SELF-HYPNOSIS :  
METHODS FOR TENSION RELEASE  
METHODS FOR TENSION RELEASE

BY

ROBIN J. MCALISTER

Submitted in partial fulfillment of the  
requirements for graduation with honors  
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## MESSAGE AND SELF-HYPNOSIS: METHODS FOR TENSION RELEASE

### Abstract

In order to determine the feasibility of using self-hypnosis and massage in reducing tension, a survey of modern literature was made. Massage was shown to reduce tightness and soreness in muscles while self-hypnosis served to guide the individual into a state of relaxation. Techniques and methodology were explored and a compilation was given.

### Introduction

In the modern world, the individual is constantly beset with the need to achieve, to be successful, and to be the best. He is pushed to take part in many different activities and be responsible for various projects. Often, these projects must be completed within a specified time. The pressure to perform well can produce tension.

Doubleday Dictionary (Landau, 1975) defines tension as "mental or nervous strain or anxiety". According to Encyclopedia Britannica ("Tension", 1984) tension is "a state of restless unease". By either definition, tension is not a healthy state in which to be for continuous periods of time. Self-hypnosis and massage are two possible methods for relasing tension. Either technique can be employed to aid the individual in reducing stress or tension by guiding him into a state of relaxation. Massage does this by helping remove some of the physical manifestations of tension, such as tightness in the muscles.

Using self-hypnosis, the individual learns to relax his body while keeping his mind alert. A short history of self-hypnosis and massage will be given. The terminology associated with each as well as the techniques employed by both will be explored, beginning with self-hypnosis.

### Development of Hypnosis

The term hypnosis was coined in the nineteenth century by a Scottish doctor, James Braid (Gibson, 1978). Hypnosis comes from the Greek word hypnos which means to sleep ("Hypnosis", 1984). Many people have accepted hypnosis as a form of sleep. The hypnotic trance, however, is not sleep. Hypnosis is defined as a state of heightened focal concentration accompanied by an increased ability to act on suggestions and a decrease in peripheral awareness (Spiegel and Speigel, 1978; Walker, 1975). Essentially, all hypnosis is self-hypnosis in that it is the individual who allows himself to enter a hypnotic trance with the hypnotist acting only as a guide. Typically, self-hypnosis is associated with a light, self-induced trance that is entered by relaxation techniques. Self-hypnosis is closely related to meditation. Both have as a final goal relaxation of the body and mind. When one is fully relaxed, the body and mind can be expected to perform better.

The first records of hypnotism as it is known today stem from the work of Franz Anton Mesmer in the late eighteenth century ("Hypnosis", 1984; Gibson, 1978). Mesmer, who studied

medicine in Vienna, claimed that he could cure all manner of ills through the wondrous properties of the lodestone and magnet. Mesmer did not use hypnosis. A commission headed by Benjamin Franklin investigated Mesmer's practices and found that they had no scientific value whatsoever. There may have been an element of hypnosis in some of Mesmer's practices. The real value of Mesmer's work is the work he inspired in his students and others of the period that more closely resembled what we know as hypnosis. Up until 1838, when he was ordered by the Hospital Committee to refrain from using mesmerism, it appears that a British doctor, John Elliotson, was performing painless operations at University College Hospital in London (Gibson, 1978). The true facts concerning this are not completely clear. In addition, hypnosis was used in dentistry at this time (Gibson, 1978).

Mesmer had cast a shadow of doubt over the practice of hypnotism by his methods. James Braid attempted to yield creditability to hypnosis by establishing hypnosis as a neurological phenomena (Gibson, 1978). Braid's was the first attempt to explain hypnotism in physiological terms.

As hypnotism became more creditable, others became interested. Sigmund Freud studied and used hypnosis but became frustrated at not being able to predict whether hypnosis would work on a patient (Gibson, 1978). He therefore abandoned hypnosis and developed the technique of psychoanalysis.

Today, the medical use of hypnosis is no longer questioned.

The American Medical Association has recognized the validity of hypnosis as a dental and medical aid (Gibson, 1978). The Association to Advance Ethical Hypnosis was organized in 1955 to establish hypnotists on a professional level with registered nurses, and physical therapists.

### The Hypnotic State

Gould Medical Dictionary defines four different patterns of brain waves: the alpha, beta, theta, and delta rhythms (Osol, 1980). The beta rhythm, low potential fast waves of more than thirteen cycles per second is the typical rhythm of the brain when the individual is awake and conscious. Theta rhythm, a pattern with a frequency of four to seven cycles per second, and delta rhythm, a succession of slow waves with a frequency of four or fewer cycles per second are usually associated with sleep. Alpha rhythm appears to occur at the transition state between awareness and sleep. Alpha rhythm ranges from eight to thirteen cycles per second and is accompanied by pleasant, relaxed feelings associated with the hypnotic state. Studies indicate a high incidence of alpha activity during hypnotic trances (Spiegel and Spiegel, 1978). It is inconsistent with EEG patterns observed during sleep. Other studies have shown that people high in alpha wave production tend to be high in hypnotic susceptibility (Bowers, 1976).

Hypnosis has previously been defined as redistribution of attention or a deeper concentration on selected stimuli with diminished awareness of our surroundings. Highly hypnotizable

subjects can process information not consciously perceived better than their low susceptibility counter parts. Bowers (1976) postulates this is a learned behavior. If an individual has to pay attention consciously to every facet of his environment, he will be highly distractable at best. However, it is advantageous to process peripheral information outside of awareness or preattentively. This ability allows man to concentrate intensely on one activity, yet be aware if something demanding his attention should occur nearby. Ernest Hilgard, a professor at Stanford University, considered to be an authority on hypnosis, holds the view that all people begin life with a large capacity for hypnosis but events in an individual's development determine to what degree this capacity is retained (Gibson, 1978). People with high IQ's can usually enter a trance within seconds or minutes at their first session. The ease with which they enter the hypnotic state is possibly facilitated by an increased ability to concentrate or dissociate from their surroundings (Sontged, 1980).

All of the body and its processes are under control of the brain. This control is not always subject to the whims of the will. Still control over the body is managed by the brain. The body reacts in much the same manner to both emotional and physical stress (Sontged, 1980). Hypnosis can be a valuable means of reducing tension caused by stress or anxiety. The use of hypnotic suggestions of relaxation to pursue a goal of physical well-being often has a longer lasting and more powerful result than sedatives (Sontged, 1980). Post-hypnotic suggestion can also be used to

help an individual relax in stressful situations.

### Hypnotic Induction

There are many methods of hypnotic induction. They include progressive relaxation, the three step method, simple induction, the one to twenty counting method, metronome method, A-B-C method, hourglass method, ring of dots, flashlight technique, disguised technique, and waves (Sontged, 1980). Three of these methods, progressive relaxation, metronome method and waves, are well suited for use as self-hypnosis methods. The method described here is one used by Richard Brown, a hypnotherapist and associate professor at Ouachita Baptist University (1984).

Reduce the lighting in the room to be used. Sit up in a chair. Place hands on thighs or on the arms of the chair. The head should be allowed to drop forward so that the chin is resting on the chest. Take three deep breaths. While inhaling slowly, count to five. Count to five while exhaling slowly. While exhaling, imagine pores opening and all the stale air in the body leaving. Imagine, also, that all of the stress and tension are draining away with each breath. After breathing, tell the subconscious several times to relax now. Begin an inventory of the body, concentrating on each part. Visualize the part. See it relaxing. Feel the tension leaving that part. Begin with the muscles of the jaw then go on to the muscles behind the eyes and the muscles of the tongue. The rest of the inventory, starting



with the muscles of the forehead and scalp, is the neck, the shoulders, the upper arm, the lower arm, the hand, the chest, the abdomen, the hips, the upper legs, and the lower legs and the feet. Remember to feel each part relax before proceeding to the next part. Count backward from ten to one saying, "When I reach one, I will be completely hypnotized." Vary the time interval between numbers. Have short intervals at first progressing to longer intervals near the end. After saying "one", repeat, "Now I am completely hypnotized". At this time, post-hypnotic suggestions may be given. Suggestions should be brief and concise. Visualize the instructions, using only one strong picture and one strong word or phrase repeated over and over. Pictures should also be clear and concise but specific and dramatic. Repetition is important. Repeat phrases and pictures several times (Sontged, 1980). To awaken, say, "I am going to count to five very slowly, and when I reach five, I will be wide awake, alert, and feeling very good." Count slowly to five. After each number, reiterate that you are beginning to awaken, feeling refreshed, and alert. Stand up and stretch.

It is a common fallacy that a hypnotist can make a person do anything he wants him to do, even if it is against his will. No one can be forced under hypnosis to do anything they would not normally do (Sontged, 1980). A hypnotist can create images in the subject's mind to which the subject is reacting. Under these circumstances, a subject might appear to be acting contrary to his beliefs when in his mind he is reacting to a different set of stimuli.

### Self-Hypnosis, A Tool to Relaxation

Self-hypnosis is an excellent way to relax. To overcome insomnia, self-hypnosis can be used at bedtime. Approximately 70% of people who use self-hypnosis do so to relax the body and clear the mind (Sontged, 1980). By using the proper post-hypnotic suggestion in self-hypnosis, various conditions from tension to smoking can be treated. However treatment requires the acceptance of suggestions by the individual. Post-hypnotic suggestion can be used to release tension and lower anxiety.

Hypnosis, often in the form of self-hypnosis, has been used in obstetrics since the 1870's to relieve anxiety and tension in nervous expectant mothers (Sontged, 1980). Much of the pain and complications associated with childbirth is a result of the vicious psychosomatic cycle of fear producing tension and pain which in turn produces more fear. Self-hypnosis can help break this cycle of fear and pain. A study done by W. T. Heron and M. Abramson on pregnant women, half of whom were trained in hypnosis and half of whom had no training, showed that the length of the first stage of labor was reduced by approximately twenty per cent and much fewer drugs were used on the women who had received training in self-hypnosis (Gibson, 1978).

### History of Massage

In addition to self-hypnosis, massage can be used to help relieve the physical manifestations of tension. Massage is defined by the Encyclopedia Britannica as "a systematic and

scientific manipulation of body tissues, performed with the hands for therapeutic effect on the nervous and muscular systems and on systemic circulation" ("Massage", 1984). Man has used his hands since ancient times to relieve pain. Following injury, man will rub the body part that sustained the injury. How often does one when fatigued or under pressure, press on the temples or knead the back of the neck? This reaction is often done seemingly without our volition.

The Chinese have used massage for thousands of years in a systematic manner (Tappan, 1980). The origin of Chinese massage is unknown, but it has been suggested that it developed from Chinese folklore. The ancient Greeks also used massage to aid in healing. Hippocrates advocated rubbing or kneading to aid in the healing of an injured shoulder (Beard and Wood, 1964). Plutarch reported that Julius Caesar had himself pinched over his entire body daily to relieve neuralgia and epilepsy (Tappan, 1980). Massage was practiced even on the island of Tonga, where it was known as "toogi-toogi", and on the islands of Hawaii where it was known as "lomi-lomi" (Beard and Wood, 1964).

The word massage actually comes from the Greek meaning "to knead". Following the Middle Ages, one of the first to systematically develop the art of massage was per Henrik Ling of Sweden. Ling is credited with the origination of the Swedish system of massage (Beard and Wood, 1964). Ling based his system on physiology, which was an emerging science at the time. Ling was a gymnastics instructor and a fencing master. Suffering from

rheumatism, he cured himself through the use of percussion. This cure stimulated his interest in massage. Ling was partially responsible for the incorporation of massage in the curriculum of the Royal Gymnastics Central Institute in Stockholm (Tappan, 1980). Because of Ling's introduction of the French terms for massage strokes, much of today's literature continues to use these terms.

Throughout Europe, interest was kindled in massage, stimulated perhaps by Ling's work. In the early twentieth century, Albert J. Hoffa published his Technic der Massage, which is still considered to be one of the most basic books on massage. He described how to execute strokes following an anatomical pattern. Hoffa as a surgeon based his methods on his knowledge of anatomy and physiology. He also advocated training physicians at universities and orthopedic clinics to appreciate the use of massage.

Dr. Douglas Graham and other professionals such as Gertrude Beard and Mary McMillan have done much to interest the medical profession in the United States in massage. Graham published A Treatise on Massage, Its History, Mode of Application and Effects, which received much attention in the United States. McMillan influenced present techniques through her work as chief aide at Walter Reed Army Hospital, where she trained women in massage. Through her published articles in the Physical Therapy Review and her work as an instructor at Northwestern University in Evanston, Illinois, Gertrude Beard has done much to influence massage

techniques in America (Beard and Wood, 1964).

### Basic Massage Strokes

Most texts agree that there are four basic massage strokes, effleurage, petrissage, tapotement, and vibration (Tappan, 1980). Since vibration can be accomplished easily by mechanical means, it is very rarely done with the hands. Vibration is a very difficult method to learn to do manually and is worthless if not applied properly (Oliver, 1980).

Effleurage is used more than any other massage technique. Effleurage is generally considered to be light or heavy stroking of the skin surface. This technique can be used to assess areas of tightness or tenderness and is often interspersed between other strokes. The hand is molded to the part being massaged, and strokes with firm, even pressure. Light or superficial effleurage can aid in stretching muscles and muscle groups as well as assisting venous and lymph circulation. By improving circulation, waste products that often cause soreness in muscles are carried away and nutrition to the muscle is improved along with muscle tone and function. Hoffa advocates an effleurage stroke that uses the knuckles on parts of the body covered by thick fascia (Tappan, 1980). In this stroke, the hand is moved from plantar to dorsal flexion over the body part.

Some systems classify friction separately from petrissage. Other systems include kneading and friction both under petrissage. Kneading consists of grasping muscle tissue and applying

intermittent pressure in a squeezing or wringing motion. This technique can be applied to large muscle groups by using both hands. Kneading, like effleurage, attempts to aid venous and lymph flow by "milking" waste products from the muscle. Friction is a deep circular movement applied against hard underlying parts of the body such as joint spaces or bony prominences. Friction moves the muscles under the skin using the tips of the fingers, the thumb, or even the heel of the hand. This movement can be used to loosen scar tissue, and stretch intra-muscular connective tissue. Petrissage and effleurage are the most common movements used in massage.

Tapotement is not used as often as other techniques, it is used, however, when stimulation is required. Most massage is for purposes of relaxation; therefore, tapotement is often used in athletics where stimulation is a main goal. Any percussive movement of the hands in an alternating fashion is considered tapotement. A series of soft blows with the ulnar surface of the hands is called hacking. Cupping or clapping uses the palms curved in a concave arch in a series of blows. Beating and slapping work in the same manner. Beating, however, uses half clenched fists while slapping uses the flattened palms. Employing this technique imparts warmth and invigoration to muscles and muscle groups.

When the individual is under some form of emotional stress or tension, the muscles of the body tend to tighten or tense as a part of the body's normal reaction of stress. This tension

in the muscles causes a buildup of lactic acid, a waste product of metabolic activity of the muscles in contraction. Lactic acid buildup produces soreness in the muscles. Massage can alleviate this soreness by assisting the venous flow from the muscle. Massage can also help relax muscles which are tensed as a result of stress. Because venous circulation is nearer the skin surface and in order to achieve relief from soreness, most texts recommend that massage be administered in the direction of venous blood flow.

#### Local Facial and Upper Back Massage

The muscles of the upper back and neck and the muscles of the forehead and face are places where tension or stress tends to cause tightness and soreness. A local massage over these areas should help the muscles to relax and the soreness to dissipate.

To begin a facial massage, hands should be washed and dried. Use of a very fine talcum powder will eliminate unnecessary friction (Tappan, 1980). The individual to be massaged should be lying on his back on a table (Beard and Wood, 1964). The practitioner should not have to stoop to reach the individual but should be able to stand comfortably with his weight resting on both feet and have access to all of the part of the body that is to be treated (oliver, 1980). Start with superficial stroking to the forehead. The palms should be placed side by side on the forehead with the thumbs on either side of the midline. Fingers should

be flexed to fit over the top of the head. Gently stroke to the lateral borders of the forehead and return to the starting position. Repeat this stroke twice. Using similar movements, place the palms over the cheeks with the fingertips resting at the hairline. Perform the stroke three times. Continue superficial stroking by moving the fingertips to the temples and placing the thumbs together on the chin. Stroke laterally along the jawline to the ear. Return and repeat two times. Following the same movement, place the thumbs under the jaw and stroke three times to the tip of the ear.

Circular thumb kneading to the forehead is next. Keeping the fingertips at the temple, place the thumbs together in the center of the forehead between the eyebrows. With the thumbs kneading simultaneously in small circles, progress upward to the hairline. Return to the lower border of the forehead placing thumbs more laterally each time. Repeat until the entire forehead has been covered. Do this movement three times.

Deep stroking of the forehead is accomplished by placing the palms together on the midline of the forehead with fingertips still on the temples. With firm pressure, palms should stroke laterally from the midline to the temples. This movement should be performed four times.

In digital kneading from the temple to the shoulder, bring the thumbs into the air and with the fingertips knead in small circles, starting at the temple. Progress following the hairline until the fingers meet at the spinal cord. Starting



downward to the bottom of the neck and continue stroking with the fingers and thumb over the back of the shoulders to their tips. Return hands to the temples and repeat twice. Beginning as previously described, knead in small circles from the temples in front of the ear passing down the neck behind the ear to the tips of the shoulders. Do this movement three times.

Finish the facial massage with digital kneading to the head. With the thumbs at the temples and fingers spread apart, the fingertips placed across the scalp, knead with firm pressure in small circles, a section at a time until the whole head is covered. Fingertips should keep contact with the skin moving the scalp over the skull. Release pressure before moving fingers to avoid pulling the hair.

Before beginning massage to the neck and upper back, some form of lubricant should be applied to the area. Oils or fine talcum powder is recommended (Beard and Wood, 1964). Heavy or viscous oils should not be used. The practitioner should insure that the individual to be massaged does not have an allergic reaction to the lubricant used (Oliver, 1980). All parts of the body that are not to be massaged should be covered so the individual does not become chilled. The individual should be lying on his stomach with a towel or cushion under his forehead so that the face is toward the table.

A local massage for the back of the neck and upper back begins with superficial stroking. Placing the thumbs on either side of the vertebral column on the neck with the tips of the

shoulders picking up the muscle as the thumbs reach the base of the neck. Return to the starting position with a superficial stroke. This movement should be accomplished eight times with increasing pressure each time. By the fourth or fifth stroke, deep stroking should be used continuing with superficial stroking on the return stroke.

The fingertips of the right hand reinforced with the left hand are placed on the left side of the spine at the top of the neck. Kneading in small clockwise circles, progress to the tip of the left shoulder. Return to the starting position with a superficial stroke. This movement should be completed four times on the left side and four times on the right side except that the circles are made counterclockwise.

Beginning again with the thumbs on either side of the spine at the top of the neck, stroke with firm pressure to the tip of the shoulder. Return with superficial strokes. Do this movement six times, decreasing pressure each time to superficial stroking.

To massage the upper back, start on the right side with the right hand at the base of the neck and the thumb on the right side of the spinal cord. Grasp the muscle and stroke to the shoulder. As the right hand completes the stroke, the left hand placed along the spine immediately below where the right hand began its stroke, strokes toward the shoulder. The right hand strokes over the area just covered by the left hand while the left hand strokes immediately below it. This process

should be repeated for the left side with the left hand substituting for the right hand and the right hand substituting for the left.

Begin kneading on the right side using both hands to cover the upper shoulder. The right hand should return with a superficial stroke. Progress down the back to an area below the shoulder blade. Again repeat these movements on the left side, substituting the left hand for the right and the right hand for the left, concluding the local massage for the neck and upper back.

Using massage and self-hypnosis in a novel manner, Billie Oliver, a registered masseuse working in the Arkadelphia area, uses cassette tapes that are played during the massage (1984). The sounds and music on these tapes are arhythmic with a flowing line. She has reported that the tapes tend to help her patients relax, often entering a state similar to a light hypnotic trance.

### Conclusion

Relaxation occurs as a result of the induction itself in self-hypnosis. Through the proper use of post-hypnotic suggestion, this method can be extended to help an individual learn to relax even in stressful situations. This method is quick and easy and entirely voluntary on the part of the individual. Not everyone is susceptible to hypnosis. Massage requires someone else to administer the therapy. Special equipment in the form of a table, a lubricant, and cover is required. By the manipulation of muscle tissue, tightness is alleviated and soreness is relieved by the removal of waste products in the muscle caused by the tensing of

the muscle. Both of these techniques can be successfully employed to remove the symptoms or physical manifestations of stress. Self-hypnosis yields itself for use as a method of conditioning.

By no means are these the only methods by which tension can be reduced. There are various other methods that can be successfully employed to relieve tension. The individual must choose the method that fits his need best. Massage and self-hypnosis have been discussed here as two possibilities.

The hectic pace of today's world makes strident demands on everyone. Each person must learn to adapt to the pressure these demands cause. Only by learning to adapt to this stress can the individual hope to function well as an integral part of the world.

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