

1.2 Introduction

Dr. Elvira Lang: How It All Started

I thought to share some background on how Comfort Talk® developed. For most of my professional career I have been an interventional radiologist. I was performing surgeries with image guidance on mainly awake patients. Technology has evolved so far that open surgery or general anesthesia are no longer necessary for many of these procedures. But that also means that patients' anxiety and fears have become safety-limiting factors, and drugs don't always do the trick.

About twenty-five years ago when I was at The VA in Palo Alto, I had the opportunity to treat a young Vietnam veteran. He was very scared to even get on the procedure table for a relatively simple procedure that wouldn't have been much more complicated than, let's say, changing earrings. And that's the first time that I saw how a short imagery intervention could make quite a bit of difference. And I thought that this might possibly be the magic wand, but I would want to see if this also hold up on other patients in a hectic medical environment. The challenge was to see whether what had been considered the domain of highly trained hypnotherapist could be translated into the armamentarium of regular healthcare professionals who deal with patients on a everyday basis. And so, we started to test all individual elements in clinical trials and also how we could train team members in applying these techniques. Well we found out it didn't require any traditional hypnotherapy, it even didn't require traditional hypnosis, all it takes is just a slight change in how medical personnel talk to patients, slight changes in behaviors, you could say perhaps some hypnoidal language. And that takes up about 90% of Comfort Talk®, because that is what it is about. Just a new way of talking to patients and guiding them to relaxation by helping patients help themselves.