

European School of Hypnotic Psychotherapy
- AMISI -

Principles of theory and practice in
neo-Ericksonian hypnotic psychotherapy.

Didactic Theoretical Manifesto: update (2000)

The clinical practice of hypnotic psychotherapy
is presently overcoming a period of relative calm,
and entering an exciting phase of new
discoveries and fascinating possibilities.

(M.H. Erickson)

Foreword and historical context

The present situation of hypnosis and its use to study and cure man is characterised by particular aspects, interpretative hypotheses and results that allow us to draw some conclusions and suggestions to consolidate what we have achieved so far.

After the first great historical phase, during which Mesmer and Puysegur attempted, although tentatively and without a clear direction, to turn hypnosis into a scientific discipline, a second period was gradually introduced by Pierre Janet, Bernheim, Charcot and Freud. They sensed the possibilities this phenomenon could grant, at a clinical and experimental level, and even broadened its basic concept so that it could initially be seen as concrete and feasible. However, after some time, this new interest in hypnosis fell into a sort of clinical torpor, until all such efforts seemed vain or at least presumably insufficient.

What we are living today is a period of rebirth for hypnosis in a psychotherapeutic direction. We are confident that this means the end of its archaeological era, since today's hypnosis has been honoured and officially recognised by the scientific community.

Consequently it is now possible to better outline its practical applications, which derive mainly from Erickson's work and methods, which, compared to its predecessors, can be defined as revolutionary. This new path is historically located at the beginning of the new millennium, a century after Milton Erickson's birth, and it is the most concrete and constructive in the history of hypnosis, since it includes its scientific-therapeutic evolution as a rational clinical application, but most of all because it dispels any doubts on the future of hypnosis. Old concepts have been reviewed, often with some resistance; new ideas have seen the light. As we deepen our knowledge in the field of psychology and neurosciences, it becomes possible to give Erickson's teachings a more enlightened interpretation, and therefore widen its initial field of application according to logical and, when possible, empirical criteria.

From pioneering and authoritative hypnosis to Hypnotic Psychotherapy. Analysis of the School's evolution through the "Didactic manifestos" published in Milan (1995) and Florence (1998).

Erickson himself had already sensed that it was useless, if not utterly dangerous, to study hypnosis as an end to itself. Bearing this fundamental principle in mind, our school has not only widened, but also deepened the study of psychotherapy: the principles and tenets illustrated in 1995's "Theoretical didactic manifesto" already showed our new and advanced approach to the teachings of the School of Phoenix.

After overcoming the stalemate in which Mesmer's and Freud's hypnotic techniques had ended, and leaving aside the authoritative methods to use

suggestion for a direct elimination of symptoms aside, our school embraced the task of setting the theoretical and operative framework for hypnotic psychotherapy. Although the original concepts of the Ericksonian School were preserved, after the Congress held in Milan in 1995 we pursued our studies and collective hypotheses that finally proved that the altered state of conscience we call trance must be sharply differentiated from the psychotherapeutic action, which is the procedure in which trance is used.

In our second "Theoretical didactic manifesto", issued from the Congress held in Florence in 1998, we underlined how the hypnotic state is not "per se" active in hypnotised individuals, that is to say, an unused trance remains an end to itself. An analogical type of communication during a state of wake would likewise produce no results, or at least no direct response from the unconscious.

What we have made clear is that only when the two elements are combined is it possible to obtain positive therapeutic effects.

Our studies and clinical tests should therefore be considered in the light of a new and more advanced theoretical approach, which we define as "neo-ericksonian".

From this starting point, the European School, in line with Erickson's principles, chose an indirect procedure to alter the state of conscience through communication, aiming at curing emotional and personality troubles, where the latter is strengthened by tapping into the resources hidden in the patient's unconscious. This is what hypnotic psychotherapy is about, a discipline that differs radically from other therapies carried out "in" a hypnotic state. Such therapies, which are actually only simple procedures, include for example the direct elimination of symptoms and other direct suggestive techniques which were once used in various clinical specializations, mainly dating back to the beginning of last century.

Our method, instead, is based upon communication and the relationship with the patient; and it is exactly by focusing our studies and clinical observations on these two elements that we hope to gain an ever improving knowledge of the psychic mechanisms representing the basic tools to induce change and heal the patient.

Concerning the therapeutic effectiveness of our method, various wide-range studies are proving that the use of hypnotic psychotherapy according to neo-ericksonian principles often bears better results than other more often applied psychotherapeutic procedures.

In the period going from the two congresses held in Milan and Florence up to now, the clinical data gathered from various sources - which will be illustrated and discussed in our next publications - have proved to be valid also in more wide-ranging and concrete studies.

It is therefore worth mentioning that, in the "Theoretical didactic manifesto" presented on occasion of the Congress of Florence, our School's theoretical didactic program was recognized by the Italian Ministry of University and of Scientific and Technological Research as a therapeutic procedure based on Erickson's principles.

In the same 1998 "Manifesto", we underlined that most therapeutic approaches derive more or less indirectly from hypnosis.

Such procedures now have characteristics of their own because they chose to draw from hypnosis what they thought appropriate, either keeping in line with it or taking a different direction.

As we have underlined before, our form of hypnotic psychotherapy is original, independent and based on different concept and theories in comparison with other forms of therapy. (Mosconi)

Starting from what we have achieved so far, we think we are now able to progress both on a conceptual and on a practical level, always bearing in mind that true scientific research is based on a cautious interpretation of the results obtained.

Our School has given hypnosis a new beginning in the context of psychotherapy. In this new phase we find we should be led by a very flexible theorisation and by the intention to open ourselves to new and different sources of knowledge, such as the very basic concepts of psychotherapy, while at the same time preserving our unique identity. As Cesa-Bianchi said, when a method is contributed to by the collective effort of various specialists belonging to the same school, it becomes imperative to switch from a non-theoretical position to a model, albeit flexible, temporary and open, containing the theoretical points to which we refer, with the purpose of modifying or confirming them as the group's work progresses.

Drawing a non-dogmatic, theoretical line not only does not prevent scientific progress, but offers a solid starting point for discussion both among teachers and students.

The appeal of originality

Hypnosis as an altered state of conscience does not represent an openly recognised therapeutic element "per se", but rather a vehicle for change and healing; the methods to induce it have lost their manipulative and magical aura, which was replaced by a focus on communication and the relationship with the patient, thus making it an necessary tool in the therapeutic procedure.

Such simple but fundamental considerations are the principles with which we are now able to walk along the way that Erickson paved with his working experience. We tried to analyse and understand his original but imperfect method, and the temporary conclusions we have drawn are illustrated in our two previous theoretical didactic manifestos.

In this new phase we are trying to give a theorisation of this Ericksonian model which has remained non -theoretical so far, so that it may still be flexible but at the same time focus more specifically on the relational and communicative aspect, in order to consider some hypotheses for interpretation and gain a better understanding of its power to induce change in patients. We accept the invitation, and also the obligation coming from our experience, to try and give a concrete shape to Ericksonian procedures, to set its points of reference and get to know its traits so that its personality may be defined as a model of its own. Despite this, Erickson's method may also be understood as an integrating or integrable element without losing its identity. But only by identifying and determining its genetic code can it become concrete; otherwise, it runs the risk of getting lost and mixed with more simple procedures, so that the latter become erroneously known as hypnotic techniques. Eclecticism and a possible integration of psychotherapy would follow, as many psychotherapists who borrow therapeutic tools from other schools know very well. Consequently, procedural techniques which are different in nature can be qualified as deriving from hypnosis, as is the case of autogenic training, EMDR or even NLP exercises.

For example, let us suppose that a certain chemical substance is considered as sufficiently valid to be studied, identified and classified with a precise formula making it unique in every aspect. Of course, this substance may be used and employed also in different compounds in order to obtain the desired effect; in this case, however, it will always be defined as a component, more or less catalysing, and the instructions for its use will not be the same as the original substance in its pure form. The general opinion of therapists with a solid experience in the field of hypnotic psychotherapy is that the two theoretical didactic manifestos, with their suggestions for use and the hypotheses formulated, already contain a very well defined theoretical model. Its origin is both inductive and deductive, based on Erickson's experiences, with no strict and dogmatic guidelines but at the same time confirmed by the evolution we have witnessed both in the field of psychotherapy in general, in

common psychological knowledge and, as a consequence, in society at large. (Cesa-Bianchi)

The Ericksonian therapeutic approach does not aim at the mere reduction or elimination of symptoms; targeting the deeper causes of the patient's troubles is what makes it different from any other therapeutic use of hypnosis. Restructuring the patients' personality is the logical completion of the permanent emotional and behavioural changes obtained.

Beyond Erickson

From a certain point of view, this situation reminds of the appearance of the cognitive model in the history of psychology. At the beginning it was openly non-theoretic, not proposing a new theory but rather underlining the limiting and partial character of previous theories. (Cesa-Bianchi). Yet, since the "hypnotic mind" deals mostly with emotions, fears or pleasure, it may appear as very complex, thus justifying perplexity and the formulation of complicated theories. Physiological theories are, to a certain extent, unable to shed light upon psychological phenomena, and the lack of explanation for the mechanisms of conscience may apply to hypnosis as well. But if no research is started in this field and no point of reference is set, no real comparison is possible. On the other hand, we are well aware of how difficult it is to define a set of principles as a pragmatic guide to the practice of hypnotic psychotherapy, if only for the fact that each human mind is unique in its complexity, experience and structure. The results that can be obtained, however, offer us an empiric proof of the reliability of the method examined.

As Fromm said, a scientific theory is always a metaphor representing an analogy which allows it to be "thinkable" for those who want to learn it. Our opinion is that, since hypnosis had to have an intrinsic model and theory, the present objective consists in looking for those hypotheses, not only to make them real so that they can be discussed, as we have written in our manifestos, but possibly to define the theoretical model of today's hypnotic psychotherapy through a series of clinical elements. It may seem bizarre that we, as hypnotic psychotherapists who define ourselves as neo-ericksonian, now want to obtain a theory to define our practice, when Erickson himself didn't feel the need to have one and rather focused on the originality of his method. Knowing how to obtain certain results was more important for him than understanding why it happened; in a way, he opposed an American-style pragmatism to the need for theoretical and experimental knowledge typical of European psychology. However, in other circumstances, he implicitly admitted that of the three elements which compose psychology - theory, experimentation and clinical application - the most important is the search for theoretical formulation and experimental demonstrations. What Erickson feared was that, by formulating a theory, many psychotherapists would feel prompted to operate according to a predetermined and standardised code, while his vision involved a single approach to each single individual, according to their unique way of thinking, acting and feeling, so that the operator wouldn't feel forced to think in terms of problems and rules, but free to perceive and exploit personal and interpersonal differences.

Despite this, we think that the past fifty years, with all the studying, researching and progresses made, full of evolutions and re-elaborations in the field of therapy and psychic analysis, have allowed us to consider this discipline from different point of views, while always maintaining Erickson's objective to access the potential for change to help patients, by means of principles and techniques which form the basis for our theoretical considerations.

Confirming the belief that hypnosis on one side and psychotherapy on the other are the results of the combination of an infinite series of

variables - with the therapist, the patient and the environment as main elements - and are therefore impossible to define does not mean abandoning any attempt to build a theoretical path. Erickson's opinion on the matter suggests that such combinations are contained in and interact in the fundamental territory of communication and personal relationship, where, in turn, they operate on the unconscious and its contents by causing a reaction.

In our opinion, the propulsive action urging therapists to understand the path leading to changes in patients is to be explained in the light of the first two manifestos, which work as a basis for a practical application of the clinical hypotheses concerning hypnotic psychotherapy. They have paved the way to a theorisation of procedures and later widened it by including neo-ericksonian principles; now the circle can be closed by concentrating our efforts on the clinical aspect. We see this as a physiological consequence of Erickson's research.

Neo-ericksonian hypnotic psychotherapy

The unconscious and its nature

Hypnotic psychotherapy, as the source of dynamic psychotherapy and the main road to the psyche (H.F. Ellenberger), is characterised by the fact that it deals with the origin of disease, which was inherited with the same critical tensions and scientific awareness by the most important branches of today's psychotherapy.

Its neo-ericksonian evolution tends more to understanding the dysfunctional aspect of psychological troubles, by acting pragmatically on it and leading patients to their own positive change rather than focusing on the analysis of their past and the symbolic dimension of symptoms. Neo-ericksonian psychotherapists, however, do not deny such possibilities, and while they operate "here and now", they analyse such data according to their deep meaning for the present state of the patient.

As you all know, the fact that individuals physiologically store in the "pool" of their unconscious their own personal experiences and resources to overcome their troubles is a crucial point in Erickson's principles, which defines our procedures as "fundamentally naturalistic" (A. Pennati). In Erickson's interpretation, trance itself, in its daily and regular manifestation, is the catalysing and amplifying ability used by the therapist to lead patients to the solution of their problems. Erickson, together with the various authors who have dealt with this topic (Kihlstrom, Barber, Hilgard, Weitzenoffer, Watkins among others), supposes that each individual's unconscious is the territory where his resources, either known or unknown to him or others, are developed and fuelled. The above mentioned authors agree that all that people learn in their lives, especially in certain periods, is stored in their memory only to be - theoretically - retrieved in different moments and contexts for therapeutic purposes.

(G.P. Mosconi).

Rather than an entity dominated by drives, the unconscious is considered as a resource; we assume the existence of different levels of conscience which are interlinked and combined, where the unconscious stores various functioning modes for the individual to activate and use during therapy. This assumption is absorbed by the neo-ericksonian approach, according to which, in the light of these theoretic elements, individual troubles produce pathologies in proportion to how much patients are aware of the inability to use their resources, although they do not realize it. By increasing potential resources, present but not exploited, personal troubles become more tolerable, and conversely, the less resources we store in our unconscious, the less we need to solve our pathologic problem.

While patients with a considerable quantity of unused unconscious

resources feel more disturbed, those who have less, although suffering with the same objective intensity from the same pathology, have lower expectations and therefore develop less troubles.

This schematic hypothesis allows to identify, during the psychotherapeutic procedure, a goal for the patient, that is, to reappropriate their own hidden resources and consequently a new balance in their Ego. At the same time, however, it becomes clear that it is impossible to cross the line of the patient's potential maturity and take them to a higher development level.

Starting from the same disturbing elements, the therapist's objectives will therefore vary according to the each request, since the final goals will be more or less reachable depending on the potential of the patient. A person suffering from lack of self-confidence or general anxiety is usually aware of his or her behaviour, understands that it is not normal, is unhappy and more or less consciously imagines a way to overcome the situation, but doesn't have the ability to take that direction, or simply doesn't know how to do it. This kind of subjects, who are aware of their inabilities, ask to be accompanied on the right therapeutic path, and then go on to achieve the objectives they know very well but had only imagined. It would be a sort of self-healing, if only it were supported enough in its initial phases.

M. Erickson thinks, and most of the above mentioned authors agree with him, that the awareness of personal resources on behalf of the patient is a precious indication for hypnotic psychotherapists, since it allows them to organize their intervention with the main purpose of getting in touch with those resources so that they can be used in the direction known to the patient.

A subject who is anxious and insecure and is not able to face a particularly stressful situation, such as speaking in public or talking about important personal issues in front of other people, perceives his difficulties, knows his negative reactions and therefore starts building worries that get worse as time goes by and only make the initial anxiety deeper.

This occurs because he imagines, and is practically sure, that he cannot behave like he would like to, or, in other words, because knows he is not able to use the resources present in his unconscious, representing its supporting and defensive elements. It goes without saying that, were he able to use his resources, he would act without the aid of the therapist.

A purse that should be used

Our starting point to widen and complete Erickson's vision is his concept and definition of the unconscious. This said, it is important to take all the elements, either inherited or acquired, that each individual owns into consideration, which represent the potential material to use in our quest for psychological ease and balance. A positive result in well-being may be spontaneously achieved if individuals use the elements they have at their disposal, that is, in the Ericksonian conception, their inner resource, abilities, experiences and so on. The level of balance in each person is totally relative and personal, since it refers to the point of the highest yielding level to be reached by means of such elements, either jointly or separately. Consequently, it is not the difference in volume and quality of the resources acquired by different persons that determines suffering or well-being, but rather the lack or bad use of such resources, and vice versa. As a result, an individual with scarce but fully employed resources has a higher chance to achieve a physiological and subjective state of well-being than a person with a rich legacy which remains unexploited. Uneasiness therefore derives mostly from the awareness of possessing potentially appropriate elements but not being able to use them correctly.

Let's say two people own one purse each, but while one is nearly empty,

the other is full of coins with various values. The former, although having to be thrifty, succeeds in living decorously day by day, and is satisfied with what he has, thus realizing a subjective state of well-being. The latter, instead, cannot open his purse to use what would allow him a to lead satisfying life, and suffers. Therefore, while the former does not complain, the latter is in pain because he knows he would be well if only he could use his coins. However, he cannot do it because he is unable to open his purse and consequently looks for someone who can teach him how to do it. He knows exactly how and when to employ the coins, and what he could obtain from the correct use of them, since he has been imagining that for a long time. Of course, there can be different and more complex situations than the one metaphorically described above, such as an apparent wish to sabotage one's own purse or waste the coins or then again learn new ways to look for additional capital, and so on. In such cases, the psychotherapeutic approach will be more creative and articulate, even though the therapist will still have to consider the various possibilities the patient thinks he has to find satisfaction.

Therapists and their help

The nature of trance

The neo-ericksonian therapist's approach consists in evaluating the unique, specific and personal characteristics of the patient and his troubles, mirrored in his everyday experience. He considers elements which conventionally characterise and define pathologies as of secondary importance, although they are of course taken into account.

Each patient lives his own reality and communicates his unease gradually and in various ways, according to his personal model; the psychotherapist, thanks to his empathy, considers and analyses the elements of that reality as the main indicators of his work. He therefore operates beyond predetermined schemes, and his role is permeated by the contents attributed to him by the patient to achieve well-being.

Operators "listen, observe and take part in the process" (M.H.Erickson), that is to say, they immerse themselves in the problem and share it with the patient. He offers the patient different points of view, although never allowing himself to be overwhelmed by the situation; this way, he can define all the details, interpret the issue and set the goals to be achieved with his contribution.

Learning how to listen, observe and understand are also the most important aspects in the training of hypnotic psychotherapists, which mainly rely on their own personal hypnotic experiences. In his biographical references, Erickson explains that this initial training began in his youth and went on practically his whole life through. Following this model, still very up-to-date, learning activities directed to future hypnotic psychotherapists do not necessarily employ recordings of therapeutic sessions or guides on therapy, but rather exploit multi-level communication tools to look for and employ the applicable resources. As one of his closest students, J. Zeig, once said, when Erickson taught he was also employing hypnosis and when he performed hypnosis he was using psychotherapy.

Erickson's concepts and ethics allow patients to use their own language, to which the operator adjusts his intervention without any rigid restraints, as is the case for other psychotherapeutic procedures. The communicative models used stretch from simple verbalizations to linguistic aspects and elements used in other psychological therapies. This leads to approaching the contents of the unconscious mind by making it accessible to the subject in its various forms, so as to exploit naturally and spontaneously the resources which he is not able to manage due to his uneasiness.

Hypnotic trance should be considered as a natural phenomenon which

normally occurs spontaneously even on a daily basis. This naturalistic approach to inductive procedures is one of the main characteristics of neo-ericksonian hypnotic psychotherapy, which differs in its practical implementation from other psychotherapeutic procedures which add indications, either interpretative, cognitive or behavioural, that would not come natural in that moment, and focus on teaching the patient how to recognize and then use their inner resources.

As a consequence, the productivity of hypnosis shouldn't be assessed on the basis of the "deepness" of the trance, which is not proportional to the therapy's success, since this would mean acting according to a scheme. It's the "how" and "how much" that matter in the evolution of the hypnotic relationship, where answers usually come from a series of internal and external adjustments occurring spontaneously, and not because of predetermined manoeuvres, and take place in the framework of the therapist/patient relationship, that is, when moving away from external reality to focus on the internal one. (G.P. Mosconi)

Trance is the active tool we use to catalyse the qualities present in the unconscious mind, and is made more easily attainable by the induction of a higher activity in the analogical hemisphere during hypnosis, until it becomes more active than the logical hemisphere. And it is precisely the latter, the dominant, analytical and verbal hemisphere, which allows the patient to gradually act according to the change occurred, in particular through a restructuring of the Ego, who is now aware and happy to be able to match real life with his expectations. Nevertheless, during the hypnotic procedure, the behaviour and actions of the two hemispheres are in a certain sense independent from one another; it is therefore possible to assume that the expected changes in patients occur thanks to the changing although isolated action of unconscious processes.

The implementation of abilities known to the patient as the tools for his well-being strengthens the reconstructive stimulus already present in the operator's empathy, and consequently in the intensity of the relationship and communication, which represent the fundamental and distinctive marks of neo-ericksonian hypnotic psychotherapy.

Hypnotic psychotherapists tends more to support the patient rather than guide him, so that by strengthening his resources the latter can find the solution to his problems by himself, according to what he sees as the most expected and natural choice.

According to Erickson, what really matters is what the patient feels, not the words used by the therapist.

The hypnotic reality

As we have explained before, it is very common to find that our patients are aware that their behaviour is wrong or impaired and that they feel they can solve the problem by activating certain elements they possess, even though they realize they cannot use such resources on their own. If we consider our reality mainly as a creation of our brain, hypnotic phenomena can be perceived as a true perception of reality. In such a hypothesis, there is no essential difference between hypnotic hallucinations and a true perception, so that the reality suggested under hypnosis can be lived for real, and the suggestions proposed during hypnosis experienced as if they were true.

Recent studies have discovered that the processes which occur in the human cerebral cortex during imagination and the perception of the external world are very similar, as are the modifications in local blood circulations during visual learning both when an object is materially perceived and when it is only imagined. Moreover, the activated potentials measuring electrical activity in the brain are similar even with different stimulations, such as perception and imagination. (B. Peter). We can therefore assume that, at least in certain hypnotic situations, the perceived and suggested realities are

neurophysiologically equivalent in hypnotized patients, so that states of mind, emotions, feelings and behavioural reactions have the same characteristics found in such situations in real life, or are even more spontaneous.

The originality of hypnotic psychotherapy applied with its basic positive variables, such as relationship, empathy and involvement, lies in allowing the hypnotized individual to retrieve the reality of his uneasiness and search for elements stored in his unconscious so as to use them in the most correct way. In the terms of the metaphor we have used before, we allow him to open his purse and spend his money on what he wants, that is to say, a behaviour he finds satisfying beyond any external suggestion.

Consequently, the therapist generally does not suggest a solution for the patient's painful situation, but rather makes the patient stronger, so that, by an act of progress and maturity, he can use the resources stored in his unconscious to apply the change he feels necessary. The commitment and promise contained more or less explicitly in the therapeutic contract, that is, providing help so that the patient can help himself, are therefore fulfilled.

Hypnotic trance, which is the result of certain procedures, stimulates the emotional hemisphere, thus allowing the therapist to better access the unconscious through the right analogical, creative and stimulating verbal approach. And it is especially during this last portion of the therapeutic path, which of course is not limited to a mere invitation, that the patient creates a reality where he can feel at home and experience the states of mind, emotions and sensation he himself has chosen.

This hypothesis is purposely indicative and schematic, but the logic behind it forms the basis for a theory.

The scheme we have illustrated represents the supporting element for a theoretical basis of our therapeutic practice. Although the means used to achieve this can be expressed in different terms, it cannot be replaced by any other principle characterizing different kinds of psychotherapies, if we want it to be acknowledged as "hypnotic" in the Ericksonian sense.

Research and the future

Neo-ericksonian hypnotic psychotherapy has been gradually shaped in our Association and School, thanks to experiences and reflections characterized by the contribution, both theoretic and operative, of clinical experts with different medical and psychological backgrounds. This represents an exception in the history of psychotherapy, a field where language is often a barrier in the communication between the various currents and orientations.

The ability to welcome and promote diverse contributions can be considered as one of the distinctive marks of the hypnotic model, a tool able to accept and transform existing resources in an absolutely unique manner. The particular nature of hypnotic psychotherapy - the central role of relationship, the use of trance to access the unconscious in a procedural strategy based on a kind of communication, both verbal and non verbal, which is strongly conceived to activate innovating resources and abilities - is so deeply linked to the model that it permeates any concepts contained in it, while at the same time preserving its unique character.

In any case, it is an active process stimulating new reflections and sets new researching goals.

At a theoretical and clinical level, the studies we are presently conducting in our School aim at achieving a better understanding both of physiological and experimental aspects, and of the theoretical and clinical principles of our discipline.

In our experimentations we are analysing the physiological and experimental aspects of altered states of consciences, while in the clinical area we tend to focus on the observation and practical application of neo-ericksonian principles.

As we consider our future, we find it necessary to set new methods to research and validate therapeutic effectiveness, by identifying, among clinical operators, a common therapeutic approach with various applications, so that the results can be considered in empirical terms.

Bibliography

- 1) A.M.I.S.I. Notes for a theorisation of hypnotic psychotherapy. (AA.VV.) First theoretical didactic manifesto. Ed. AMISI, 1994
- 2) A.M.I.S.I. Hypnosis, hypnotic psychotherapy and "neo-ericksonian" principles.
Second theoretical didactic manifesto: update. (AA.VV.) Ed. AMISI, 1998
- 3) Erickson M. Le nuove vie dell'ipnosi (The new ways of hypnosis), Ed. Astrolabio, Roma 1978
- 4) Erickson M. Opere (Works), vol. I, Ed. Astrolabio, 1982, Roma
- 5) Erickson M. Opere (Works), vol.II, Ed. Astrolabio, 1982, Roma
- 6) Mosconi GP. Teoretica e pratica della psicoterapia ipnotica. (Hypnotic psychotherapy: Theory and practice) Ed. Franco Angeli, Milano,1998
- 7) Cesa-Bianchi M., Calzeroni A., Lanzini I., Pennati A. I principi neo-ericksoniani: Ipnosi, procedimento ipnotico o psicoterapia? (Neo-ericksonian principles: Hypnosis, hypnotic procedures or psychotherapy?) Tavola Rotonda, XII Congr. Nazionale, Riv. Italiana di Ipnosi e Psicoterapia Ipnotica. Anno 22, N.1, Febbraio 2002
- 8) Pennati A. Comunicazione non pubblicata (Unpublished communication), 2002
- 9) Ellenberger H.F. La scoperta dell'inconscio (The discovery of the unconscious). Ed. Boringhieri, Torino 1972
- 10) Zeig J.K. Erickson, un'introduzione all'uomo e alla sua opera (Erickson, an introduction to the man and his works). Ed. Astrolabio, Roma. 1990
- 11) Peter B. Hypnos, XXVII, 3, 2000