Interactive Guided Imagery

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Introduction (Origins and History)

A mental image is a thought with sensory qualities. It is something we mentally see, hear, taste, smell, touch, or feel. The term “guided imagery” refers to a wide variety of techniques, including simple visualization and direct suggestion using imagery, metaphor and story-telling, fantasy exploration and game playing, dream interpretation, drawing, and active imagination where elements of the unconscious are invited to appear as images that can communicate with the conscious mind.

Once considered an “alternative” or “complementary” approach, guided imagery is now finding widespread scientific and public acceptance, and it is being used to teach psychophysiological relaxation\(^1\), alleviate anxiety and depression\(^2\), relieve physical and

\(^1\) Zahourek, RP, ed., Relaxation & Imagery: Tools for therapeutic communication and intervention, WB Saunders, Phila, 1988

\(^2\) King, JV, A holistic technique to lower anxiety: relaxation with guided imagery, J Holistic Nursing, 1988, 6(1) 16-20
McDonald RT, Hilgendorf, WA, Death imagery and death anxiety, J Clinical Psychology, 1986 Jan 42(1) 87-91
psychological symptoms\textsuperscript{3}, overcome health-endangering habits\textsuperscript{4}, and help patients prepare for surgery and tolerate procedures more comfortably.\textsuperscript{5}

Mental images, formed long before we learn to understand and use words, lie at the core of who we think we are, what we believe the world is like, what we feel we deserve, what we think will happen to us, and how motivated we are to take care of ourselves. These images strongly influence our beliefs and attitudes about how we fall ill, and what we or will not help us get better.

All healing rituals involve manipulation of these images, either overtly or covertly, and thus, guided imagery can be considered one of the oldest and most ubiquitous forms of medicine. The healing rituals of various cultures that have persisted over time all have a certain level of clinical efficacy, and while we may attribute these therapeutic benefits to “placebo effects,” they are real and measurable effects with important implications for our understanding of the healing process.

In the early 1970s, inspired by the pioneering work of Irving Oyle, Carl and Stephanie Simonton, Roberto Assagioli, and others, the authors began to develop and research contemporary imagery approaches for patients coping with chronic pain, immune dysfunction, cancer, heart disease, and other catastrophic and life-threatening illnesses.

By integrating techniques originating from Jungian psychology, Gestalt therapy, Psychosynthesis, Ericksonian hypnotherapy, object relations theory, humanistic psychology, and advanced communications theory, these approaches were constantly redefined, expanded, tested, and codified, giving birth to “Interactive Guided Imagery,” an extremely powerful, yet remarkably safe and rapid therapeutic approach for mobilizing the untapped healing resources of the mind.

In 1989, the Academy for Guided Imagery\textsuperscript{6} was established to provide in-depth training for clinicians, to raise public and professional awareness about the benefits of imagery, and to support research, professional communication, and the dissemination of imagery-related information. Since then, the Academy has obtained professional accreditation, recruited an interdisciplinary faculty, sponsored and conducted research,

Rider, MS, Treating arthritis and lupus patients with music-mediated imagery and group psychotherapy, arts in Psychotherapy, 1990 Spr 17(1) 29-33

\textsuperscript{4} Ahsen, A, Imagery treatment of alcoholism and drug abuse: A new methodology for treatment and research, J Mental Imagery, 1993, Fall-Winter 17(3-4), 1-60
Krystal, S, Zweben, J, The use of visualization as a means of integrating the spiritual dimension into treatment: II. Working with emotions., J Substance Abuse Treatment, 1989, 6(4) 223-228


\textsuperscript{6} Academy for Guided Imagery, 30765 Pacific Coast Hwy #369 Malibu, CA 90265. (800) 726-2070. Internet site: www.interactiveimagery.com
Mechanisms of Action

Although no one really knows what “consciousness” is, it is critically related to the process of attention, for what we attend to and focus on is what we experience. There is an old saying that “whatever you give your attention to grows,” whether it’s your garden, your children, or your worries and fears.

Over the years, most of us learn to give our major attention to the conscious mind and the chatter of its little voice that narrates a linear, logical, rational, analytic monologue describing its perspective of the world and how we think about it. We quickly become lost in our thoughts, forgetting that any other parts of us exist.

However, we are much more than our conscious mind and what it thinks. We are also characterized by the richness of our unconscious mind and its intuitions, emotions, feelings, memories, drives, motives, goals, appetites, aspirations, ambitions, values, beliefs, attitudes, and perceptions, all of which are expressed more fully by our imagery experiences than by conscious verbal awareness. Yet, in our Western culture, we tend to pay much less attention to these images and the feelings they convey than we do to the “little voice” of our conscious mind.

Therapeutic guided imagery allows clients to enter a relaxed state of mind, and then to focus their attention on images associated with the issues they are confronting. For example, one can invite an image to form that represents a particular medical symptom, and then initiate an imaginary dialogue with the image to ask why it’s here, what it wants, what it needs, where it’s going, and what it has to offer. The information obtained from such a dialogue can often be more directly helpful than even the most sophisticated medical diagnostic tests.

Patients coping with chronic pain can be invited to visit and experience an “Inner Sanctuary” where there is no pain, and those facing difficult medical decisions can be introduced to a wise and caring “Inner Advisor” that can provide support and help them explore their feelings about the various options they are considering.

By using an interactive, non-judgmental, content-free guiding style, experienced imagery practitioners can encourage patients to tap their latent inner resources to find new and creative solutions for their own problems. The consistent emphasis on inner resources and solutions leads to minimal transference, greater opportunities for effective client self-care, an enhanced sense of self-efficacy, and the rapid development of patient autonomy.

Biologic Mechanism of Action

Imagery has profound physiological consequences, and the body tends to respond to imagery as it would to a genuine external experience. For example, if you vividly imagine slowly sucking on the sour, tart slice of a fresh, juicy lemon, you will soon begin to salivate. Another example is sexual fantasy and its attendant physiologic responses. What happens to your body when you bring to mind something that makes you ferociously angry?

Imagery has been shown to affect almost all major physiologic systems of the body, including respiration, heart rate, blood pressure, metabolic rates in cells, gastrointestinal mobility and secretion, sexual function, cortisol levels, blood lipids, and even immune responsiveness.

With respect to producing specific physiological changes that can promote healing, guided imagery represents an important alternative to pharmacotherapy with much greater safety and far fewer complications, precautions, and contra-indications.
Demographics

Physicians, nurses, psychologists, social workers and other health care professionals trained and certified in Interactive Guided Imagery\textsuperscript{sm} are distributed internationally, with concentrations of practitioners currently in California, Washington, Oregon, and Arizona. Other practitioners are dispersed throughout the United States, and the Academy has even trained health professionals from Japan, England, Italy, Hong Kong, and Australia.

Forms of Therapy

The term “guided imagery” is used to describe a range of techniques from simple visualization and direct imagery-based suggestion, to metaphor and story-telling. The service-marked term “Interactive Guided Imagery\textsuperscript{sm}” (IGI) refers to the specific approach taught by the Academy for Guided Imagery in which imagery is used in a highly interactive format to evoke greater patient autonomy.

Rather than simply giving patients “better” images to imagine, IGI encourages patients to draw upon their own inner resources to support healing; to make appropriate adaptations to changes in their health; and to find creative solutions to challenges that they previously thought were insoluble. IGI is particularly suited to our current health care climate, where cost-effective mind/body medicine, improved medical self-care, and briefer, yet more empowering approaches to health care are valued by patients, providers, and insurers alike.

IGI is applicable as a self-care technique, in a group or class, or as part of an individual counseling relationship. Self-help imagery books and tapes are also an inexpensive option for many clients who are capable of learning and utilizing these techniques on their own.

Indications and Referrals for Treatment

Since imagery has powerful physiological consequences and also conveys important and otherwise inaccessible information from the unconscious mind, there are virtually an unlimited number of situations where it can be used in health care settings. For simplicity, however, it may be helpful to consider three major categories of use:

1. Relaxation and stress reduction, which is easy to teach, easy to learn, and almost universally helpful to patients;
2. Active visualization, or directed imagery, where the patient is encouraged to imagine desired therapeutic outcomes while in a relaxed, open state of mind. This affords patients a sense of participation and control in their own healing, which is of significant value by itself. In addition, visualization can be used to alleviate symptoms, stimulate healing responses in the body, modify health endangering behaviors, and provide effective motivation for making positive life changes;
3. Receptive, or insight oriented imagery, where images are invited to enter conscious awareness where they are interactively explored to gather more information about a symptom, illness, mood, treatment, situation, or possible solution.

Research Base

Clinical research studies on Interactive Guided Imagery\textsuperscript{sm} have just been initiated with studies currently in progress at UCLA and UCSF-Mt. Zion Cancer Center. However, there are numerous studies in the literature documenting the
effectiveness of guided imagery and visualization for pain control\textsuperscript{7}, cancer management\textsuperscript{8}, treating irritable bowel syndrome\textsuperscript{9}, arthritis\textsuperscript{10}, menstrual

\textsuperscript{7} Achterberg, J, et al, Severe burn injury: comparison of relaxation, imagery and biofeedback for pain management, J Mental Imagery, 1988 Spr 12(1) 71-87
Raft, D, et al, Selection of imagery in the relief of chronic and acute clinical pain, J Psychosomotic and Clinical Research, 1986, 30(4) 481-488
Krueger, LC, Pediatric pain and imagery, J of Child & Adolescent Psychiatry, 1987 4(1) 32-41
Newshan, G, Use of imagery in a chronic pain outpatient group, Imagination, Cognition and Personality, 1990-91 10(1) 25-38


\textsuperscript{9} Blanchard EB; Greene B; Scharff L; Schwarz-McMorris SP. Relaxation training as a treatment for irritable bowel syndrome. Biofeedback and Self Regulation, 1993 Sep, 18(3):125-32.

Bennett, AK, Rheumatoid arthritis: Effects on the disease process utilizing a behavioral approach to treatment, DAI, 1985 Sep 46(3-B) 993
Rider, MS, Treating arthritis and lupus patients with music-mediated imagery and group psychotherapy, arts in Psychotherapy, 1990 Spr 17(1) 29-33
irregularities\textsuperscript{11}, eczyma\textsuperscript{12}, fibromyalgia\textsuperscript{13}, heart disease\textsuperscript{14}, and even insomnia.\textsuperscript{15}

**Risk and Safety**

Guided imagery is one of the safest complementary or alternative medical interventions. The primary danger in using imagery to augment healing in medical situations is when it is used instead of (rather than in addition to) more appropriate medical diagnosis and/or treatment.

Obviously, patients who are psychotic, patients with dissociative disorders, and patients with borderline personality disorders must be handled with care by well-trained and experienced practitioners. While these diagnoses do not represent absolute contraindications for imagery therapy, they require health professionals to have specific expertise in these areas.

**Efficacy**

Imagery is the natural language of the emotions and the unconscious mind. It also has a profound controlling influence on our nervous, endocrine, and immune systems, so its potential uses in the healing professions are protean. Thus, with this in mind, imagery should be thought of as a way of working with the patient, rather than a way of treating a particular disease or symptom.

The efficacy of using imagery is extremely high in clinical situations classically considered “psychosomatic” or for conditions complicated by anxiety, stress, trauma, and loss of control. However, IGI is not a therapy you can apply to an unwilling patient who is unwilling to try it or alienated in general by mind/body approaches. The patients who do become engaged in the imagery process almost always receive some benefit from it, and are grateful for the self-management skills they've learned in the process.

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\textsuperscript{11} Tasto, D, Muscle relaxation treatment for primary dysmenorrhea, Behavior Therapy, 1974 Oct 5(5) 668-672
\textsuperscript{12} Torem, M, Hypnotherapeutic techniques in the treatment of hyperemesis gravidarum, Am J Clinical Hypnosis, 1994 Jul 37(1) 1-11
\textsuperscript{14} Albright, GL, Effects of warming imagery aimed at trigger-point sites on tissue compliance, skin temperature, and pain sensitivity in biofeedback-trained patients with chronic pain: a preliminary study, Perceptual & Motor Skills, 1990 Dec 71(3, Pt 2) 1163-1170
\textsuperscript{15} Ulmer, D, Stress management for the cardiovascular patient: a look at current treatment and trends, Progress in cardiovascular Nursing, 1996 winter 11(1) 21-29

Morin, CM, Stimulus control and imagery training in treating sleep-maintenance insomnia, J Consulting & Clinical Psychology, 1987 Apr 55(2) 260-262
Future Research Opportunities

There are many important research questions that currently remain unanswered. For example, can IGI actually slow the progression of a disease as well as enhance the well-being of the patient? How much is the healing process caused by engendering a sense of self-efficacy in the patient, and how much results directly from physiologic responses to imagery? Can patients self-diagnose more accurately if they utilize IGI? Does IGI lead to more effective and long-lasting lifestyle modification in patients with chronic illness? Can IGI be helpful at the end of life in reducing distress and preventing futile care?

Office Applications

Clinical applications of Interactive Guided Imagery\textsuperscript{sm} in medicine are tremendously broad, and include, but are not limited to:

- Relaxation training
- Stress reduction and management
- Acute and chronic pain relief
- Managing chronic illness and preventing acute exacerbations
- Preparation for surgery and medical procedures
- Medication compliance and adherence issues
- Cancer treatment and life-threatening illnesses
- Terminal illnesses and end of life care
- Fertility, birthing and delivery
- Grief therapy
- Post-traumatic stress disorder
- Anxiety disorders
- Depression
- Sleep disorders
- Fitness training
- Smoking cessation and weight control

The Academy for Guided Imagery has developed IGI techniques applicable in the course of normal clinical interaction, in brief medical office visits, or in longer counseling or psychotherapy formats. Physicians may practice it themselves or employ an appropriate allied health professional to offer longer sessions.

Self-Help vs. Professional

While it is always advisable to seek care from a trained professional, many basic guided imagery techniques for simple relaxation, stress management, and related problems are commercially available on cassette tapes, and may be helpful for minor, self-limiting problems. For more serious situations requiring Interactive Guided Imagery\textsuperscript{sm}, appropriate care can only be provided by health professionals who have been trained and certified by the Academy for Guided Imagery.

Visiting a Professional

Interactive Guided Imagery\textsuperscript{sm} (IGI) is an easy-to-learn method of empowering your mind to enhance the process of healing. With the aid of a supportive, trained guide, you will learn specific techniques designed to help you relax, relieve stress, encourage physical healing enhance body/mind communication, sharpen your intuition and creativity, and become more effective at reaching your goals.
Using a simple relaxation technique to help you focus attention on your own personal inner world, your IGI Guide teaches you skills that will help you be more effective in problem-solving, conflict resolution, goal setting, stimulating healing responses in your body, and in using your own latent inner strengths and resources to bring about emotional balance in your daily life.

**Credentialing and Training**

The Academy for Guided Imagery has well-established standards of competence and ethical behavior that must be met as a pre-requisite for Certification. The Academy is accredited by the American Psychological Association, National Association of Social Workers, and the California Board of Nursing. Quality assurance is based on written examinations and direct observation of clinical work in small group and individual supervision sessions during the training program.

Each candidate must satisfactorily complete 150 hours of Academy-approved training, including direct observation of his or her guiding abilities. This is conducted by a team of four to six different faculty members during at least 52 hours of direct supervision to ensure the candidate’s mastery of these methods. We know of no other such standards of quality assurance established for imagery practitioners.

**What to Look For in A Provider**

All providers of Interactive Guided Imagery<sup>sm</sup> should have a Certificate from the Academy for Guided Imagery and should be listed with the Academy and on its website (www.interactiveimagery.com) as a Certified graduate.

**Barriers and Key Issues**

Clinicians have always been cognizant of the importance of attitudes, emotions, and mind/body relationships in medicine. Advances in the neurosciences, including peptide and receptor physiology, along with clinical studies of mind/body phenomenon have renewed research interest in this field. With some research funds now being available to study this complex area, we will likely learn a great deal more in the next 10-20 years than we have ever before.

**Suggested Reading**


