

# 10.

---

## Bölüm



## PALYATİF BAKIM VE HİPNOZ

Ümran KARACA<sup>1</sup>  
Dilek ÖZCENGİZ<sup>2</sup>

Latince kökenli olan “Palyatif” kelimesi koruyucu veya kapsayıcı anlamındaki “Palliate (Palliare)” dan köken almaktadır. İngilizce terminolojide ise hafifletici, yatıştırıcı, geçici çare anlamında kullanılan “Palliative” den gelmektedir. Palyatif bakım; ileri dönem kronik hastalığı olan ve/veya hayatı tehdit eden bir hastalıkla karşı karşıya olan hastalar ve yakınları için yaşam ve ölüm kalitesini artırmaya yönelik multidisipliner bir tıp uzmanlığıdır (1).

1970’li yılların sonlarında kurulmuş olan palyatif bakım üniteleri hastalığın tüm evrelerinde iyileştirici ve destekleyici tedavilere ek olarak hastanın duyduğu acıyı azaltmayı amaçlamaktadır. Ayrıca hastanın ahlaki, etik değerlerine ve beklentilerine uygun bakım planı oluşturmak, hasta ve yakınları arasında etkin iletişim sağlayıp koordinasyon kurmak, hem hastalara hem de bakmakla yükümlülere psikososyal, manevi ve fiziksel destek verebilmektir. Palyatif değerlendirme detaylı özgeçmiş ve fizik muayene içermekle beraber etik açıdan geleneksel yapıya da hakim olmalıdır. Modern darülaceze ve palyatif bakımın kurucusu Dame Cicely Saunders

<sup>1</sup> Uzm. Dr. Sağlık Bilimleri Üniversitesi Bursa Yüksek İhtisas Eğitim ve Araştırma Hastanesi Anesteziyoloji ve Reanimasyon AD., umransuna@hotmail.com

<sup>2</sup> Prof. Dr., Çukurova Üniversitesi Tıp Fakültesi, Anesteziyoloji ve Reanimasyon dilekozcengiz@gmail.com



nozun yaygın olarak kullanımını destekleyecek, etkinliğinin izlendiği ve faydasının gözlenmesi için hem bireysel hem de ekip yaklaşımını dikkate alan yeni bir bakış açısı gerekmektedir. Böylelikle palyatif bakım hastaları gibi tedavisi en zor hasta grubu ve yakınlarının hissettikleri acının azaltılabilmesi için alternatif seçenekler ümit verici olabilir.

## KAYNAKLAR

---

1. Sepúlveda C, Marlin A, Yoshida T, Ullrich A. Palliative Care: The World Health Organization's Global Perspective. *J Pain Symptom Manage.* 2002; 24: 91.
2. Cook AJ, Degood DE. The cognitive risk profile for pain: development of a self-report inventory for identifying beliefs and attitudes that interfere with pain management. *Clin J Pain.* 2006; 22: 332.
3. Temel JS, Greer JA, Muzikansky A, et al. Early palliative care for patients with metastatic non-small cell lung cancer. *N Engl J Med.* 2010; 363: 733.
4. [http://www.nccn.org/professionals/physician\\_gls/f\\_guidelines.asp](http://www.nccn.org/professionals/physician_gls/f_guidelines.asp)
5. <http://www.nationalcoalitionhpc.org/ncp-guidelines-2013>.
6. Engel LW, Straus SE. Development of therapeutics: opportunities within complementary and alternative medicine. *Nat Rev Drug Discov.* 2002; 1: 229.
7. Hunt KJ, Choelho HF, Wider B, et al. Complementary and alternative medicine use in England: results from a national survey. *Int J Clin Pract.* 2010; 64: 1496-1502.
8. Metz JM, Jones H, Devine P, Hahn S, Glatstein E. Cancer patients use unconventional medical therapies far more frequently than standard history and physical examination suggest. *Cancer J.* 2001; 7: 149.
9. Schofield PE, Juraskova I, Butow PN. How oncologists discuss complementary therapy use with their patients: an audio-tape audit. *Support Care Cancer.* 2003; 11: 348.
10. Price DD, Borell JJ. The structure of the hypnotic state: a self-directed experiential study. Copely, Acton, MA. 1990: 85- 97.
11. Trujillo Rodríguez D, Faymonville ME, Vanhaudenhuyse A, Demertzi A. Hypnosis for cingulate-mediated analgesia and disease treatment. *Handb Clin Neurol.* 2019; 166: 327-39.
12. Rainville P, Price DD. Hypnosis phenomenology and the neurobiology of consciousness. *Int J Clin Exp Hypn.* 2003; 51: 105- 29.
13. Rainville P, Hofbauer RK, Paus T, et al. Cerebral mechanisms of hypnotic induction and suggestion. *J Cogn Neurosci.* 1999; 11: 110- 25.
14. Maquet P, Faymonville ME, Degueldre C, et al. Functional neuroanatomy of hypnotic state. *Biol Psychiatry.* 1999; 45: 327- 33.
15. Kawashima R, O'Sullivan BT, Roland PE. Positron-emission tomography studies of cross-modality inhibition in selective attentional tasks: closing the "mind's eye". *Proc Natl Acad Sci USA.* 1995; 92: 5969- 72.
16. Paus T. Functional anatomy of arousal and attention systems in the human brain. *Prog Brain Res.* 2000; 126: 65-77.
17. Rainville P, Price DD. The neurophenomenology of hypnosis and hypnotic analgesia. Vol. 29. IASP Press, Seattle, WA. 2004: 235- 67.



18. Brugnoli MP. Clinical hypnosis in pain therapy and palliative care : a handbook of techniques for improving the patient's physical and psychological well-being. Springfield, Illinois, U.S.A.: Charles C Thomas Publisher. 2014.
19. Erickson MH, Rossi EL. Two level communication and the microdynamics of trance and suggestion. *Am J Clin Hypn.* 1976; 18: 153-71.
20. Kleinbub JR, Palmieri A, Broggio A, et al. Hypnosis-based psychodynamic treatment in ALS: a longitudinal study on patients and their caregivers. *Front Psychol.* 2015; 6: 822.
21. Tononi G, Koch C. Consciousness: here, there and everywhere? *Philos Trans R Soc Lond B Biol Sci.* 2015; 370(1668):20140167.
22. Thut G, Veniero D, Romei V, et al. Rhythmic TMS causes local entrainment of natural oscillatory signatures. *Curr Biol.* 2011; 21: 1176-85.
23. De Weer AS, Da Ros M, Berré J, et al. Environmental influences on activity patterns in altered states of consciousness. *Eur J Neurol.* 2011; 18: 1432-4.
24. Tononi G, Koch C. The neural correlates of consciousness: an update. *Ann N Y Acad Sci.* 2008; 1124: 239-61
25. Eric KW. Clinical hypnosis in pain therapy and palliative care: A handbook of techniques for improving the patient's physical and psychological well-being by Brugnoli, Maria Paola. *Am J Clin Hypn.* 2017; 59: 318- 20.
26. Marcus J, Elkins G, Mott F. The integration of hypnosis into a model of palliative care. *Integr Cancer Ther.* 2003; 2: 365-70.
27. Landry M, Stendel M, Landry M, Raz A. Hypnosis in palliative care: from clinical insights to the science of self-regulation. *Ann Palliat Med.* 2018; 7: 125-135.
28. Brugnoli MP, Pesce G, Pasin E, Basile FM, Tamburin S, Polati E. The role of clinical hypnosis and self-hypnosis to relief pain and anxiety in severe chronic diseases in palliative care: a 2-year longterm follow-up of treatment in a nonrandomized clinical trial. *Ann Palliat Med.* 2018; 7: 17-31.
29. Montgomery GH, Schnur JB, Kravits K. Hypnosis for cancer care: over 200 years young. *CA Cancer J Clin.* 2013; 63: 31-44.
30. Marchioro G, Azzarello G, Viviani F, Barbato F, Pavanetto M, Rosetti F, et al. Hypnosis in the treatment of anticipatory nausea and vomiting in patients receiving cancer chemotherapy. *Oncology.* 2000; 59: 100-4.
31. Richardson J, Smith JE, McCall G, Richardson A, Pilkington K, Kirsch I. Hypnosis for nausea and vomiting in cancer chemotherapy: a systematic review of the research evidence. *Eur J Cancer Care (Engl).* 2007; 16: 402-12.
32. Genus ML. The use of hypnosis in helping cancer patients control anxiety, pain, and emesis: a review of recent empirical studies. *Am J Clin Hypn.* 1995; 37: 316.
33. Lotfi-Jam K, Carey M, Jefford M, et al. Nonpharmacologic strategies for managing common chemotherapy adverse effects: a systematic review. *J Clin Oncol.* 2008; 26: 5618.
34. Richardson J, Smith JE, McCall G, Pilkington K. Hypnosis for procedure-related pain and distress in pediatric cancer patients: a systematic review of effectiveness and methodology related to hypnosis interventions. *J Pain Symptom Manage.* 2006; 31:70.
35. Stalpers LJ, da Costa HC, Merbis MA, et al. Hypnotherapy in radiotherapy patients: a randomized trial. *Int J Radiat Oncol Biol Phys.* 2005; 61: 499.
36. Maria Paola Brugnoli, Giancarlo Pesce, Emanuela Pasin, et al. The role of clinical hypnosis and self-hypnosis to relief pain and anxiety in severe chronic diseases in palliative care: a 2-year long-term follow-up of treatment in a nonrandomized clinical trial *Ann Palliat Med.* 2018 ; 7: 17-31.
37. Didier Quintini, Marie Fichaux, Frédérique Surdej, Nelly Espanet, Sébastien Salas An evaluation of hypnosis practices in palliative care] *Rech Soins Infirm.* 2018; 133: 85-91.



38. Stefan J Friedrichsdorf, Daniel P Kohen. Integration of hypnosis into pediatric palliative care. *Ann Palliat Med.* 2018; 7: 136- 50.
39. Linda E Carlson , Kirsti Toivonen , Michelle Flynn, et al. The Role of Hypnosis in Cancer Care. *Curr Oncol Rep.* 2018; 13: 93.