OUR CURRENT HEALTHCARE paradigm is experiencing a transformation into a more sustainable and fluid system of care. As part of these changes, many practitioners are merging the science of western medicine with eastern arts of holistic care. This shift in thinking isn't limited to holistic medicine and its practitioners. Even the largest care organizations are pushing to achieve value-driven models by holding consumers accountable for their own health.¹

An important aspect of holistic care is the growing field of mind-body medicine, which empowers patients to learn and perform various self-care techniques. Mind-body medicine connects the brain, mind, body, and behavior to promote physical activity and health.² This article discusses one mind-body
technique in particular—guided imagery—and provides some simple interventions nurses can use and teach to empower their patients.

**Imagery that supports healing**

In an acute care setting, nurses can easily incorporate holistic patient care into daily practice. When I prepare I.V. therapy for patients, I ask them to envision the fluid nourishing the cells of their body. While administering medications, I teach patients to visualize the antibiotics attacking and destroying bacteria. When assessing respiratory status, I encourage patients to breathe healing oxygen into their lungs and breathe out toxins. These are all examples of guided imagery. Although they take less than a minute to teach and implement, they support healing and enhance the patient’s plan of care.³

Most of us envision many things throughout the day. When these images represent worrisome thoughts, the body perceives danger and reacts by initiating the stress response.⁴ Continuously activating the stress response leads to hormone dysregulation, leaving the body vulnerable to disease.³ With guided imagery, patients can learn how to stop detrimental images and instead focus on images that support their health and well-being.⁴

**How positive thinking pays off**

Simple, safe, and cost-effective guided imagery can be used in inpatient and outpatient settings to ease emotional and physical distress. Positive outcomes associated with guided imagery run the gamut from a reduction in stress, pain, and anxiety to better control of undesirable habits (such as smoking, overeating, or nail-biting).⁴ Additionally, unlike drug therapy and invasive treatments, guided imagery isn’t usually associated with any adverse reactions. However, care must be taken with patients who experience negative images that may induce physical states of fear and vigilance.³

Research has shown that in some cases, guided imagery can be more effective than pharmacologic interventions. For example, in one study researching the effects of guided imagery on tension-type headaches, guided imagery therapy was more effective than medication in reducing the frequency, intensity, and duration of headache.⁶ Evidence suggests that guided imagery can help patients cope with many other disorders such as cancer, migraines, irritable bowel syndrome, hypertension, anxiety, depression, fibromyalgia, immune system disorders, posttraumatic stress disorder, and asthma.³ The technique has been shown to positively affect vital signs, electroencephalography patterns, blood flow, gastric motility and secretions, sexual arousal, and levels of various hormones and neurotransmitters.³⁴

In a recent study, researchers gave subjects a guided imagery CD to listen to once a day before sleep for a total of 4 weeks before they began radioactive iodine therapy.

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**Guided imagery resources**

Books, audiocassettes, and CDs for self-teaching imagery techniques are widely available and affordable. Free scripts can be obtained through an Internet search and in some of the URLs below. Online resources you may want to reference include:

- Relaxation downloads. Dartmouth Student Wellness Center.  
  [www.dartmouth.edu/~healthed/relax/downloads.html](http://www.dartmouth.edu/~healthed/relax/downloads.html)


- Trip to the beach: Guided imagery script. McKinley Health Center: University of Illinois at Urbana-Champaign.  
  [www.mckinley.illinois.edu/units/health_ed/stress_audio/beach_txt.html](http://www.mckinley.illinois.edu/units/health_ed/stress_audio/beach_txt.html)

- Guided imagery: Use these scripts to help children cope with anxiety and stress. The Mindful Word.  

- Positive Environments, Network of Trainers (PENT): California Department of Education  
  [www.pent.ca.gov/trn/guidedimageryscript.pdf](http://www.pent.ca.gov/trn/guidedimageryscript.pdf)

- Guided imagery audio library. Comprehensive cancer center: University of Michigan Health System.  

- Guided imagery exercise. Counseling services: Kansas State University.  
  [www.k-state.edu/counseling/student/biofedbk/guideim.html](http://www.k-state.edu/counseling/student/biofedbk/guideim.html)

  [http://hprc-online.org/family-relationships/families/managing-emotions/focus-calming-grounding-activities-pdf](http://hprc-online.org/family-relationships/families/managing-emotions/focus-calming-grounding-activities-pdf)

- Guided imagery and visualization. University of Houston Clear Lake counseling services.  
  [http://prtl.uhcl.edu/portal/page/portal/COS/Self_Help_and_Handouts/Visualization](http://prtl.uhcl.edu/portal/page/portal/COS/Self_Help_and_Handouts/Visualization)
The group that used the CD showed a statistically significant decrease in stress, fatigue, and heart rate variability.7

Types of guided imagery
Many people believe guided imagery is a form of hypnosis. Although they have similar origins, they’re actually quite different. In hypnosis, the mind is cleared of images; in guided imagery, vivid images are created. Nurses can use and teach these basic types of guided imagery:4

• Feeling state imagery helps patients change their mood in a generalized way. This can be done by imaging a favorite place, such as a beach or cabin in the woods.

• In end-state imagery, patients imagine already being in the situation or circumstance that they wish for. Examples include seeing oneself as healthy and strong or happy and successful.

• Energetic imagery involves imaging life force energy free flowing through the body. For example, tell the patient to pull up energy from the earth through the soles of the feet.

• In cellular imagery, patients imagine healing at a cellular level. For example, the patient might envision immune system cells as part of an army that attacks malignant cells with tanks and missiles.

• Metaphoric imagery uses symbols to envision illness or healing instead of reality-based imaging, such as visually representing radiation as sunshine or a tumor as an enemy encampment.8

• To use physiological imagery, patients imagine events in the entire body. This imagery can be similar to cellular imagery, in which patients envision details of the body's anatomy and physiology. For example, patients with shoulder pain may imagine each muscle in their shoulder relaxing and softening. Patients with hypothyroidism can place their hands around their neck and imagine the thyroid releasing hormones throughout the body.

• Psychological imagery involves patients' perceptions of themselves. For example, patients who feel overly responsible may imagine the weight of the world being lifted from their shoulders. Imagining a dialogue with someone the patient is in conflict with may reveal possible solutions upon reflection.

• Spiritual imagery instructs patients to make contact with God or the Divine. Patients find guidance and inspiration by imagining their deity. It may also be comforting to imagine being held in the arms of God.

Conducting a session
To prepare a patient for guided imagery, begin with a comprehensive holistic assessment. The assessment will assist in determining the patient’s need for imagery, whether physical, emotional, mental, spiritual, and/or environmental. After obtaining consent, assess the patient’s understanding of guided imagery and his or her readiness to use it. Always ensure a safe and quiet atmosphere during assessment. Adhering to this basic process will help you identify and implement the most effective therapeutic plan for your patient.4

Before commencing, encourage patients to understand the meaning of their symptoms through the practice of relaxation and reflection. In a relaxed state, patients can access their personal creative energy to customize images, making them more powerful. These images are then used in the session by the nurse as well as during self-care when patients perform imagery on their own.4

Begin with an induction toward generalized relaxation. Advise the patient to close his or her eyes and focus on simple breathing techniques. Choose and adapt images to fit what feels right to the patient, using data from the assessment and the patient's own reflective practice. The images should be anatomically correct and based on the disease and body part or system affected. For example, instead of asking patients to envision sciatic pain, you can ask them to target the pain that begins in the lower back and radiates down the right leg.

Try to appeal to multiple senses. Observe body language and breathing for clues about what direction to take during the session. When patients begin to grimace, tense their muscles, or fidget, they may be uncomfortable. If the shoulders fall and breathing slows down, they may be in a relaxed state. The
use of induction makes imagery more effective as a healing tool. The following sample imagery script combines both physiologic and psychological imagery to guide a patient toward pain management. After initiating relaxation, advise the patient to:

Scan your body. (Pause) Gather any pains, aches, or other symptoms up into a ball. Begin to change its size. (Pause) Allow it to get bigger. (Pause) Just imagine how big you can make it. Now make it smaller. (Pause) See how small you can make it. (Pause) Is it possible to make it the size of a grain of sand? (Pause) Now allow it to move slowly out of your body, moving the pain further away each time you exhale.

This script can be used for both acute and chronic pain as well as for the discomfort from a procedure. Overall, the script should take 10 to 20 minutes to complete.

Be sure to provide encouragement and guidance throughout the session. After the session is complete, end the session with a return to the present. Instruct patients to bring their focus back into the room, then onto their body while slowly opening their eyes. Be sure to conduct an evaluation of the outcomes with your patients.

A case in point
Recently, I used guided imagery to help a hospitalized patient.

Ms. D, 43, was experiencing poor sleep quality due to acute shoulder pain. She didn’t want to rely on analgesics and sedative-hypnotics, fearing grogginess and fatigue.

After completing a holistic assessment, I collaborated with Ms. D on a plan of care. Noting several self-help books on her bedside table, I asked her if she’d like to try a guided imagery session to increase her comfort and promote restful sleep, and she agreed.

I initiated the imagery session with progressive muscle relaxation to relieve tachypnea related to anxiety. Once her respirations were more regular, I advanced to a guided imagery script similar to the one described previously.

After the session ended, she stated she felt more relaxed and reported a reduction in her pain intensity rating score from 6/0-10 to 3/0-10, a more comfortable level for her. A slight reduction in her BP, heart rate, and respiratory rate was also noted when compared with vital signs obtained before the session.

The next day, Ms. D said that she’d slept comfortably all night and asked me to repeat the imagery session. This time, she recorded it on her phone so she could use the technique at home. After her second session, Ms. D reported the same feelings of comfort and relaxation and I again documented reductions in BP, heart rate, and respiratory rate.

After discharge, Ms. D returned to the unit to thank the nurses for the care she’d received. She was enthusiastic about effectively addressing her problems, and continued to practice guided imagery at home.

Envisioning change
Guided imagery is a simple and effective therapeutic technique that nurses can easily teach to patients. Visualizing self-care is the first step toward the promotion of well-being. By sharing this knowledge, nurses place themselves at the forefront of the paradigm shift in healthcare.

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REFERENCE


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