

THOUGHT PATTERN MANAGEMENT™

INSTRUCTING THE INNER MIND FOR NEUROLOGICAL CHANGE OR REPAIR.©

BY ROBERT W. FLETCHER

INTRODUCTION:

Having worked with NLP and Hypnosis for the past 15 years, I find that there are ways of working with each level of the mind, which brings about change quickly. In discussing this with others in the health community, I find that they are amazed at some of the results I have been getting over the past few years. Several years ago, I wrote an article for Anchor Point in which I set forth an engineering metaphor that could be used with a combination of hypnosis and NLP skills. The results, obtained through the use of this mental metaphor, have been extremely successful and gratifying. I would like to review that metaphor, expand upon it, and give some examples of how I use it with people who are in coma and with those who have had brain injury.

SETTING THE CONDITIONS

Establish rapport both at the conscious and unconscious levels.

If the person is conscious, use a conscious format of hypnotic instruction.

If the person is in coma, treat the coma as a deep trance state; establish ideo-motor signals for yes and no.

THE METAPHOR

1. Establish the lead and follow pattern. "Close your eyes. Imagine in your mind that you are standing in front of a chalkboard. Please do each of the following tasks and nod your head when you are done so that I will know you are ready for the next task. Draw a large circle on the board. Inside the circle, draw a square. Inside the square, draw a triangle. Inside the triangle draw an X. Now erase the X. Now erase the triangle. Now erase the square. Now erase the circle and clear your mind.
2. Set up a repair process driver or taskmaster. I use a cataleptic arm for this purpose since it has gravity pulling on it keeping the process moving. I simply say, "May I borrow your arm." Then reach over and gently lift their arm to an upright position, allowing their elbow to rest on something. Say "And I am going to ask your unconscious mind to take charge of your hand and allow it to lower only as quickly as your unconscious mind locates the part of the mind responsible for the electrical and chemical functions of the mind."
3. Set up the presupposition that there is a genetic record somewhere inside that contains a blueprint of neurology from birth up to the present time. "May I speak to the Head Electrician and the Head Chemist please." Wait for five seconds and then continue. "And I am going to ask the Head Electrician and the Head Chemist to first review the genetic Blue Print of the area of damage before the damage took place, and again at the present moment in time, then do a comparison of the before accident and after accident neurology looking for Differences." Ask your unconscious mind to signal you with a yes signal when this analysis is completed.
4. Give instructions to the Head Electrician and the Head Chemist to re-connect all the cell connections, which were pulled apart by the force of the accident or stroke. Ask the Head Janitor to activate the lymphatic system to clean out all of the dead cells, old blood and debris and then to sanitize the damaged area so that the new repairs will hold. Ask the Immune System manager to protect this area while the cells and neurological pathways gets repaired and re-established.
5. Set up a repair process driver or taskmaster. I use a cataleptic arm again for this purpose. I say "And I am going to ask.. you're unconscious.. mind.... to take charge of your hand and allow it to lower only

as quickly as the Head Electrician reconnects up all the cell connections which were pulled apart by the force of the accident and returns the neurological wiring to its former undamaged state. And we are going to give permission to the Head Electrician to use any subcontractors it deems necessary in order to do this repair work quickly, safely and correctly for the benefit of _____(person). You may begin the repairs now”.

6. Stop talking and start watching. Watch the hand specifically for minute movements (ideo-motor movements). As the movements begin and the hand begins its downward movement, pace the movement by saying “That’s right”. Whenever the arm or hand makes a significant move, say “That’s right”. The arm may take from 2 minutes to one hour or more to lower depending upon the characteristics of the individual mind. Be patient and stay with the process.
7. If the arm stops in its downward motion for more than one minute say “Does the unconscious mind, or any of its controller parts need additional resources?” “If YES, cause the hand to raise a little, if NO cause the hand to continue the process of repair. “If the hand raises, say “I would like the controllers of this repair process to contact the Creative Mind and have the creative mind create whatever special tools, materials, connectors or what ever is needed for the Head Electrician and the Head Chemist to continue and complete their work of repairing the damaged brain circuitry.”

TESTING THE NEW CIRCUITRY.

One useful way to test new circuitry is to run old memories through it. The old memories seem to help it re-establish neurological circuit familiarity and in so doing the relationships from before the accident or trauma. This can be done by asking the Head Electrician, Chemist and Memory Programmer to run positive memories from the past through the repaired circuitry to make sure that each of the circuits are working properly now. This also builds confidence in the mind that the circuits have indeed been repaired.

Let me here give a few examples from recent past. A young man went riding on his ranch one afternoon. When he did not return for dinner, a search was made. He was found lying in a pasture, unconscious. He was taken to a medical hospital trauma center where he remained unconscious for several weeks. Brain scans indicated that he had suffered extensive damage to the left side of the head. The doctors told the parents that he had considerable bruising and swelling in his brain and that he also had a lot of brain cell sheering. The parents asked if I would work with the young man. I went to the hospital and followed the basic steps I have outlined. I met with him three times while he was in coma. The first visit I asked the Head Janitor to go to the damaged area of the brain and begin cleaning up the area so that the repair crew could get in to work. I enumerated the number of things to clean up: dead cells, dead blood, damaged tissues, etc. (within 24 hours blood constituents started to show up in his urine).

On the second visit I ask the head electrician and the head chemist to begin the reconstruction. On the third visit the parents said that the physical therapists were all excited at the progress he was making as they worked with him but that they were concerned that he was not coming out of coma. The doctors had expressed their concern that he was still in deep coma and that they wanted the parents to talk to him constantly to give him a reason to come out. I sat beside him, matched his breathing pattern, and ask him if he could hear me, and if so to move his eyes. His eyes moved. I ask his unconscious mind if it could control any of his finger movements. (his hands were both clinched tightly as if holding on the reins of the horse.) If it could, would it cause one finger to raise as a yes signal. The index finger of his left hand moved. Non-movement was established as a NO. I asked if enough repair work could be completed in one day (12 hours) so that he could come out of coma and open his eyes. There was no response. Could it be done in 24 hours? No response. Could it be done in thirty-six hours? The index finger came up. Exactly thirty-six hours later his eyes came open and he came out of the coma. After several weeks of recuperation, they returned him to he hospital for a follow-up MRI, which showed that the damage to the area had almost disappeared. However, there was still damage in the Limbic system and in the brain stem.

On the third visit I asked the Head Electrician and the Head Chemist and the Structural Engineer to examine the limbic system and the brain stem and to correct the damage. From that time forward he began

to get movement in both sides of his body. He is currently is making significant progress while others with similar trauma are still there.

The second person was a middle age man, in his early fifties who came to ask if I would hypnotize him and give him suggestions on rapid healing. He was due in surgery in two days to have open-heart surgery. I used a wide awake guided imagery trance and ask the Heart Engineer to review the genetic map of the heart, do a comparative analysis on the heart and heart region and to repair the differences so that he could continue his life's work. When the doctors took their pictures for his surgery they noticed that his heart had changed since his earlier examination. They elected to wait and see what was happening. Over the next three weeks, his heart cleared out the blockages and he returned to normal (His heart became stronger than it had been in the past ten years.)

The story of the third person I will tell you about occurred just recently. This young man had been riding on a motorcycle and had been involved in an accident with an automobile. He was moved to a university hospital where he remained in a coma for seven days. It had been three months since his accident when I was asked to work with him. His speech was very slow and halting and when asked to tell me about his accident he could not utter a word. Everything was blocked. He had regained most of the movement in the right side of his body but his left side had very limited movement. He could move the fingers of his left hand only about an eighth of an inch and only with much effort and concentration. I raised his right arm and asked the Head Electrician to repair the damaged connections to the left side of his body. It took his right arm about 30 minutes to lower, and by the time it did lower all the movement had been restored to the left side of his body, arm, hand, fingers, and leg.

CONCLUSIONS

My personal presupposition is that the mind will do whatever we ask it to do if we make our requests logical, reasonable, and fit them within the other persons map of what ought to be possible.

For further information on this process you may write to Robert W. Fletcher, Thought Pattern Management, 1520 Country Hills Dr. Ogden Utah. 84403