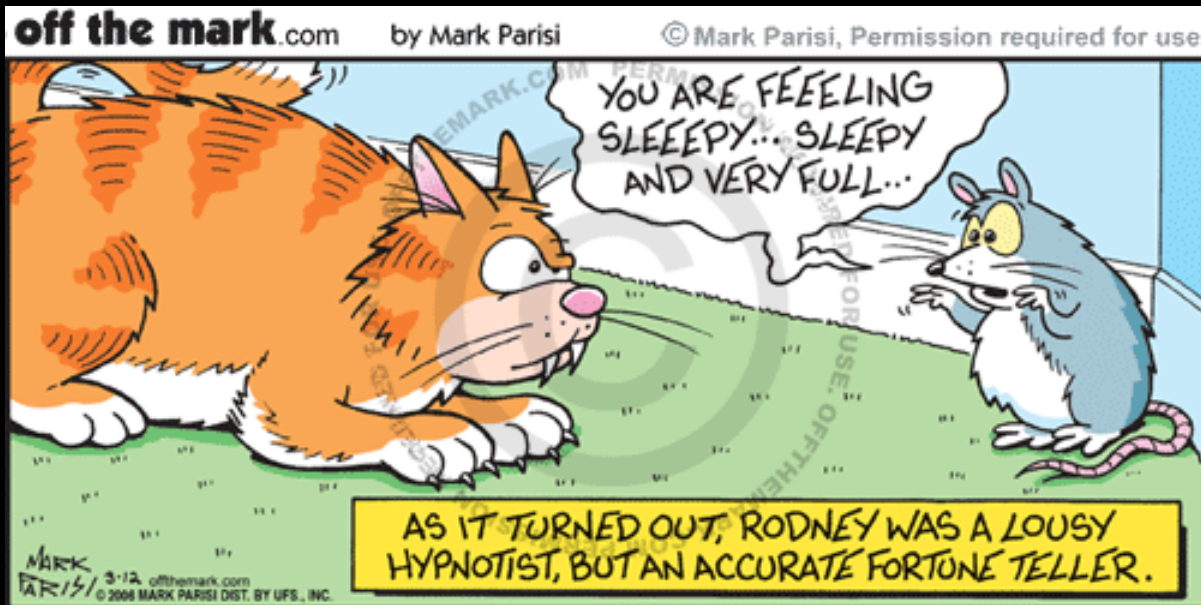


## **Hypnotizability and the cerebellum: facts and hypotheses**

Enrica L. Santarcangelo  
*enrica.santarcangelo@unipi.it*

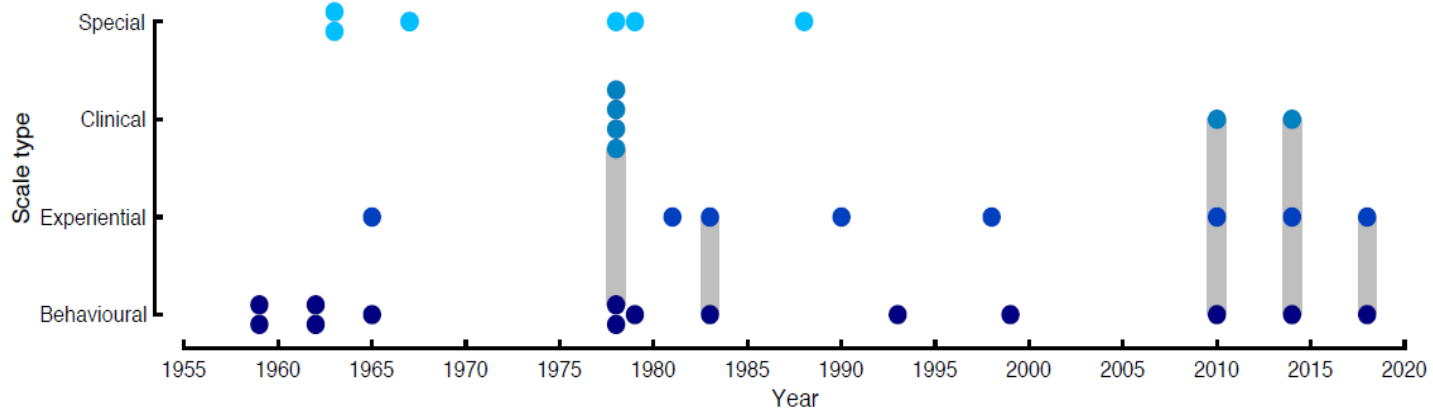
Department of Translational Research and New Technologies in  
Medicine and Surgery  
University of Pisa

Palermo, SIPF 30 settembre 2021



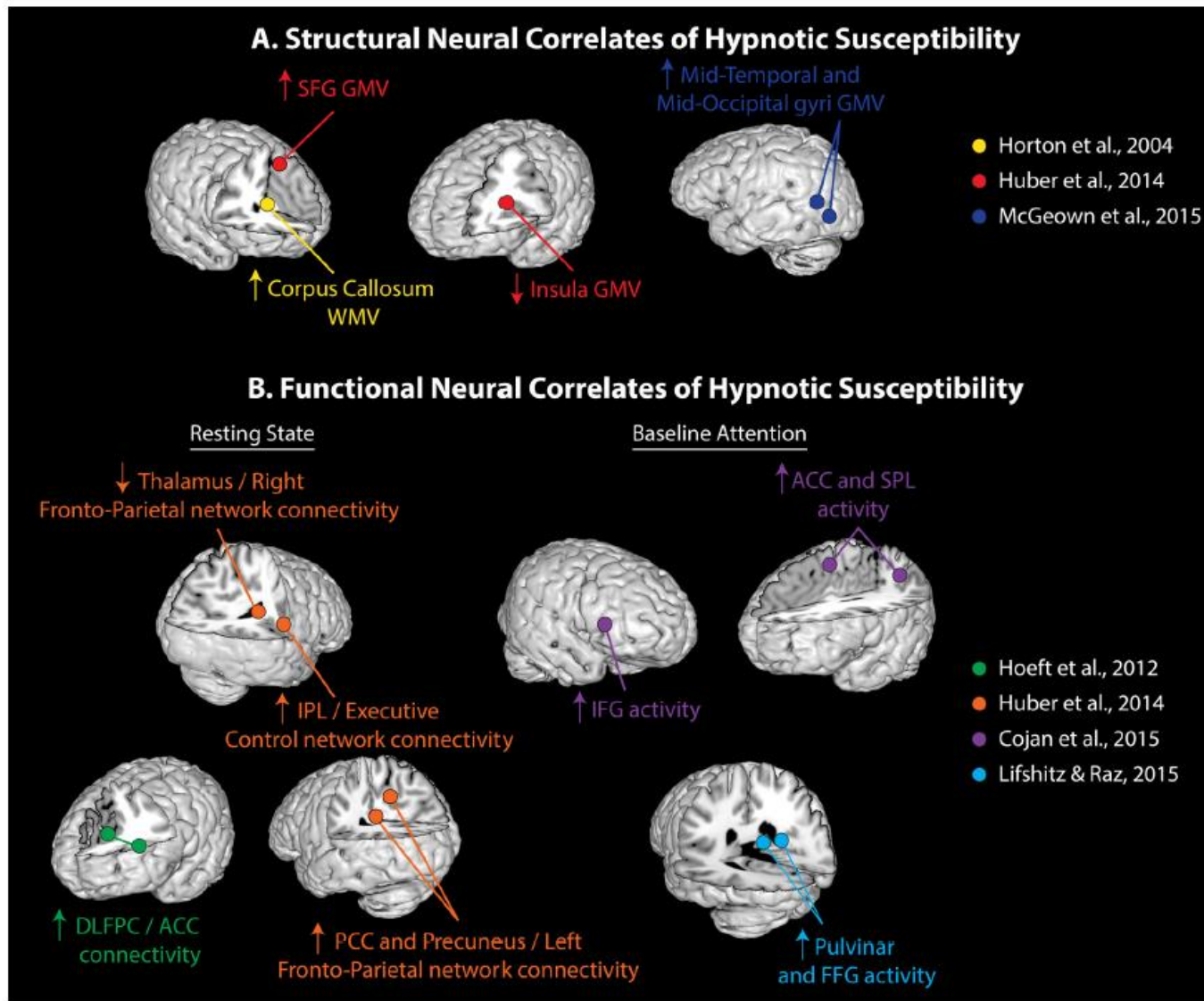
## hypnotizability

a cognitive trait predicting  
the proneness to experience alteration of perception, memory and behavior  
according to specific suggestions



**Figure 1.** A timeline of standardized measures of hypnotic suggestibility. Scales are distinguished on the basis of whether they were introduced primarily as behavioural, experiential, clinical, or special-population scales with corresponding different colours. Connecting lines denote scales that fall into multiple categories. *Stanford Hypnotic Susceptibility Scale: Form A* (SHSS:A; Weitzenhoffer & Hilgard (1959)); *Stanford Hypnotic Susceptibility Scale: Form B* (SHSS:B; Weitzenhoffer & Hilgard (1959)); *Harvard Group Scale of Hypnotic Susceptibility: Form A* (HGSHS:A; Shor & Orne (1962)); *Stanford Hypnotic Susceptibility Scale: Form C* (SHSS:C; Weitzenhoffer & Hilgard (1962)); *Children's Hypnotic Susceptibility Scale* (CHSS; (London, 1963)); *Stanford Profile Scales of Hypnotic Susceptibility* (SPS; Weitzenhoffer & Hilgard (1963)); *Barber Suggestibility Scale* (BSS; (Barber, 1965)); *Inventory Scale of Hypnotic Depth* (ISHD; (Field, 1965a)); *Revised Stanford Profile Scales of Hypnotic Susceptibility* (RSPS; Weitzenhoffer & Hilgard (1967)); *Diagnostic Rating Scale* (DRS; Weitzenhoffer & Hilgard (1967)); *Hypnotic Induction Profile* (HIP; (Spiegel & Spiegel, 1978)); *Stanford Hypnotic Clinical Scale for Adults* (SHCS:A; (Morgan & Hilgard, 1978/1979)); *Stanford Hypnotic Clinical Scale for Children* (SHCS:C; Morgan & Hilgard, 1978/1979b); *Creative Imagination Scale* (CIS; (Barber & Wilson, 1978)); *Stanford Hypnotic Arm Levitation* (SHALIT; (Hilgard, Crawford, & Wert, 1979)); *Tailored Stanford Hypnotic Susceptibility Scale: Form C* (TSHSS:C; Hilgard et al. (1979)); *Bowers Involuntariness Scale* (BIS; (K. S. Bowers, 1981a)); *Carleton University Responsiveness to Suggestion Scale* (CURSS; (N. P. Spanos, Radtke, Hodgins, Stam, & Bertrand, 1983)); *Children's Hypnotic Susceptibility Scale* (CHSS; (London, 1988)); *HGSHS:A Subjective Scale* (HGSHS:A-S; Kirsch et al. (1990a)); *Waterloo Stanford Group Scale of Hypnotic Susceptibility: Form C* (WSGC; (K. S. Bowers, 1993)); *WSGC Subjective Scale* (WSGC-S; Kirsch et al. (1998)); *Group Scale of Hypnotic Ability* (GSHA; Hawkins & Wenzel, 1999); *PCI Hypnotic Assessment Procedure* (PCI-HAP; (Pekala et al., 2010b)); *Elkins Hypnotizability Scale* (EHS; (G. Elkins, 2014)); *Sussex-Waterloo Scale of Hypnotizability* (SWASH; (Lush, Moga, McLatchie, & Dienes, 2018)).

highs mediums lows



**Fig. 3.** A. Structural correlates of hypnotic susceptibility. Change in gray matter volume (GMV) and white matter volume (WMV) as a function of hypnotic susceptibility. B. Functional correlates of hypnotic susceptibility. Increased activity and functional connectivity patterns in experiments contrasting high and low susceptibility individuals in resting state (i.e., no task or stimuli) and baseline attention (i.e., using an attention task). The colors indicate the different studies (see online version of the article). ACC – Anterior Cingulate Cortex. DLPFC – Dorsolateral Prefrontal Cortex. FFG – Fusiform Gyrus. IFG – Inferior Frontal Gyrus. IPL – Inferior Parietal Lobule. SFG – Superior Frontal Gyrus. SPL – Superior Parietal Lobule. PCC – Posterior Cingulate Cortex.

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DOI: 10.1080/00207144.2016.1171093

 **Routledge**  
Taylor & Francis Group

## **Complementing the Latest APA Definition of Hypnosis: Sensory-Motor and Vascular Peculiarities Involved in Hypnotizability**

ENRICA L. SANTARCANGELO AND ELIANA SCATTINA

*University of Pisa, Italy*

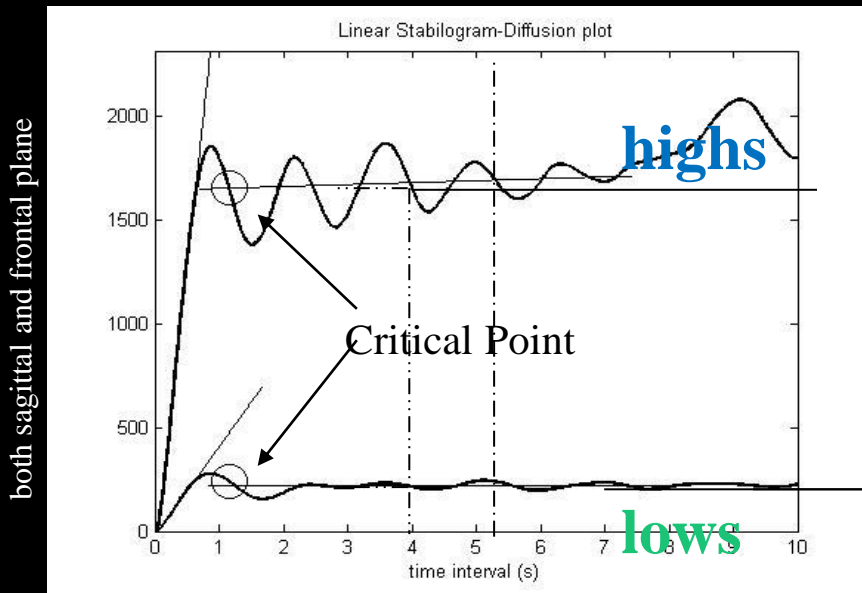
### **a physiological trait**

- with specific sensorimotor and cardiovascular characteristics observable in the absence of suggestions and in ordinary state of consciousness
- associated with the ability to alter
  - . the subjective experience and
  - . most of its physiological correlates according to suggestions' contents

## In highs

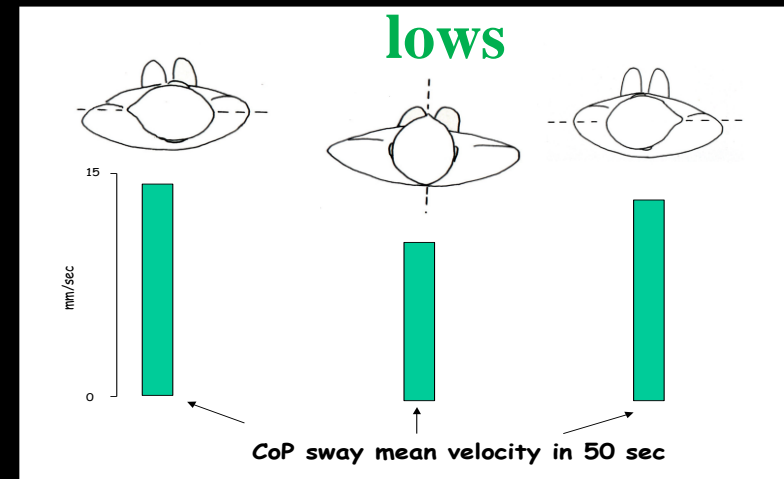
- larger and faster body sway during vision suppression and leg proprioceptive alteration
- absence of learning across trials

*Santarcangelo et al., Exp Brain Res, 2008*



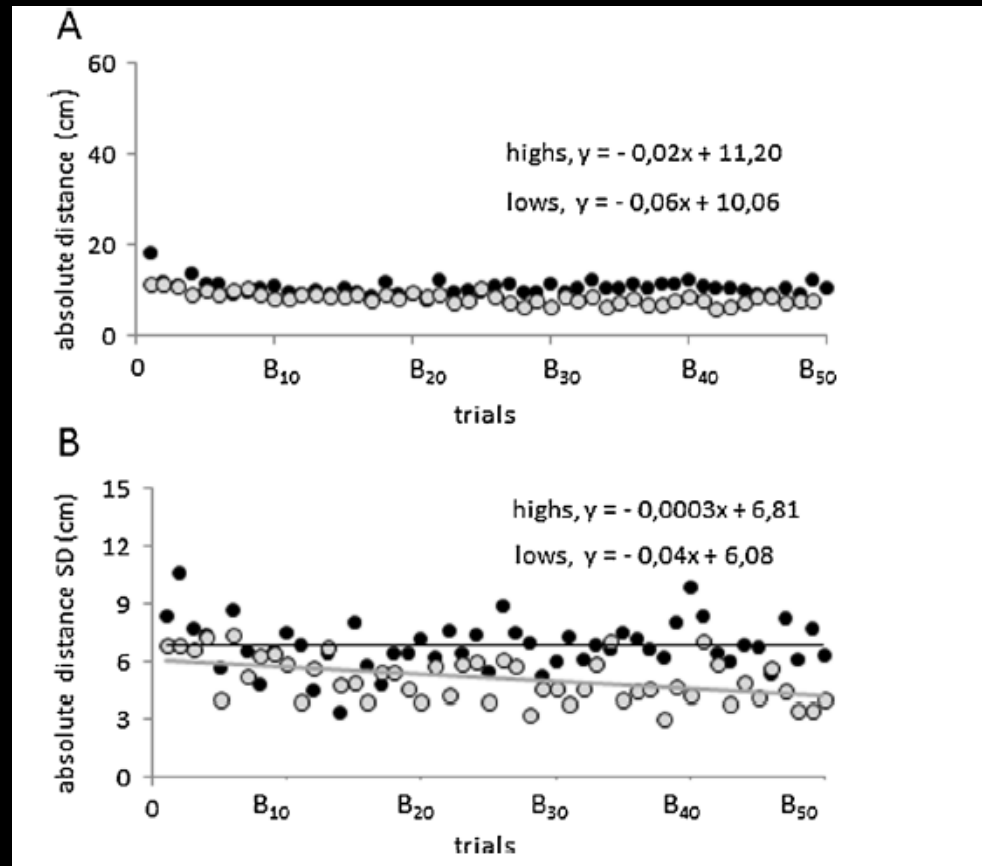
- no effect of head rotation on body sway

*Santarcangelo et al., Int J Clin Exp Hypn, 2008*



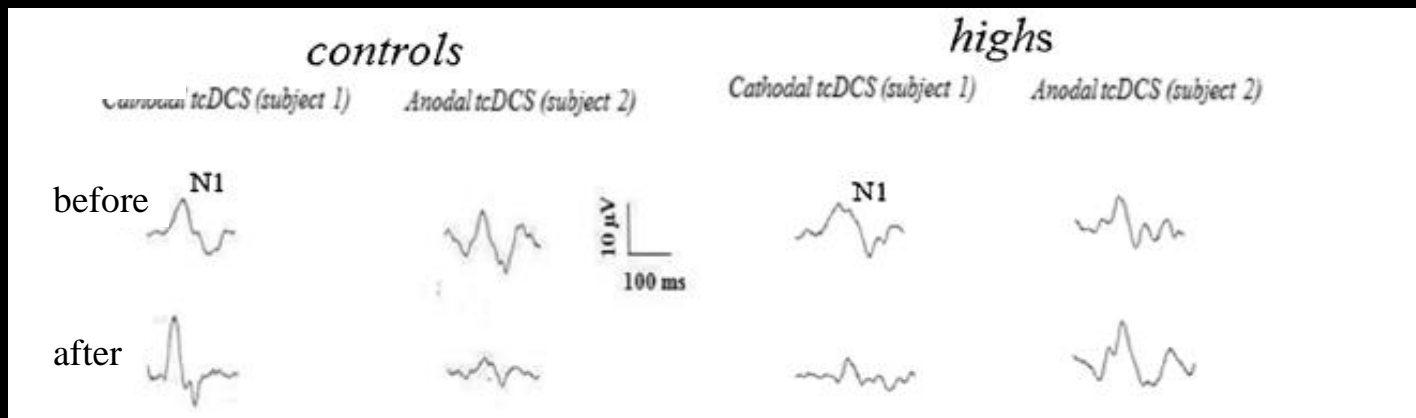
## In highs

- lower throwing accuracy
- larger variability
- absence of learning across trials

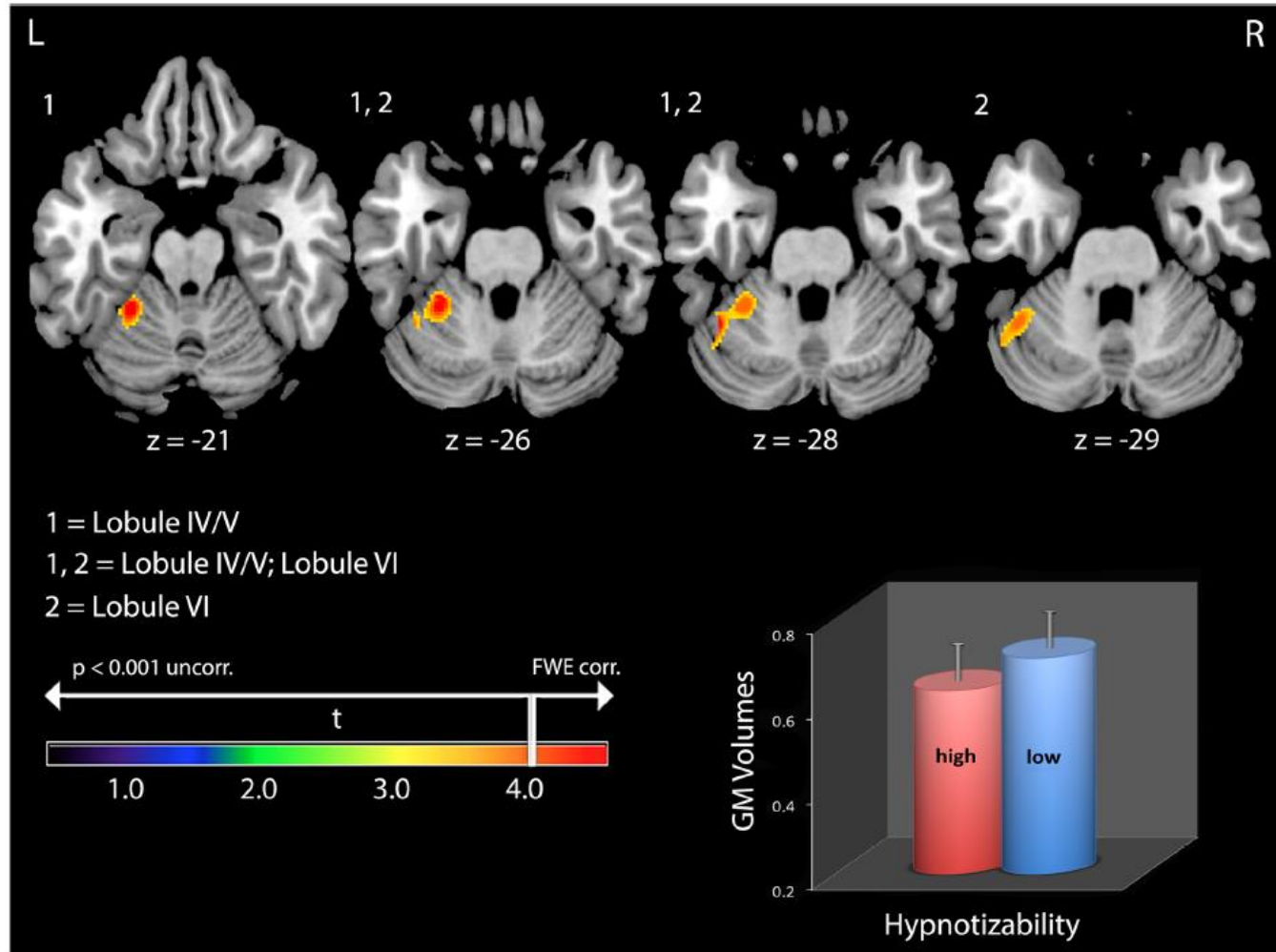


## High Hypnotizability Impairs the Cerebellar Control of Pain

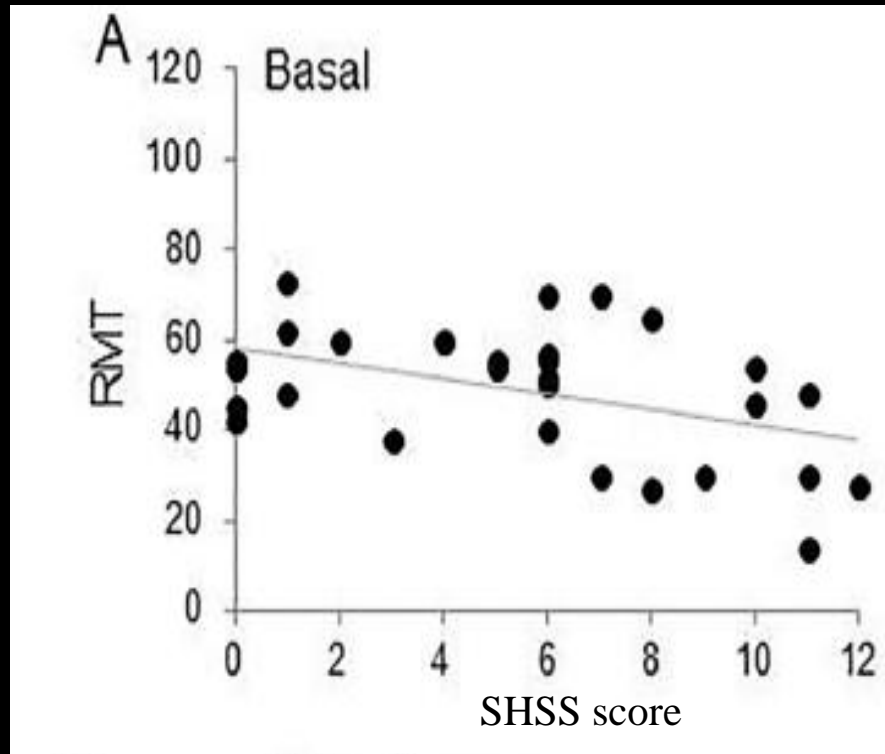
Tommaso Bocci<sup>1</sup> · Davide Barloscio<sup>1</sup> · Laura Parenti<sup>1</sup> · Ferdinando Sartucci<sup>1</sup> ·  
Giancarlo Carli<sup>2</sup> · Enrica L. Santarcangelo<sup>3</sup>







*motor cortex excitability*

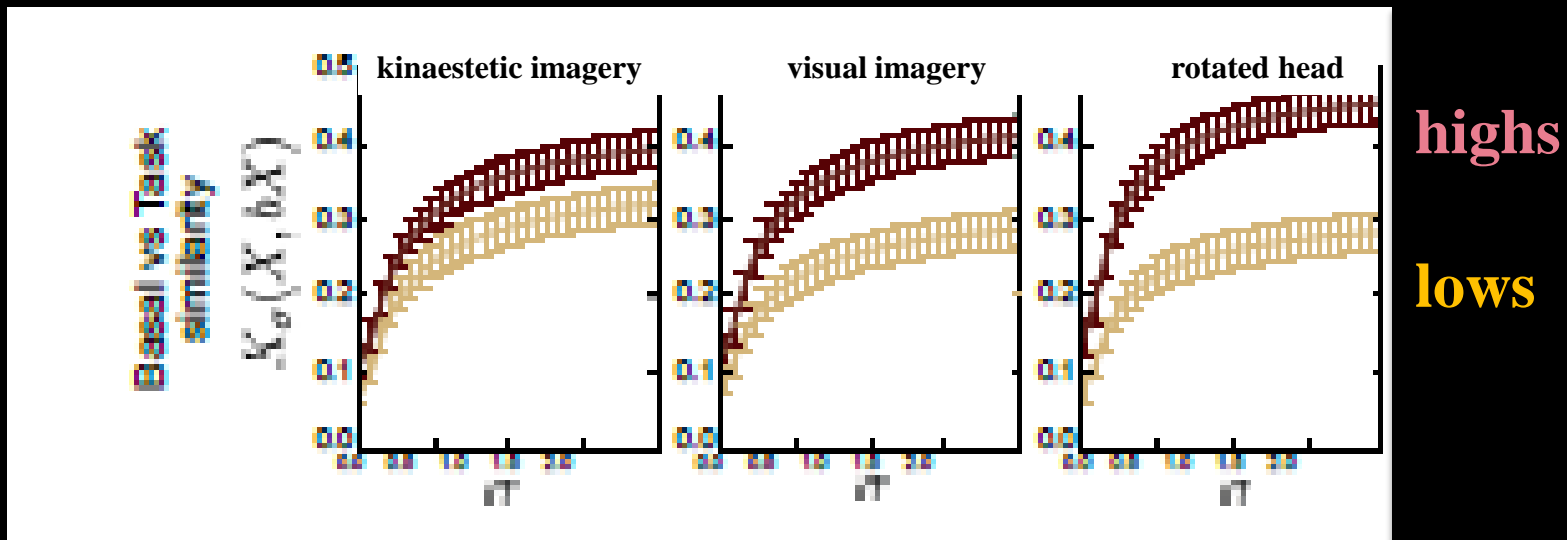


*Spina et al., Neuroscience 2020*

*or higher dopaminergic tone?*

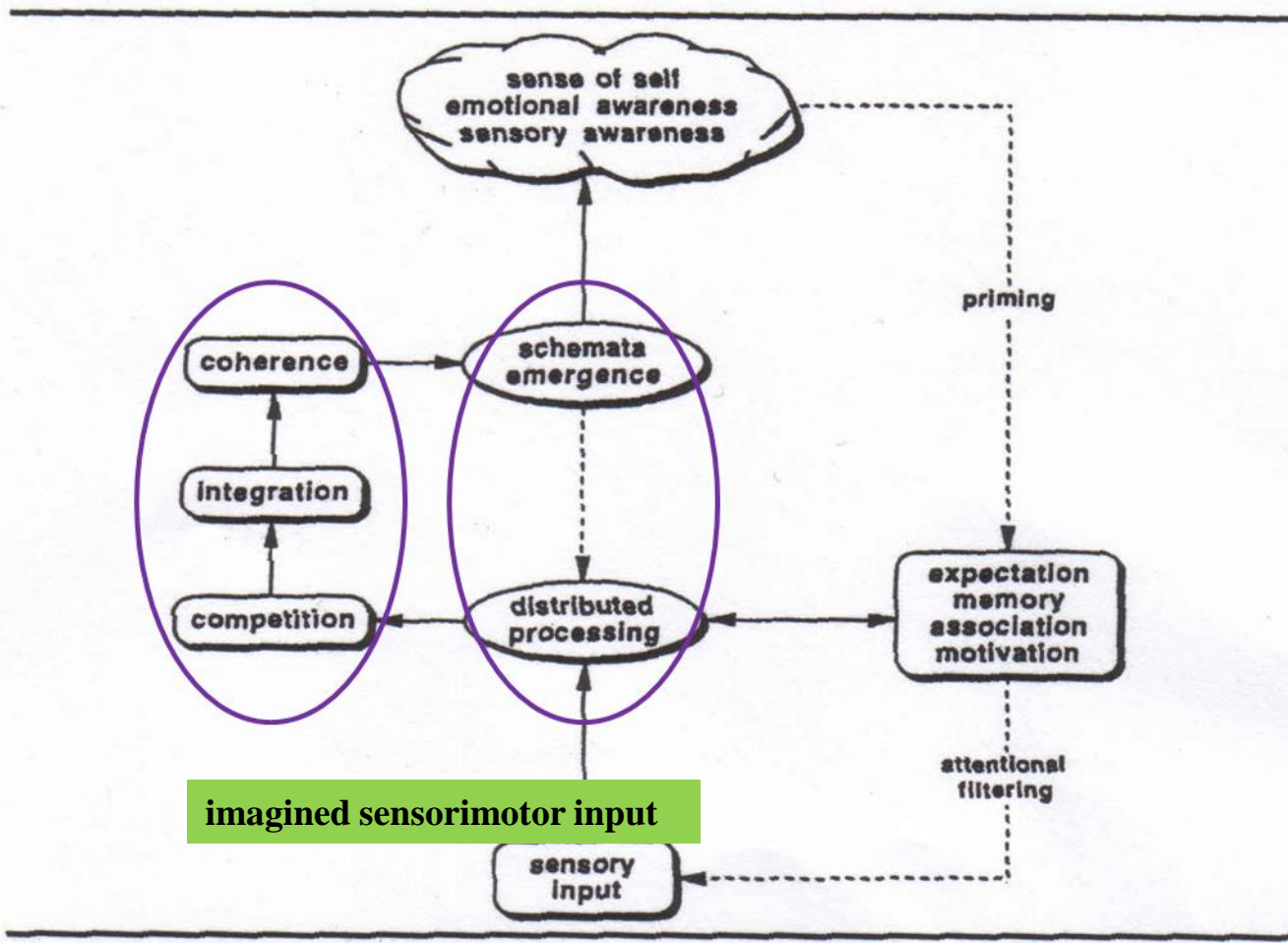
a few physiological correlates of hypnotizability  
may account for  
the highs' response to suggestions

Topological analysis of EEG:  
stronger functional equivalence between imagery and perception in highs



The highs' better simulation of physically induced perception/action may facilitate the response to sensori-motor suggestions and possibly account for their greater proneness to ideomotor behavior





imagined sensorimotor input

## **In highs**

- greater attentional stability/absorption in highs  
*Tellegen and Atkinson, 1974; Raz, Int J Clin Exp Hypn, 2005*
- higher blink rate  
*Di Gruttola et al., Exp Brain Res 2014*

*or higher dopaminergic tone?*

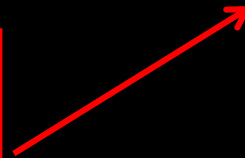
## socio-cognitive theories

suggestion



Cognitive –emotional traits  
states

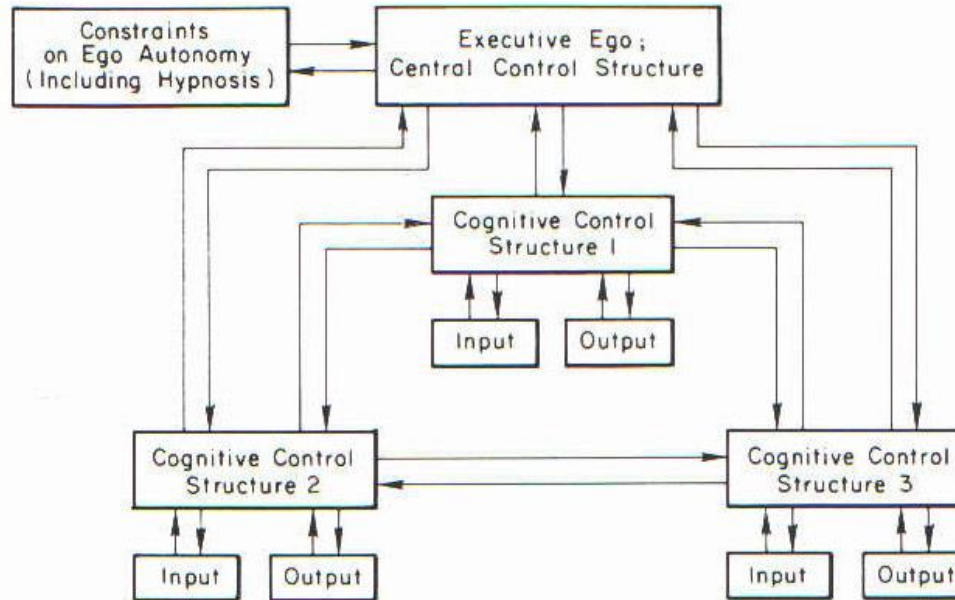
**Physiological features**



behaviour



## neo-dissociative theories



**FIGURE 3.2.** Subordinate cognitive control structures in a hierarchical order. Hierarchical positions are subject to change under control of the executive ego. From "Neodissociation Interpretation of Pain Reduction in Hypnosis" (p. 405) by E. R. Hilgard, 1973, *Psychological Review*, 80, 396–411. Reprinted by permission of American Psychological Association.

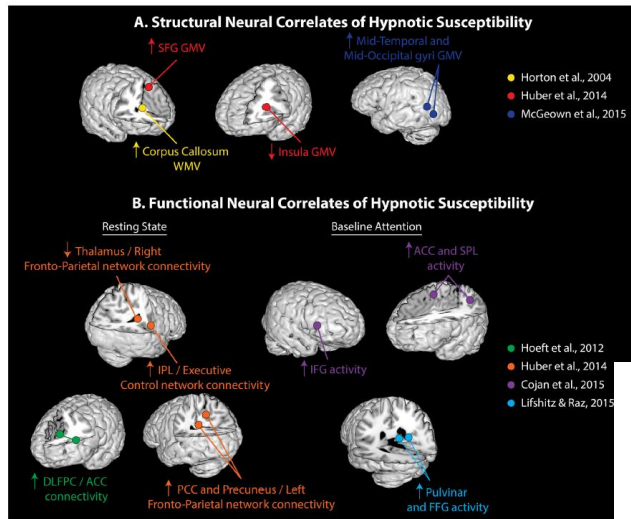
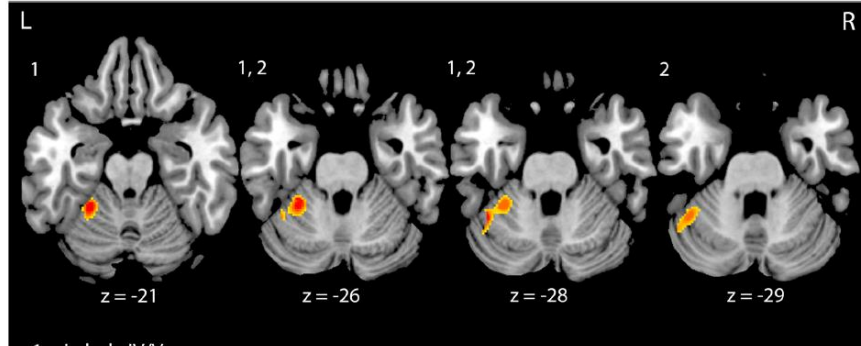


Fig. 3. A. Structural correlates of hypnotic susceptibility. Change in gray matter volume (GMV) and white matter volume (WMV) as a function of hypnotic susceptibility. B. Functional correlates of hypnotic susceptibility. Increased activity and functional connectivity patterns in experiments contrasting high and low susceptibility in resting state (i.e., no task or stimuli) and baseline attention (i.e., using an attention task). The colors indicate the different studies (see online version for details). ACC = Anterior Cingulate Cortex. DLFPFC = Dorsolateral Prefrontal Cortex. FFG = Fusiform Gyrus. IFG = Inferior Frontal Gyrus. IPL = Inferior Parietal Lobule. SFG = Superior Frontal Gyrus. SPL = Superior Parietal Lobule. PCC = Posterior Cingulate Cortex.

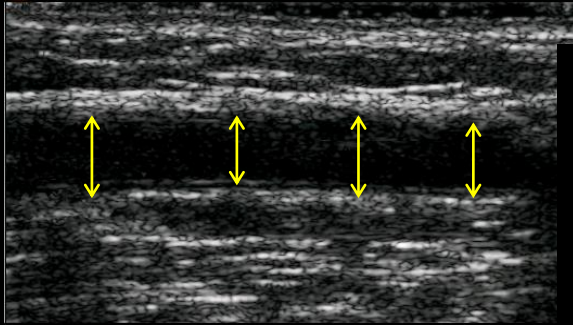
## Cerebellum



Suggestibility  
score

Suggestibility score	1
Hypnotic depth rating	0.524**
Relaxation rating	0.378*
Age	-0.447*
Education	-0.463*
Total intracranial volume	-0.528**
Grey matter	-0.380*
White matter	-0.507**

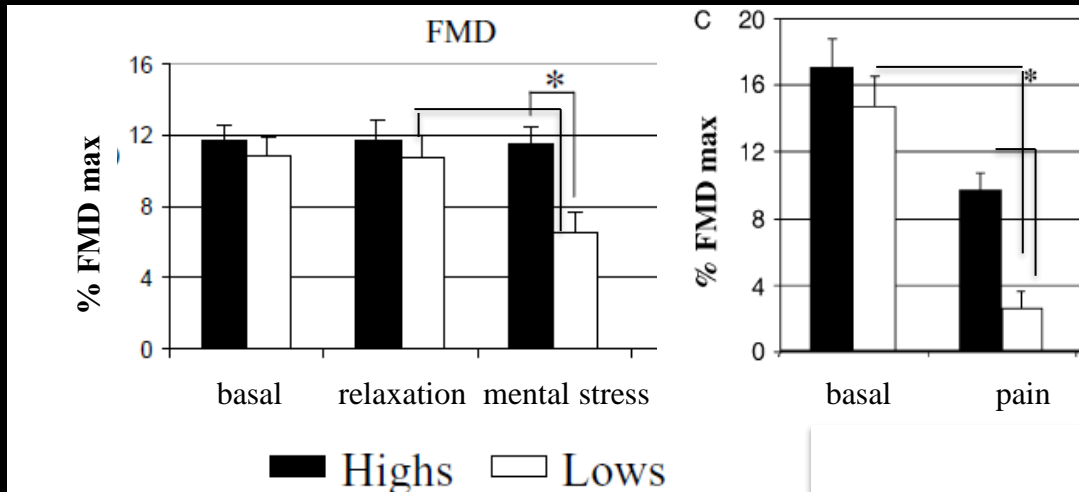
hypnotic suggestibility is negatively correlated with GM, WM, total brain volume



## Post occlusion flow- mediated endothelial dilation

**FMD**<sub>mean or max</sub>

$(\text{mean or max post ischemic diameter} - \text{basal diameter}) * 100$   
 basal diameter



*(Jambrík et al., Brain Res Bull 2004; Int J Psychophysiol 2005; Pain 2005)*

*work in progress...*

## Limitations

Mediums not included

Samples size



G. Carli

C. Mocenni

University of Siena



D. Manzoni  
L. Sebastiani  
C. Chisari  
S. Presciuttini

University of Pisa

E. Picano , R. Balocchi, M Varanini  
National Council of Research, Pisa



G. Petri

ISI Foundation, Turin



**Why should Nature have selected highs for survival ?**

## In highs

- better vascular endothelial function (flow mediated dilation) in stressful conditions *Jambrik et al 2004, 2005,*
- higher parasympathetic tone in resting conditions *Santarcangelo et al., 2012*



**better cardiovascular prognosis**

- **better response of the immune system to relaxation** *(Gruzelier et al., 2004)*

## In highs

high frequency of A118G polymorphism of OPMR1 gene ( $\mu$ 1 receptors)



low responsiveness to endogenous opiates



*(science fiction)*

*survival made possible by  
development of non opioid  
mechanisms for pain control*





# Ipnosi

---

*stato di coscienza* consistente in

- focalizzazione dell' attenzione
  - riduzione del contatto con l'ambiente
  - aumentata capacità di accettare suggestioni
- 

American Psychological Association (*Elkins et al., Int J Clin Exp Hypn, 63(1):1-9, 2015*)