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The use of hypnosis to improve pain management during voluntary interruption of pregnancy: an open randomized preliminary study.

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OBJECTIVE: This report describes an open randomized study that aims to determine whether a brief hypnotic intervention during first-trimester surgical abortion reduces requests for pain medication. **METHODS:** Thirty women undergoing first-trimester surgical abortion at the family planning clinics of a large hospital in Quebec City were randomized into a control group that received standard care and a hypnosis group that received, in addition to standard care, an intervention of hypnosis, including analgesia suggestions 20 min before and throughout the surgical procedure. Patients in both groups were given the option to control their pain with nitrous oxide (N₂O) sedation administered through a nose mask as often and for as long as they wanted during the procedure. N₂O sedation as the primary outcome was assessed at each step of the procedure. The patient's self-reported anxiety and pain were also assessed during the procedure as secondary outcomes. **RESULTS:** Thirty-six percent of patients in the hypnosis group requested N₂O sedation during the procedure versus 87% in the control group ($p < .01$). No differences between the groups were found in reports of pain and anxiety during the procedure.

CONCLUSION: **These results suggest that hypnosis can be integrated into standard care and reduces the need for N₂O in patients undergoing first-trimester surgical abortion.** This reduction in N₂O consumption did not lead to significant changes in pain or anxiety, and a larger sample size is required to assess the possible effects of hypnosis on those variables.