

2026 Annual Conference Scientific Program Agenda

V. 7/14/2026

Please note all 2026 SCEH Annual Conference times are in Pacific Daylight Time (PDT).

Application for CE/CME will be made.

Saturday, October 17, 2026

8:00-9:30 AM PDT

Presidential Symposium

Presenters and Topics

- *Donald Moss, PhD – Introduction and Moderator*
- *Barbara McCann, PhD – The Efficacy of Hypnosis for Functional Seizure Disorders*
- *Gary Elkins, PhD – Research Update: Hypnosis Intervention in Women's Health during the Menopause Transition*
- *Jessie Markowits, MD– The Efficacy of Hypnosis for Medical Applications*
- *Ciara Christensen, PhD – The Efficacy of Hypnosis for Anxiety*

For decades, the Society for Clinical and Experimental Hypnosis has emphasized the importance of research-informed clinical practice. The evidence base for hypnosis continues to grow, with an increasing number of studies published each year on applications of hypnosis for a wide range of disorders. In this symposium, several SCEH Past-Presidents and the President-Elect will report on the applications of clinical hypnosis to clinical problems, ranging from women's health to medical applications to anxiety disorders to functional neurological disorders.

Introduction to the Symposium

Donald Moss, PhD, SCEH President

For decades, the Society for Clinical and Experimental Hypnosis has emphasized the importance of research-informed clinical practice. The evidence base for hypnosis continues to grow, with an increasing number of studies published each year on applications of hypnosis for a wide range of disorders. In this symposium, several SCEH Past Presidents and the President-Elect will report on the applications of clinical hypnosis to clinical problems, ranging from women's health to medical applications to anxiety disorders to functional neurological disorders.

The Efficacy of Hypnosis for Functional Seizure Disorders

Barbara S. McCann, SCEH Immediate Past President

Functional (Dissociative) Seizure Disorder (FSD), referred to in the recent past as psychogenic nonepileptic seizure disorder, pseudoseizures, or conversion disorder, is characterized by paroxysmal events that resemble epileptic seizures without accompanying EEG changes seen in epilepsy. Between 20-30% of patients referred to epilepsy centers receive the diagnosis. FSD impacts social, occupational, academic, and role functioning, and impairs quality of life. Data regarding the efficacy of hypnosis in the treatment of FSD will be reviewed, along with a discussion of the ways hypnosis has been integrated into recent CBT-based treatment approaches for FSD.

Research Update: Hypnosis Intervention in Women's Health during the Menopause Transition

Gary Elkins, PhD, ABPP, SCEH Past President and Editor, International Journal of Clinical and Experimental Hypnosis

Hot flashes are a prevalent symptom after menopause (natural and surgical), but also after treatment for breast cancer. It is estimated that up to 80% of women in the general population experience hot flashes during the menopause transition. Hot flashes negatively impact health and well-being. Hot flashes can cause sweating, discomfort, anxiety, fatigue, and can interfere with sleep leading to adverse health outcomes. Over half of the women with a history of breast cancer report their hot flashes as severe. An update on empirical research on hypnotherapy for hot flashes will be presented. Research has shown hypnotherapy can reduce the frequency and severity of Hot Flash Scores (HFS) by approximately 50-70% in postmenopausal women and breast cancer survivors. In addition, emerging research shows hypnosis intervention reduces anxiety, stress and depression during the menopause transition. Clinical delivery and resources for providing hypnotherapy in women's health will be discussed and options such as self-administered hypnosis and digital hypnotherapy for hot flashes and sleep will be identified. The presentation will include opportunity for questions and answers to address specific areas of related interest.

The Efficacy of Hypnosis for Medical Applications

Jessie Markovits, MD, SCEH President-Elect

Clinical hypnosis is effective across a range of medical conditions, acting through shared mechanisms such as modulation of attention, expectancy, and autonomic arousal. Rather than altering underlying pathology, it targets how symptoms are processed and perceived. Many physical symptoms co-occur with anxiety, sleep disturbance, and depression; hypnosis is uniquely suited as a treatment that addresses both physical symptoms and the accompanying stress response. The

strongest evidence is in pain and procedural distress, where randomized trials and meta-analyses show consistent reductions in acute procedural pain, chronic pain severity, and peri-procedural anxiety. Gut-directed hypnotherapy has demonstrated durable improvements in disorders of gut–brain interaction, including symptom severity and quality of life. There is also meaningful evidence for benefit in cancer-related fatigue, nausea, pain, and distress, as well as in adjunctive treatment of insomnia and smoking cessation. This session will highlight efficacy across domains and discuss practical factors, such as brief protocols and scalability, that influence uptake and effectiveness of self-hypnosis.

The Efficacy of Hypnosis for Anxiety

Ciara Christensen, PhD, SCEH Past President

Anxiety disorders are the most common mental disorder globally and frequently co-occur with other mental and medical disorders. The incidence of anxiety is higher in females. Adverse childhood experiences, chronic stress, genetics, and neurobiological factors all contribute to a higher risk for anxiety. Hypnosis is widely used in the treatment of anxiety. A recent meta-analysis reported consistent reductions in anxiety symptoms with hypnosis across studies. The meta-analysis showed that hypnosis as a solo therapy was as effective as other therapeutic interventions, including cognitive-behavioral therapy and psychodynamic therapies. Further, hypnosis is more beneficial for anxiety when combined with other therapies.

Presenter Bios

Donald Moss, PhD, is Dean-Emeritus, College of Integrative Medicine and Health Sciences, at Saybrook University, Pasadena, CA. He is a clinical health psychologist, certified in hypnosis and biofeedback. He is the education chair and president for the Society for Clinical and Experimental Hypnosis (SCEH). He previously served as the president of SCEH, president of Division 30 (hypnosis) of the American Psychological Association, and president of the Association for Applied Psychophysiology and Biofeedback.

Dr. Moss earned his MA (1974) and PhD (1984) in existential and humanistic psychology at Duquesne University in Pittsburgh, PA. Moss is the Senior Editor for the *Encyclopedia of Hypnosis and Suggestion*, a virtual publication of the International Society of Hypnosis. He is also a guest editor for a new Special Hypnosis Collection for the journal *Scientific Reports* and lead editor for a special issue on Nature Immersion, Health, and the Community for the journal *International Journal of Environmental Research and Public Health*.

Moss is co-author with Angele McGrady of *Pathways through Long-Term Health Conditions: Lifestyle Medicine for your Wellbeing* (Pavilion, 2025), *Integrative Pathways: Navigating Chronic Illness with a Mind-Body-Spirit Approach* (Springer, 2018), and *Pathways to Illness, Pathways to Health* (Springer, 2013). He is co-editor of several scholarly books, including *The Integration of Psychotherapy and Psychophysiology* (Oxford University Press, 2024), and the author or co-author of over 80 book chapters and scholarly journal articles on topics in hypnosis, lifestyle medicine, health psychology, psychophysiology, and research best practices. His most recent journal article appeared in March 2026, "The relevance of heart rate variability for hypnotherapy and psychotherapy," in the journal *Brain Sciences*.

Barbara S. McCann, PhD, is Professor of Psychiatry and Behavioral Sciences and Mental Health Counseling and Hypnosis Endowed Chair at the University of Washington in Seattle, Washington (USA). Her clinical psychology practice is based out of Harborview Medical Center, where she treats individuals with depression, anxiety, functional seizure disorder, and insomnia and conducts research and scholarship in these areas. Dr. McCann teaches psychiatry residents, psychology residents, medical students, and fellows, and has received numerous teaching awards. She has published over 60 journal articles and book chapters. She is Immediate Past-President of the Society for Clinical and Experimental Hypnosis and Certified as an Approved Consultant by the *American Society of Clinical Hypnosis*. She is on the Board of Editorial Consultants for the *International Journal of Clinical and Experimental Hypnosis*, serves as an Advisory Editor for the *American Journal of Clinical Hypnosis*, and is an Associate Editor of the *Encyclopedia of Hypnosis and Suggestion*, published online by the International Society of Hypnosis. She is a founding member and Co-Chair of the FND Society's Hypnosis Special Interest Group.

Gary Elkins, PhD, ABPP, ABPH, is a Professor of Psychology and Neuroscience at Baylor University and the Director of the Mind-Body Medicine Research Laboratory where he conducts research into mind-body interventions including hypnotherapy for management of hot flashes, sleep disturbances, and smoking cessation. Dr. Elkins is the leading researcher and expert on hypnosis for hot flashes and sleep disturbances as well as other clinical applications in women's health. He is a Medical Associate, with Baylor Scott and White Hillcrest Medical Center. He is the co-developer of the *Evia* app that provides hypnosis intervention for hot flashes and sleep provided by Mindset Health. Dr. Elkins serves as Editor-in-Chief of the *International Journal of Clinical and Experimental Hypnosis*. Dr. Elkins has over 150 publications which include five books: *Handbook of Medical and Psychological Hypnosis: Foundations, Applications, and Professional Issues*; *Introduction to Clinical Hypnosis: The Basics and Beyond*; and *Complementary and Alternative Medicine for Psychologists: An Essential Resource*. In recognition of his research, he has received major awards: the Society of Behavioral Medicine (2012, Complementary and Integrative Medicine Investigator Research Award), and the Distinguished Contribution to Science Award from Division 30 (Society for Psychological Hypnosis) of the American Psychological Association.

Jessie Markovits, MD, is a Clinical Associate Professor of Medicine and of Psychiatry and Behavioral Sciences (by courtesy) at Stanford University School of Medicine. She is a board certified internist and surgical co-management hospitalist and practices outpatient medical hypnosis at Stanford's Center for Integrative Medicine. Dr. Markovits is an internationally recognized clinician-scientist whose work focuses on perioperative hypnosis, translational pain research, and scalable behavioral interventions. Her work has been presented at national perioperative, pain, and hypnosis meetings, and featured in mainstream media outlets including *The Economist*.

Dr. Markovits is President-Elect of the Society for Clinical and Experimental Hypnosis (SCEH) and has held numerous leadership roles, including Scientific Program Co-Chair and Annual Meeting Co-Chair. She currently serves as Public Relations Committee Chair for SCEH, is an Associate Editor for the International Society of Hypnosis *Encyclopedia of Hypnosis and Suggestion* and serves on the Editorial Consultant Board of the *International Journal of Clinical and Experimental Hypnosis*. Her practice centers on the evidence-based use of hypnosis for symptom management, including pain, procedure-related anxiety, gastrointestinal disorders, sleep disturbance, vasomotor symptoms, and health behavior change. She is committed to expanding clinician education and utilization to advance the practice, science, and integration of hypnosis across multidisciplinary patient care.

Ciara Christensen, PhD, is a licensed psychologist who earned her doctoral degree from Washington State University in 2012. She is licensed in Idaho, Colorado, Wisconsin, and Washington and has practiced in both hospital-based and private practice settings. Dr. Christensen has held leadership roles in the field of clinical hypnosis, including serving as President of the Society for Clinical and Experimental Hypnosis (SCEH), and is the current President of the American Psychological Association's Division 30, Society of Psychological Hypnosis.

Dr. Christensen is recognized for her contributions to hypnosis research, education, and clinical practice, with publications in peer-reviewed journals and presentations and workshops delivered nationally and internationally. Her advanced training includes Psychedelic-Assisted Therapy through the Integrative Psychiatry Institute, including the first phase of MAPS MDMA-assisted therapy training, as well as advanced experiential training in the Netherlands with an emphasis on psilocybin and ketamine.

Learning Objectives

- 1) Explain the difference between clinical efficacy and clinical effectiveness.
- 2) Identify three clinical disorders for which research documents the efficacy for hypnosis.
- 3) Summarize the evidence for efficacy for women's health, functional neurological disorders, and anxiety.

- 4) Describe the evidence and mechanisms of clinical hypnosis and identify when brief, scalable interventions can be used to reduce pain, procedural distress, and symptom burden.
- 5) Summarize the current efficacy research on hypnosis for functional neurological disorders.
- 6) Discuss the prevalence and impact of hot flashes.
- 7) Discuss the evidence for psychological interventions for hot flashes.
- 8) Identify the efficacy of hypnotherapy for hot flashes based on empirical research.
- 9) Discuss clinical delivery and access to hypnotherapy for hot flashes.

9:30-9:45 AM

Break

9:45-10:45 AM PDT

Keynote

Hypnosis & AI Large Language Models (LLMs)

Peter Gardner, MD

Artificial intelligence has changed dramatically over the past several years, progressing from relatively narrow systems that mainly recognized patterns and predicted text into increasingly sophisticated models capable of adapting dynamically to users, integrating multiple forms of information simultaneously, and simulating aspects of human interaction in ways that would have seemed unrealistic not very long ago. While many clinicians have heard terms such as “large language models,” “neural networks,” and more recently “world models,” there remains understandable confusion about what these systems actually are, how they function, and why they may become increasingly relevant to psychotherapy and clinical hypnosis. This presentation will discuss where AI was only a few years ago, where it is currently, and where many researchers believe it may be heading next, particularly the emerging concept of the “World Model,” systems that move beyond simply predicting the next word and increasingly attempt to predict “what happens next” within human interaction, behavior, and emotional experience. The presentation will also explore some of the overlap between these emerging AI systems and several mechanisms central to hypnosis itself, including expectancy, selective attention, how expectations shape perception, and the stories people tell themselves about who they are. Clinical examples will be used throughout, both to help explain the technology itself and to illustrate how

future AI systems may eventually influence therapeutic interaction and hypnotic communication while still remaining fundamentally different from the human experience of emotional attunement, therapeutic presence, and relationship.

Learning Objectives

- 1) Discuss possible implications of emerging AI systems for hypnosis and psychotherapy, including attention, expectancy, identity, and adaptive therapeutic interaction.
- 2) Discuss how emerging AI systems may eventually influence hypnosis and psychotherapy through attention, expectancy, identity, and personalized therapeutic communication.

10:45-11:30 AM PDT

Break

11:30 AM-12:00 PM PDT

Poster Session

Poster presenters will be allocated (5-10 minutes each, depending on the total number of accepted posters).

View the list of [Accepted Posters](#) for 2026.

12:00-12:15 PM PDT

Break

12:15-1:45 PM PDT

Research Presentations - Session 1

Note: Each research presentation is for 15 minutes, including Q&A.

Suggestibility of Large Language Models

Zoltan Kekecs, PhD

Suggestibility was long thought to be a human-specific attribute. However, with the rise of very capable Large Language Models (LLMs), this might no longer be the case. LLMs are known to be prone to confabulation, just like humans, and the direction and extent of confabulation can be influenced by the words used in the prompt. In humans this tendency is measured by scales of interrogative suggestibility. In our project we set out to measure the suggestibility of different AI models, and to assess what factors (other than model type) influence how suggestible a model is. In this exploratory project we have tested several approaches to measuring LLM suggestibility and its influencing factors. We have tried using existing scales for measuring human interrogative

suggestibility, as well as creating new scales, for example one using spatial reasoning tasks, and one using legal judgement tasks, optimized for LLMs. We also assessed the influence of emotional context and authority queues on suggestion effectiveness. The presentation will describe the results of this ongoing research project.

Learning Objectives

- 1) List the primary findings of our research group related to the suggestibility of large language models.

App-Delivered Hypnotherapy for Menopausal Symptoms: Findings from a Randomized Clinical Trial

Vanessa Muniz, PhD

Hot flashes and sleep disturbances are among the most prevalent symptoms experienced by menopausal women and breast cancer survivors. Hot flashes occur as a result of the decline in estrogen and can occur during natural menopause (average age 52 years) or as a result of treatment for breast cancer. In-person and self-administered hypnotherapy for hot flashes has been shown to be an efficacious treatment for hot flashes across several clinical trials, with women experiencing on average of 50 - 70% reductions in hot flashes and improved sleep quality. A mobile app (Evia) has been developed to facilitate the delivery and dissemination of the hypnosis intervention. Evia is an app that delivers a 5-week program for hypnotic sessions, tracking symptoms, and educational information for hot flashes based upon the standardized programs used in previous studies (Elkins, 2014; Elkins et al., 2025). In the present study, 67 participants were randomly assigned to the Evia app (N = 31) or to a daily habit tracker app (N = 36). Participants in both arms were asked to engage with their assigned app for 5 weeks and maintain a hot flash daily diary throughout the duration of the study. The results were consistent with previous studies showing efficacy of the app delivered hypnosis intervention for the management of hot flashes and improving sleep quality in participants relative to the active control arm of the study. Results are discussed in regard to integration of digital hypnotherapy into clinical practice.

Learning Objectives

- 1) Describe the findings from a randomized clinical trial on the efficacy of an app-delivered clinical hypnosis for the relief of hot flashes and sleep quality in postmenopausal women

Effect of Hypnosis Intervention on Anxiety in Post-Menopausal Women: Secondary Analysis of a Randomized Clinical Trial

Katherine Scheffrahn, BS

Many women experience heightened anxiety during the menopause transition. Chronic anxiety can be detrimental to women's health and wellbeing and is associated with increased risk of cardiovascular disease, vasomotor symptoms, depression, and sleep disturbances. Therefore, there is a pressing need for safe and effective interventions that can decrease anxiety in women in the menopause transition. This presentation is a secondary analysis of a randomized clinical trial conducted to address the research question: "Does a self-administered clinical hypnosis intervention significantly improve anxiety outcomes when compared to a sham hypnosis control condition?" The participants were postmenopausal women recruited from Texas and Michigan. The hypnosis intervention consisted of daily audio-recorded clinical hypnosis sessions for 6 weeks. The control condition was sham hypnosis that involved audio recordings with instructions to focus attention (as in the hypnosis intervention), followed by pleasant white noise sounds, but no hypnotic suggestions. Primary study results found significant decreases in hot flashes at endpoint and 3-month follow-up. It was hypothesized that the intervention may also result in secondary outcomes of decreased anxiety. This presentation reports anxiety outcomes at baseline, after the conclusion of the intervention at Week 6, and at a 12-week follow-up. Anxiety was measured with the PROMIS Emotional Distress - Anxiety Scale, which is a 29-item measure of 5 domains of anxiety: Affective, cognitive, somatic, behavioral, and need for treatment. Additionally, this analysis explores hypnotizability as a potential moderator. This presentation will discuss the implications of these findings for future hypnosis intervention research, clinical practice, digital delivery of interventions, and anxiety research.

Learning Objectives

- 2) Describe the key findings regarding anxiety outcomes of a secondary data analysis of a large-scale randomized control trial of self-administered hypnosis and to discuss the implications of these findings for future research.

A Clinical Framework for Hypnotically Facilitated Mystical Experiences

Elisabeth Harris, MA

Mystical experiences (MEs) are often defined as profound encounters characterized by unity, transcendence of time and space, positive mood, ineffability, and a noetic quality. A growing body of research indicates MEs can have clinical utility and psychotherapeutic benefits contributing to symptom reduction and improved well-being in individuals experiencing depression, anxiety, PTSD, and substance use disorders. Further, research has shown that a hypnosis-based intervention can facilitate mystical experiences in some individuals. However, a unifying conceptual framework is needed to guide therapeutic application. This presentation will provide a conceptual framework for the clinical utilization of hypnotically facilitated ME. The conceptual framework proposes that hypnosis is a non-ordinary states of consciousness and that hypnotically facilitated MEs are

contingent on three pre-state factors: invitation (such as hypnosis, meditation, breathwork, or psychedelics), context (set and setting), and individual aptitude (innate traits including absorption and the capacity to surrender). Integral to the framework, the process of integration serves as a potential mediator by translating intense experience into lasting beneficial change.

Keywords:  mystical experience, hypnosis, conceptual framework, non-ordinary states of consciousness, integration, framework

Learning Objectives

- 1) Describe the three pre-state factors and the role of integration within the framework mystical experiences.
- 2) Identify hypnosis as a non-ordinary state of consciousness and how it may facilitate mystical experiences in a clinical context.

Pilot Study of Guided Invocation for a Mystical Experience

Christopher Corlett, MA, BA

Recent research into psychedelic-assisted psychotherapy (PAP) has suggested outcomes often include wellbeing and spiritual growth immediately post-session. However, more long-term benefits may be enhanced by post-session integration interventions that are relevant to the individual and culturally responsive. For example, Christian participants may experience profound spiritual growth, but integration may need to be in alignment with Judeo-Christian beliefs. The present study reports findings from a pilot randomized control study of Christian participants who received a Guided Invocation for a Mystical Experience (GIME) session. Participants provided baseline data on human flourishing and spiritual growth measures including: the PERMA Well-Being Scale, the Ryff Psychological Wellbeing Scale, the Multidimensional Existential Meaning Scale, the Flourishing Scale, the Quality of Life Rating Scale, the Self-Compassion Scale, the Spiritual Transcendence Scale, the Religious and Spiritual Struggles Scale, the Attachment to God Scale, and the Persisting Effects Questionnaire. After the GIME session, participants received either a one-month Christian-oriented integration program or a one-month structured control integration program. After the integration program, participants completed measures at a one-month follow-up. Findings from this pilot randomized clinical trial will be presented and discussed with implications for future research into drug and non-drug facilitated mystical experiences.

Learning Objectives

- 1) Describe the effects of a Christian-oriented integration program compared to a structured control integration program as it relates to self-report outcomes on validated human flourishing measures.

Sunday, October 18, 2026

8:00-9:00 AM PDT Keynote

An Expert, Multidisciplinary Phenomenologically-Based Taxonomy of States of Consciousness

Etzel Cardeña, PhD

This address centers on a phenomenologically-based taxonomy of altered states of consciousness, created by a multidisciplinary, international group. We distinguish between eight distinct phenomenological/behavioral states: proto and transitional, delirium, minimal to no awareness, experiential detachment, enhanced physicality, altered identity, imaginary/fantasy/visionary, and unity/mystical. I will also discuss why an induction/trigger based classification of states (e.g., the "hypnotic state") has many problems, and how our new taxonomy can advance the phenomenological, psychological, cultural, and neuroscientific understanding of alternate or non-ordinary states.

Learning Objectives

- 1) Distinguish between an induction or trigger and potential alternate states of consciousness.
- 2) Distinguish between 8 different states of consciousness.

9:00-9:30 AM PDT Research Presentations - Session Two

Note: Each research presentation is for 15 minutes, including Q&A.

Hypnosis-Based Intervention for Mystical Experiences: A Qualitative Analysis

Sharika Majeti, MS

Mystical experiences or peak spiritual experiences have been shown to be of potential benefit in facilitating personal growth and ameliorating anxiety and depression. A previous clinical trial demonstrated the feasibility of hypnotically inducing mystical experiences. The previous study

(Corlett et al., 2025) found that 70% of college students had a complete mystical experience, as measured by the MEQ30, after a single session. However, participants' qualitative experiences were not reported. The present study presents a thematic analysis of findings from semi-structured interviews about individuals' subjective experiences following the hypnosis intervention for mystical experience. Results revealed that participants described their experiences as personally significant, marked by intense emotion (crying, compassion, perceived release), hallucination-like phenomena (vivid imagery, synesthesia, sensed presence of deceased relatives), and profound insight regarding self-love, values, and life decisions. Additional themes included feelings of divine love, unity, and ego dissolution. These experiences closely resembled those reported in psychedelic contexts, while also featuring elements, such as spontaneous feelings of being loved, not fully captured by existing instruments. Future research on hypnosis, mental imagery, and guided meditations for mystical experience should include both standardized measures as well as subjective reports.

Learning Objectives

- 1) Identify the benefits of hypnosis-induced mystical experiences/peak spiritual experiences

Psilocybin-Assisted Psychotherapy for Anxiety Symptoms: Review and Implications for Clinical Hypnosis

Alexander Hood, MS

Introduction. Psilocybin-assisted psychotherapy (PAP) is a novel, transdiagnostic treatment in which the 5-HT_{2A} receptor agonist psilocybin is combined with psychotherapy. Studies to date have evaluated PAP's effects on depression, substance use, and end-of-life adjustment. Relatively less attention has been given to its effects on anxiety symptoms. Prior meta-analysis has demonstrated clinical hypnosis intervention can significantly reduce anxiety. Emerging research also indicates hypnosis interventions and promote mystical experiences similar to psilocybin. This study reviews existing studies regarding psilocybin-assisted psychotherapy and discusses implications for clinical hypnosis practice and research.**Method.** A systematic review was conducted following PRISMA guidelines. Searches were completed in six databases and independent reviewers screened records. Study quality was assessed and data extracted on participant demographics and intervention features. Random-effects models estimated within- and between-group effects from baseline to primary endpoint.

Results. Twenty-five studies were determined eligible for inclusion. Considerable heterogeneity was observed in psychotherapy format, dosing, session structure, and outcome timing. Pooled results showed a large within-groups effect on anxiety after controlling for measurement artifacts (Hedge's $g = 0.96$) and a small between-groups effect (Hedge's $g = 0.48$). High heterogeneity persisted even

after controlling for the influence of different anxiety measures and moderators related to intervention formulation and delivery.

Conclusions. PAP shows promise for reducing anxiety across primary diagnoses. However, variability in study quality, interventional design, sample representativeness, and high heterogeneity warrant caution in interpretation. Clinical hypnosis may be particularly well-suited as a therapeutic adjunct for PAP across preparation, drug, and integration sessions. Furthermore, hypnosis' ability to induce mystical experiences at a comparable rate to psychedelics suggest it could be a crucial tool in investigating PAP's mechanisms of action. More research is needed both to explore the potential efficacy of integrating hypnosis into PAP and to analyze the effect of hypnotically elicited mystical experiences without the use of psychedelic compounds.

Learning Objectives

- 1) Describe the quantity and quality of the current evidence of psilocybin-assisted psychotherapy (PAP) to alleviate anxiety symptoms.
- 2) Identify key unanswered questions and future research directions pertaining to PAP's mechanism(s) of action.

9:30-9:45 AM PDT Break

9:45-10:45 AM Research Presentations - Session Two, continued

Note: Each research presentation is for 15 minutes, including Q&A.

Hypnosis Induced Mysticism Vs. Psychedelics

David Patterson, PhD, ABPP

This 20 minute research presentation briefly reviews the surging body of literature on creating mystical (often subtly compared to psychedelic) effects to hypnotic sessions designed to create this experience in experimental studies. We then discuss the neurophysiological and clinical outcome studies on psychedelics and MDMA on brain fMRIs and randomly controlled clinical outcome studies. The advantages of achieving effects without pharmacologic agents will be discussed as well as the challenges to rivaling many of the current findings with psychedelic agents.

Learning Objectives

- 1) Describe the studies that have been published on the impact of hypnosis on creating mysticism.
- 2) Summarize the fMRI studies on psychedelics and studies on psychedelics and MDMA on brain neurophysiology and clinical outcome with significant mental health challenges.
- 3) Discuss the contrast between having a mystical or hallucinatory and experiencing significant mental health improvements..

Clinical Hypnosis' Effect on Hot Flashes: A Meta-Analysis

Vanessa Muniz, PhD

Hot flashes are a highly prevalent and disruptive symptom of menopause, characterized by sudden, intense sensations of heat often accompanied by heart palpitations, headaches, anxiety, and fatigue. These episodes can interfere with daily activities, sleep, and overall quality of life. Clinical hypnosis is an increasingly recognized non-pharmacological intervention used to treat a range of conditions, including chronic pain, insomnia, irritable bowel syndrome, and hot flashes. Randomized controlled trials suggest that hypnosis can reduce the frequency and severity of hot flashes by up to 70%, while also decreasing their disruption of daily life activities. Despite consistent evidence supporting its efficacy, there has not been a systematic review and meta-analysis to-date to synthesize these findings and assess the efficacy of clinical hypnosis in the treatment of hot flashes. The primary aim of this study is to conduct a systematic review of all published randomized controlled and single-arm trials examining clinical hypnosis for hot flash treatment. Extracted data provides a review and to perform a meta-analysis evaluating its efficacy compared to control conditions. This presentation reports the findings from the systematic review and meta-analysis. Overall, this study provides an overview of the empirical articles published to-date and informs on the use of clinical hypnosis as an effective, non-hormonal treatment option for hot flashes during the menopausal transition.

Learning Objectives

- 1) Assess the current literature available to-date and inform on the efficacy of clinical hypnosis for the reduction of hot flashes across all RCTs published to-date.

Everything But The Narrative: Utilizing Ericksonian Hypnosis as a Pedagogical Framework to Maximize the Implicit Therapeutic Potential of Forensic Interviews of Minor Victims

Joseph Brodsky, MSW

Forensic Interviewing is an evidence-based, investigative interviewing practice designed to minimize trauma while maximizing quality of information via narrative disclosure in investigations of child or adolescent physical or sexual abuse, trafficking, neglect, or exposure to violence. Forensic interviewers are highly-trained, neutral fact-finding parties who utilize trauma-informed and developmentally/culturally appropriate open-ended questions, rapport, narrative practice, and other techniques within structured, generally single-session interventions to provide a supportive environment for children to disclose possible abuse or maltreatment, while avoiding eliciting either false positive or negative disclosures. Hypnosis as a technique to improve recall ability is incontrovertibly discouraged in forensic interviews due to the suggestibility inherent in memory. However, there are under-researched areas of facilitating ancillary reduction of traumatic stress within the forensic interview, even as the practice of forensic interviewing remains neutral, investigative, and non-psychotherapeutic. Ericksonian hypnosis, with its focus on implicit communication and intentional usage of language/storytelling, offers a pedagogical framework within which to understand the therapeutic potential inherent in the forensic interview. By examining each of the distinct phases of the forensic interview process via the NCAC (National Children's Advocacy Center) model through an Ericksonian lens, this paper may assist practitioners in secondarily ameliorating the effects of post and peri-traumatic stress disorder in minor victims while yielding similar or higher quality disclosures. Even single-session psychotherapy interventions can create profound benefits for children; utilizing an Ericksonian framework to bolster the forensic interview process may both yield immediate benefits and lower the effect of adverse childhood experiences over a victim's lifetime.

Learning Objectives

- 1) Identify therapeutic opportunities within each stage of a child forensic interview

10:45-11:30 AM PDT

Break

11:30 AM-12:00 PM PDT Research Presentations - Session 2, continued

Note: Each research presentation is for 15 minutes, including Q&A.

Circuits of Fundamental Peace: Network-Based Mechanisms of Hypnotic Emotion Regulation

Luis Miguel Gallardo, MA, MBA

Background: Hypnosis demonstrates robust efficacy for emotion regulation (effect sizes $d=0.6-0.8$), yet mechanistic understanding remains incomplete. We propose "Fundamental Peace" as a novel construct representing the integrated state of emotional coherence, cognitive flexibility, and reduced self-referential rigidity that emerges through hypnotic reorganization of large-scale brain networks.

Theoretical Framework: Our triple-network model posits that hypnosis operates through three temporal stages: (1) Induction quiets the Default Mode Network, reducing rumination and self-referential processing; (2) Absorption enhances Salience Network activity, increasing interoceptive awareness and present-moment focus; (3) Therapeutic suggestions reorganize network integration, producing Fundamental Peace. This framework synthesizes evidence from 15+ neuroimaging studies and provides mechanistic explanation for hypnotic emotion regulation across anxiety, depression, and trauma presentations.

Clinical Translation: We developed a manualized 10-session protocol targeting Fundamental Peace through stage-specific interventions. Preliminary outcomes demonstrate significant improvements: Fundamental Peace Scale scores increased 15-25 points; symptom reduction 30-50% across anxiety ($d=0.68$), depression ($d=0.58$), and PTSD ($d=0.75$); effects maintained at 6-month follow-up. Four case examples illustrate protocol adaptation for diverse clinical presentations including emotional flooding, rumination, self-criticism, and dissociation.

Operationalization: The Fundamental Peace Scale (FPS-15) measures three components across 15 items. Pilot data show strong psychometric properties: internal consistency $\hat{\alpha}=0.89$, test-retest reliability $r=0.82$, convergent validity with mindfulness $r=0.45$, and sensitivity to change $d=0.73$ pre-post intervention. **Implications:** This symposium integrates neuroscience, clinical practice, and measurement, providing a comprehensive framework for understanding and enhancing hypnotic emotion regulation. We present testable predictions, evidence-based clinical applications, and a research agenda for validating network-based mechanisms of therapeutic change.

Learning Objectives

- 1) Explain the triple-network neuroscience model of hypnotic emotion regulation, including the roles of the Default Mode Network, Executive Control Network, and Salience Network.
- 2) Describe the three components of Fundamental Peace (emotional coherence, cognitive flexibility, reduced self-referential rigidity) and their neural substrates.
- 3) Apply the three-stage hypnosis process (Induction-Absorption-Suggestion) to facilitate network reorganization in clinical practice.

- 4) Assess Fundamental Peace using the FPS-15 scale and behavioral observation protocols.
- 5) Implement evidence-based clinical strategies for cultivating Fundamental Peace across diverse presentations including anxiety, depression, and trauma.

Q&A with Research Presentation Presenters

Engage in a dialog with authors who have presented their research presentations.

12:00-12:15 PDT

Break

12:15-1:15 PM PDT

Keynote

The Iron Triangle: Altered Consciousness, Hallucinogens, and Health

Amir Raz, PhD

Hypnosis, artificial intelligence, and transformative mind-body interventions converge on a central scientific question: how do expectation, attention, meaning, and context reshape brain function and human behavior? Drawing on *The Suggestible Brain* and nearly 700 peer-reviewed publications referenced therein and spanning more than four decades of my own research, this keynote address examines suggestibility not as a clinical curiosity, but as a core feature of the human nervous system—one that we can study, measure, and therapeutically harness.

This address reviews the scientific foundations of hypnosis and altered consciousness, including the neural mechanisms through which suggestion can modulate perception, agency, emotion, pain, and behavior. It will also consider renewed interest in psychedelic and hallucinogenic agents, emphasizing that their clinical promise depends not only on pharmacology, but on expectancy, set, setting, integration, and the therapeutic frame. These same principles illuminate the potential role of emerging technologies and artificial intelligence in mental health care: not as replacements for human practitioners and clinicians, but as tools for modeling cognition, personalizing intervention, and extending access to evidence-based behavioral change strategies.

Informed by early graduate training in artificial intelligence at Yale University in the 1980s, and thereafter by an academic career across psychiatry, neurology, neurosurgery, neuroscience, and psychology, this keynote presentation offers an integrative framework for understanding consciousness and change. The future of hypnosis and mind-body medicine lies in linking brain

circuits, subjective experience, therapeutic relationship, and intelligent technologies into a more precise science of transformation.

Learning Objectives

- 1) Describe the scientific basis of hypnosis and altered consciousness, including how suggestion, expectancy, attention, and context can modulate perception, emotion, agency, pain, and behavior.
- 2) Explain how hypnosis, psychedelic-assisted approaches, and other transformative mind-body interventions may share common mechanisms of change, including neuroplasticity, therapeutic framing, set and setting, integration, and meaning-making.
- 3) Evaluate the emerging role of artificial intelligence and related technologies in advancing the science and clinical application of hypnosis, consciousness studies, and personalized behavioral health interventions.

1:15-1:45 PM PDT

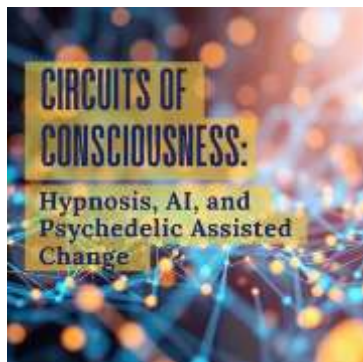
Poster Session Two

Poster presenters will be allocated (5-10 minutes each, depending on the total number of accepted posters).

View the list of [Accepted Posters](#) for 2026.

1:45 PM PDT

Scientific Program Ends



2026 Annual Conference

77th Annual Workshops & Scientific Program

Circuits of Consciousness: Hypnosis, AI, and Psychedelic-Assisted Change

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