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# THE Journal OF HYPNOTISM

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Featuring—Hypnotism For Impotence or Frigidity

*By Raphael H. Rhodes*



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## EDITORIAL

### BILL IS INTRODUCED TO BAN HYPNOSIS

Under the date line of April 23, 1953, the Associated Press carried a story from Harrisburgh, Penna., with the above headline. According to the story, two state representatives, George J. Glick (D. Phila.) and Wilbur H. Hamilton (R. Phila.), introduced a bill which would prevent the use of hypnosis for healing purposes. According to the news item, the bill would also prevent the use of hypnotism in demonstrations and for entertainment. Actually it would seem that the bill is designed to kill hypnosis in the entire state of Pennsylvania.

Glick was quoted as stating "Hypnosis has developed into an obnoxious hoax. It is inconceivable that 'trancing' has any curative or beneficial values."

Small-time politicians since time immemorial have misused hypnosis as a means of getting publicity for themselves. Glick and Hamilton are obviously in need of some publicity. Glick's somewhat less than brilliant statement can easily be discredited. Glick seems to have been getting his information on Hypnosis straight from the comic strip, Mandrake, the Magician.

At the present time experimenting with Hypnotism is bringing to light many beneficial and curative values according to clinicians. Physicians like Erickson, Wolberg and Gindes are making daily use of hypnotism in the treatment of their patients.

It is vitally important that we safeguard the rights of Hypnotism and keep it out of the hands of meddling politicians like Glick and Hamilton. It will be interesting to note how much damage these men will actually accomplish. We will keep our eye on this situation and carry a follow-up story in a later issue of the Journal, but regardless of the outcome of this ridiculous bill, we must constantly be on our guard against these political manuevers.

REXFORD L. NORTH, PH. D.

THE JOURNAL OF  
HYPNOTISM

Dr. Rexford L. North, Editor

Hypnotism is as yet a controversial subject. Therefore, this publication cannot accept responsibility for the views expressed by the contributors.

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BETWEEN OURSELVES

With this issue we end our second volume of publication. I'd like to thank all of you who have contributed to making the JOURNAL the success it is. I'm looking forward to many, many more volumes and will continue to work for improvements.

The cover this month features Dr. Herbert Charles hypnotizing a subject using a "Browlite." The "Browlite" makes for a very dramatic impact, especially in a darkened room. The 'Browlites' are available from the National Guild of Hypnotists, 48 Harlem Street, Dorchester, Mass. The price is \$2.75 and prompt delivery is guaranteed. Incidentally, this is the first time that anyone has appeared twice on the cover of the JOURNAL. However, Dr. Charles has created so much interest with his **INDIRECT INDUCTION TECHNIQUE** (known as the Charles Method) that we felt he had well earned a repeat appearance. (The subject in the photo is Jini Shea, beautiful Boston model and an exceptionally good subject.)

Canada seems to be extremely active in the arena of hypnosis. We now have hundreds of readers in Canada and have long felt that we needed a representative there. We have arranged for this with Mr. Maurice Kershaw of Montreal. Mr. Kershaw will author a column for each issue of the JOURNAL on Canadian activities (See **NORTH OF THE BORDER** in this issue) and will be our distributor for the JOURNAL as well as our books. Canadians are urged to write to him about their activities. Mr. Kershaw will also conduct classes for those who wish to perfect their technique.

Dr. Frank H. Caffin (author of the award winning "Schizophrenic Art Interpreted By Hypno-Analysis" in the March JOURNAL) was a recent visitor at the HYPNOTISM CENTER. Dr. Caffin is opening a sanitarium in Vermont soon and we will then have the pleasure of seeing him more often. While here we had the ValDuarado Photogra-

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## HYPNOTISM FOR IMPOTENCE OR FRIGIDITY

by RAPHAEL H. RHODES

■ Impotence or frigidity, when caused by psychological factors rather than by physical deficiency, may be treated successfully by the proper application of hypnotism. Impotence is different from frigidity. The former pertains to the male, whereas the latter connotes a condition generally associated with the female.

Impotence, as used in psychiatry, means the male individual's inability to perform sexual intercourse. This may occur in different degrees under a variety of conditions. It may manifest itself as the inability to erect at all, or as the failure to sustain erection for a sufficient length of time. Some men find difficulty with all women. Some find that the inability appears only in their relationships with a certain woman or women, but not at all with others.

Frigidity is the absence of sexual feelings, especially in the genital region. The term is generally used to mean an absence of the sexual aspect of love in women. It may include a variety of deficiencies in sensation, ranging down from lack of orgasm alone, to complete vaginal anesthesia.

Most cases of impotence are psychological in origin. Freud, in his *Collected Papers*, volume 4, says of impotence: "The disorder is in fact due to the in-

hibiting influence of certain complexes in the mind that are withdrawn from the knowledge of the person in question." He mentions as possible causes of impotence:

"...an incestuous fixation on mother and sister which has not been surmounted..." and "...accidental impressions of painful kind connected with infantile sexuality...." Other writers have suggested the castration complex, which gives rise to the adoption of a passive feminine role (sometimes depicted among schizophrenic individuals). As will be seen in some of the following case histories, impotence may result from a form of inferiority complex.

The causes of frigidity (the female counterpart of impotence) are also psychogenic in most cases. For instance, when the sexual partner reanimates the incestuous complex, the woman may become frigid. Similarly she may become frigid under a strong homosexual urge. Stekel reports the case of a woman who enjoyed dressing in her father's clothing and thus accoutered, going to her mother's bed at night; this patient had become frigid to her husband after the death of her father. Freud suggested that "penis-envy" is an important cause of frigidity; that this "wish to be a boy" aroused hostility to the male, leading to a desire for revenge on the man, culminating in a lack of emotional response to his courting. This coincides with another theory, that frigidity is occasioned by the unconscious impulse to take revenge on the male. Drs. L. Hinsie and J. Shatsky, in their *Psychiatric Dictionary*, state that prostitutes hate men, and that psychoanalysts generally believe that a woman must be frigid to become a prostitute. Dr. W. S. Kroger in his *Treatment of Psychogynecic Disorders by Hypnoanalysis* (reprinted in *Therapy Through Hypnosis*, published by Citadel Press) mentions other causes of frigidity. These

RAPHAEL H. RHODES, B. A. LL. B., Columbia College and University, is a consulting psychologist in New York City. He is the author of *HYPNOSIS; THEORY, PRACTICE & APPLICATION*, and the editor of *THERAPY THROUGH HYPNOSIS*. His work in hypnoanalysis has included collaboration with leading physicians and psychiatrists, including the late Dr. Foster Kennedy, Professor of Neurology at Cornell and Director of the Neurological Service at Bellevue.

include fear of punishment for violating sexual prohibitions, or conflicting loves (such as love of father as opposed to love of husband, or love of self as contrasted to love of husband, or love of women as opposed to love of men), or the desire to escape (for example, an attempt to flee from one's own inadequacies).

The above listed causes of impotence or frigidity are by no means complete, but enough has been said to illustrate the fact that psychological factors are a prime consideration in etiology of these difficulties. These psychological factors are generally subconscious. As I have previously explained, hypnotism helps to bring the subconscious factors of thought to the threshold of consciousness. Through the use of various hypnotic tools, it is possible to transform what was subconscious into conscious, and therefore evaluable thought. Moreover, in the case of impotence particularly, and often in the case of frigidity also, the powerful effect of posthypnotic suggestions made to the patient in trance may help produce improvement quickly and effectively. The use of posthypnotic suggestions sometimes enables the therapist to avoid lengthy analysis, and to concentrate on symptom removal. Where, for example, the difficulty is perpetuated by fear of failure, the use of posthypnotic suggestion will bring sufficient relief to dissipate the wonted fear, and this will lead to the establishment of the self-confidence which is a prelude to automatic success in the sexual sphere.

#### Cases of Impotence

Three of the prime causes of impotence are: (1) inferiority complex, (2) poor habit pattern, and (3) fear of failure. Many cases of male inadequacy are caused by one of these factors and often by a combination of them.

Dr. L. Wolberg in his chapter entitled **Hypnosis In Psychobiologic Therapy** (reprinted in **THERAPY THROUGH HYPNOSIS**) presents the case history of a man who suffered from premature ejaculation. Hypnotic reconditioning was used, together with other hypnotic techniques and hypnoanalysis, and these re-

sulted in a cure of the condition complained of. The patient when first seen was unable to sustain erection with the result that all attempts at intercourse were unsatisfactory. After eight sessions of hypnoanalysis, he was able to perform for between three and ten minutes. During the last session Dr. Wolberg asked: "How long do you go in intercourse," and he answered: "Well, last time I went very long. About a week ago, for the first time in intercourse, I found that the time element was extended to a considerable degree..."

In that case the patient was thirty-six years old and married about six years. When he had first come for treatment, he had said he thought that his condition was hopeless. His wife was sexually responsive, but relations were unsatisfactory because, as the patient said: "...the minute I insert, I mean, it happens. I mean the ejaculation comes ... It comes immediately when I try to insert it."

The patient's responses to the Rorschach test revealed that he was severely neurotic, had psychological problems with regard to his relationship with people, and that he associated intercourse with a bloody act.

Hypnosis was induced at the second session. The hand levitation method was used. Arm rigidity was obtained, and then the patient was told that, upon counting from one to five, he would be able to move his arm again. This he did. The purposes of that technique were to give a sense of self-control by showing him that he could direct his own muscular functions, and to build up his self-confidence through this control.

In subsequent sessions hypnotic dream induction was used. Also, authoritarian suggestions were made to overcome his misconceptions about the effects of masturbation. (The patient erroneously thought that childhood masturbation had weakened his sexual organs.) Although progress had been made, the patient still expressed discouragement during the fourth session. During that session hypnosis was again used to condition him to greater control over his physical functions, relating this control

specifically to the sexual function. The patient had disclosed a passive attitude with regard to women. Hypnotic suggestions were made to overcome this attitude and to instill in him a spirit of a more aggressive, forceful approach.

During these hypnoanalytic sessions it became clear that this patient had a fear of trying to perform the sex act. His repeated failures had resulted in the building up of a strong anxiety pattern. He feared the nightly encounter with his wife as a challenge that he could not meet. To overcome this, suggestions were made to him in the hypnotic state that he should go to bed with his wife not with the idea of performing, not with the fear of failing, not with any special desire or anticipation of succeeding, but merely with an attitude of not caring. He was told not to worry nor even to think about whether he performs or not. This attitude ingrained, through posthypnotic suggestion, helped remove the anxiety which in itself had become a serious stumbling block.

The suggestions for indifference were coupled with the thought that sex had only pleasure value (no challenge aspect), and at the same time it was also suggested that the patient would experience a feeling of strength and self-confidence growing stronger and stronger within him.

These posthypnotic suggestions became an integral part of the patient's thought pattern and changed his anxious, fearful, diffident attitude to one of confident pleasure-seeking with self-assured aggressiveness. His performance improved, and after eight sessions he was independent enough to terminate the therapy.

In my own practice, I have found that many cases of impotence are caused by poor habit pattern, perpetuated by fear of failure. A typical case history is that of Mr. K., a successful engineer, 49 years of age. He was a bachelor with normal sexual desires, but his experiences were unsatisfactory due to premature ejaculation. At the first session I asked him to relate his sexual history. It was substantially as follows:

"As a young man I petted and kissed.

There were some girls I petted with, and rubbed against until I'd have an orgasm. (Did you undress?) No, with our clothes on. (When did you first have intercourse?) When I was about 24 years old. I don't remember the incident very clearly, but I know it was very unsatisfactory because I came and lost the erection just as I tried to penetrate. (And after that?) That happens all the time. Always the same thing. (Do you erect easily?) Yes, most of the time, but the minute I try to enter, it's all over. (What are your sensations when you attempt intercourse?) I'm afraid to insert, because when I try to, I can't. (What are your penial sensations?) At first pleasant, but when I try to insert and come instead, there's practically none. I realize that it is the fear which makes the trouble, but I can't do anything to prevent it. (Do you masturbate?) Yes, sometimes, to get relief. (What are your fantasies when you masturbate?) Nothing in particular; just to get relief. (Did you masturbate as a young man?) No. It was easier to get girls then, and I'd kiss and pet them until I ejaculated."

Further discussion developed the pattern in clearer perspective. His early experience (petting and rubbing, fully clothed, until ejaculation resulted) was fundamentally an unpleasant procedure. It became more and more associated with an effort merely to obtain quick relief, instead of mutual pleasure. The unpleasant aspects of that method were tolerated for the sake of the ultimate relief, but every experience was dominated by the sole desire that relief be obtained as quickly as possible. Since the relief came only with ejaculation, rapid ejaculation was the desired goal. In this way rapid (premature) ejaculation became the accustomed habit of sexual activity. Then his early attempts at normal intercourse followed the habit pattern he had previously established (rapid ejaculation), but being then unaware of what caused this reaction, he merely became fearful that he was unable to perform properly. This fear created a condition of anxiety which in itself prevented concentration on the pleasurable aspects of intercourse and



rather turned the love-making episodes into battlegrounds of challenge overshadowed with the threat of repeated defeats.

First I explained these things to the patient awake, and we discussed them together. Then I hypnotized him and tried some simple tests for depth of trance (eye closure, arm rigidity, inability to rise from chair). When he was in medium trance (which is sufficient for the purpose), I made the following posthypnotic suggestions:

"You will realize more and more that intercourse is not a challenge. It is merely a means of mutual pleasure between you and the woman involved. More and more you will look upon intercourse with only one thought in mind, namely that it will be a mutually pleasurable experience. You will think only of the pleasure it will give you, and the pleasurable associations and sensations connected with it. You will concentrate only upon the anticipation of pleasure, and during intercourse you will be concerned only with the pleasurable sensations of the contact.

"You know that the fear you used to have was based upon a normal failure due to over-excitement at an early stage in life. That situation does not exist any longer. There is no reason for a feeling of challenge now. There is no need to fear possible failure now.

"You know that premature ejaculation started before you had intercourse, at a time when you wanted to come quickly, and at that stage of your life you got into the habit of coming quickly because at that time you wanted that result. Now that you want the other result, you can get it by just changing your habit of thought. Don't think about what impression you'll make. Don't think about what your partner will think. Just think of the pleasure of the contact. Just concentrate on your sensations. You'll find that as you concentrate only on the pleasure of the contact, and nothing else, you'll get more and more self-confident, and things will continue to get better and better as you want them to."

Analytical discussion at subsequent

sessions revealed that this patient also had a sense of inferiority, despite distinction of person, education, and economic status. (It is interesting to note how often cultured, intelligent people force their demeanor to conceal underlying anxiety and inferiority attitudes.) Salter's conditioned reflex therapy was explained, and at subsequent sessions I added the following posthypnotic suggestions:

"You are going to start a new pattern in life. You'll talk out and do straight out whatever you want to say or do, right away, without first thinking of the other fellow. This new pattern will result in increased self-esteem and satisfaction with yourself. It will lead to more effective performance in all spheres of action."

This man was seen a total of seven times. During these sessions he reported gradually heightened self-confidence and improved sexual performance. He learned to accept temporary set-backs with equanimity, so that instead of their starting a vicious cycle of failure, the occasional poor episodes became unimportant and did not interfere with his overall sense of progress. During the latter sessions I taught him the elements of autohypnosis, and so made him independent of me.

Mr. T., a civil service employee, 33 years old, and married, also complained of premature ejaculation. He had been treated by prostatic massage but that only gave temporary help; when the massage was stopped, the condition quickly recurred. He had then sought help from a psychoanalyst, who found him passive, anxious to avoid interpersonal conflicts, and charged with repressed aggression. Analytic therapy resulted in considerable improvement, but when the therapy was terminated, the patient regressed again. He was then recommended to me for hypnotherapy.

His sexual history included a first attempt at intercourse with a prostitute. He recalled that she exuded an unpleasant odor, and he said, "I kept smelling this odor for a week after-

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Winner of the Dr. Rexford L. North Award

## EMPHASIS ON SHOWMANSHIP

by J. MURRAY BROWN

■ You have studied Hypnotism from every angle, gone into mental aspects, learned what the objective mind is capable of producing in both inductive and deductive reasoning. You are sure of yourself in every respect from the angle of being presented in producing Hypnosis.

Any performance falls completely flat without showmanship. Many wonderful singers with beautiful voices have never been successful because they could not sell their talents to the public.

In producing your show you are not unlike a salesman. The only difference being that the salesman can talk directly to the potential customer and be guided by the answers. In producing your show you must do all the talking and be guided by expressions, attention or just feel the atmosphere. Be prepared for every eventuality. In reporting to the theatre or club where you are to make your presentation, be sure that you have a well defined cue sheet for the orchestra and a copy for the Master of Ceremonies. Do not be backward in this respect since your act is a major. You are going to take one-half hour to forty-five minutes, depending on the routine that you feature and the interest maintained in your show. This cue sheet should have your entrance music carefully marked for the band to break with fanfare, or the orchestra leader should know precisely where you want the fanfare by a signal from you.

As a Hypnotist, a definite will, precise expressions and movements, should be standard equipment. Dress and look the part. If formal attire is not available, the second choice should be a tuxedo, neatly pressed and in neat fitting condition, being careful of smaller items about your person that will not distract,

such as your tie being off at an angle or unkempt hair. Personal cleanliness cannot be over-emphasized. Clean fingernails and a good shoe shine.

Confidence must be built and there is no one else to help you. You are alone in a field of mystery, and definitely expected to know what you are doing and what you want. . .

In this branch of Hypnotism, entertainment is foremost. You are not curing neurotics or assisting in dentistry. Recommend highly that such things be brought to light in your opening talk. If you have an assistant, it is wise to have someone neat appearing and preferably an attractive young lady dressed as formally as you are, and above all someone who shows no signs of stage fright or nervousness of any kind. Make sure your assistant is definitely familiar with your routine, train her as a surgical nurse is trained, handing you the proper implements of your trade at the precise moment. If possible, avoid asking for different items, but these props should be handed to you as your act progresses. It is also desirable to have as your assistant one who has been proven a very good subject, in case you should want to end your act in a dramatic climax, as will be explained. Under no circumstances ever use someone who tries to fake Hypnosis.

The Master of Ceremonies has given you a proper introduction with which you have already provided him. The orchestra has hit your entrance music, and you are on—walk briskly, recognize the orchestra and the M.C. This is done smartly without any waste of time. Turn to the audience and start the introduction to your act. It is desirable to use a clever, short, easily seen trick,

or if it is a short one, suggest working in two or three being very positive about what you are doing and absolutely make no errors. Practice it until you have it letter perfect. Also make sure the tricks are such that they can be seen from the back row. Now the attention of the audience is focused entirely on you and they are expecting to see something with which they are not familiar and is a complete mystery to many people. As old as Hypnotism is a percentage of this audience still has the belief that Hypnotism is pure trickery and belongs in the fakir class.

At this point without hesitation or a break in the show, win the confidence of your audience more completely by doing some concentration. Have a blackboard drawn up in advance, perhaps three feet high by five feet long divided into sixteen sections. Have your assistant or call someone from the audience take a piece of chalk and ask the audience to take items that come to their minds first and give you the number under which these items are to be written. For example; someone shouts "Table, number eight," then you repeat to the person with the chalk and blackboard "Put 'table' in block number eight." As quickly as the sixteen blocks are filled, start with number one, name the item and follow them through in numerical rotation through sixteen. The moment you have completed the sixteenth word, the band will give you a fan-fare, and you will find your audience applauding.

This act of concentration is not difficult if studied and practiced. Select five key words such as; number one, street; number two, box; number three telephone; number four, bed; number five, wastebasket. After you have listed five key words and memorized what they are, think of them as the item rather than the number, go over them repeatedly until you are definitely sure of the item and the number that it represents. Hence, when someone calls out from your audience "Tablecloth number five," at that moment you are thinking of a wastebasket over-flowing with tablecloths, red tablecloths, green table-

cloths, you can imagine a person swinging a tablecloth around his head with a wastebasket tied on it, or any ridiculous, impressionable, imaginary scene. Then when you call back the items that audience has shouted to you, you have their items at your fingertips and will find it rather easy to start at one and numerically go to sixteen without hesitation.

Upon completion of this demonstration of concentration, you have your audience conditioned. You have their confidence and they feel that your mind is trained to produce Hypnosis. At this point we have utilized approximately ten minutes of our time being careful that it does not drag in any particular spot. A dragging show, or slow moving one, will kill the confidence that you are working for, however, speak slowly enough that you can be carefully understood, and yet fast enough to attain your goal of a good moving act.

Success has been yours on your entrance, your magic as an attention getter and your mental act to build confidence. You have your audience built up and the most important feature now is keeping them on this same key. Give a little fast interesting history of Hypnotism. Tell how Messmer was given forty-eight hours to leave Vienna. You could mention that the government offered him a free hospital and \$4000.00 a year annuity, if he would divulge his secrets to a committee of three men. The second, go to Dr. Baird, the famed English surgeon, who named Hypnotism, after the Greek word Hypnos meaning sleep. Tell of the benefits of Hypnotism, the relations and wonderful experiences, do not promise to break habits. However, you can insert that smoking, nail-biting, etc., can be broken through Hypnosis. A great many people especially at a club date where you may mingle with the guests after the performance, will expect to question you at that time.

Explain at this point that any one who wants to know or experience Hypnotism, that this is their only chance, that no explanations will be given after you leave the stage.

You are undoubtedly the final act

and your audience has been sitting quite a while. Ask them to stand, place their hands in the air over their heads with their fingers interlaced and the palms up. When you are sure that this has been done you have gotten all the cooperation you expect, go right in to the routine of primary Hypnosis. Do not waste any time talking to a few people who will not go along with you to convince them that they should put their hands in this position, appeal to their sense of sportsmanship and cooperation in asking them to do this, and you will receive ninety-five percent participation. When everyone is set, ask them to look straight ahead or close their eyes, hesitate for two seconds, then say firmly, "Your hands are growing tighter and tighter together," hesitate another two seconds, keep looking around the audience and look as many people in the eye as you can, turn your head slowly and repeat your first expression, and pause slightly again. Concentrate within yourself with all your might that everyone in that room will find their hands locked. Then say, "Breathe evenly and deeply," repeating it several times, and you will notice at this point that you are getting almost one hundred percent cooperation. Tell your audience that in a few moments their hands will be so tight together that they can not pull them apart. Repeat this carefully, slowly and in a modulated voice yet one that carries. Now you will say, "As I count to three, one—two—," look around, hesitating between each number and try to spot, and have your assistant trained, at this moment to select those who are in definite trouble and can not release their hands, then say "Three, you cannot release your hands as they are glued together as one hand." All the time you are holding your hands in this same position and will hold them there until everyone has completed the experiment.

By this time you have selected your subjects. You will find perhaps that several people will still be unable to release their hands and ask them to come forward at once. Show no signs of friv-

olity, and seriousness is your prime prerequisite. When these subjects come forward, you will bring them up on the stage before releasing their hands by simply unlocking them gently but firmly, and you will ask them to sit down on the chairs already provided on the stage. Now you will walk to the front of the stage and ask for additional volunteers, if necessary, repeating what good Hypnotism does and that under no condition will you embarrass, or reveal any secrets of any individuals, reminding them it is good clean entertainment and that they will feel wonderfully refreshed.

After your dozen or so chairs are filled, have them pick an imaginary spot on the ceiling, look at it, level their head and close their eyes. Now ask them to look at this spot with their heads in a level position, and concentrate on that imaginary spot with their eyes closed. Tell them to inhale and exhale evenly and deeply. Ask them to relax their shoulders, imagine all the weight of their body pressing their feet against the floor. They are to think of nothing but gently, relaxing sleep, a wonderful refreshing sleep, and as you count to ten, they will be asleep. Start counting making definite suggestions after each number but do not suggest deep sleep until you have emphasized relaxation first, then gently sleep, then normal Hypnotic sleep, then last comes deep sleep, suggesting as the numerals get higher a deep concentrated state of mind. After you say "Ten" this will be followed by "Now you are sound asleep—you can hear nothing but my voice and will awaken only when I tell you to awaken." If necessary while you are counting, you can add that as you touch their forehead, it will force them into a deep hypnotic trance, and then gently walk down the line and touch each individual lightly on the forehead. However, be sure to keep your numbers spaced evenly apart as much as possible, and under no condition ever skip a number.

After you have said "Ten," you can

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# HYPNOTISM AND LATENT TALENT

by DR. HERBERT CHARLES

■ Various factors are responsible for the onslaught of neurosis and the symptoms concomitant with that condition may differ with various sufferers. While these symptoms are generally considered to be those in which overt signs of mental or physical disturbances are exhibited, it is less well known that a condition of arrested development of the intelligence or talents may ensue. Since hypnosis may be the means of curing the neuroses it may also be used to stimulate inhibited mental development.

It is a well known fact that the creative activities are the resultant of unconscious motivations. The more able the creative workers is the 'escape' from the influence of his conscious mind the more closely his work follows his unconscious processes. Since such workers try to tap their unconscious minds by hit or miss methods, to put themselves in the 'mood,' as it were, without actual knowledge of how they achieve that acortical state, it can be seen how much they would gain if they employed a scientific means — hypnosis. Actually, a painter for instance, has a mind picture of what he wants to put on canvas regardless of whether or not he employs a model. The clearer the mental picture the better the production clarity. Since hypnosis is a direct pipe line to the unconscious it 'brings out' clearly otherwise jumbled impressions.

What has been said above for the painter is equally applicable in other creative fields. The play director reads the script and forms a mental picture of how he desires the script interpreted. The choreographer not only creates the dance step but in the creation thereof mentally reproduces the entire scene. The writer puts himself mentally in the actual characterization and situation of his 'people.' The point is obvious that all these mental images are in part unconscious and hypnosis could play a

part in better expression of unconscious feelings.

The actor was deliberately left out of the above generalization since with him there is such a close analogy to the hypnotic phenomena. It is well known that in order for an actor to portray a character and situation he must literally be that character. Those who can do this best are the truly greats of the stage. The mediocre ones are only 'playing' a part and their work shows it—merely play acting. In hypnosis we often make use of hallucinations, delusions and illusions and what are these but the exact things the actor is trying to do without the benefit of the scientific hypnotic processes. True, the good actor does achieve a resemblance to these phenomena but by a hit or miss method the exact means of attaining he is unaware and therefore cannot always secure. This is the reason for good and bad performances. He would be much better off, of course, if under hypnosis he was 'told' that he was actually the character he was attempting to portray. The writer has worked in this field with a group of actresses and the results were amazingly good.

To continue on the subject of the public performer, many of them exhibit at times a condition known as stage fright. Even the most experienced have confessed to having this state at times. A hypnotist backstage could eliminate this condition by instilling relaxation and restoring confidence. It is little known that many of the most popular performers actually have resorted to hypnosis!

It must not be thought that only in the field of creative activity hypnosis is efficacious or that only on the stage that the condition known as stage fright occurs. The little testimonial dinner to a departing fellow worker may be the cause of great trepidation to the guest who knows he will be called upon for

a 'few words.' Actually a well known course in public speaking caters mostly to people who desire nothing more than to be able to express themselves in small gatherings or business meetings. Such people spend tremendous amounts of money and time for this course but hypnosis can achieve better results more quickly—and more cheaply.

In the field of sports there is no question but that hypnosis is an invaluable adjunct. In the experiment which the writer undertook with the former world's boxing champion BARNEY ROSS, and which was fully reported in another article *Journal of Hypnotism* Jan. 1952 (still available) the extraordinary change which took place in a boxer after a single hypnotic session has been repeated in other sports.

In the area of selling hypnosis can play a very important part. Of course, regardless of what business he is in, everyone is selling himself. Here we are concerned with salesmen who are selling products. Everyone knows the ring of sincerity of a truthful statement. Unfortunately too many salesmen are not convinced of the merits of their products and there is no question that the prospective buyer can sense

this. A salesmanager would get a great deal more from his salesforce if he used hypnosis to convince them of the worth of their product. There is still another facet of hypnosis which the salesman could use and this is in connection with his prospect. It is not suggested here that he use actual hypnosis on the prospect, even if this were possible or did not involve ethical considerations, but a knowledge of the hypnotic induction procedure would certainly be of immense value to the salesman.

Finally, hypnosis can be used to bring out talents which the individual may not even know he has. We do know that the more intelligent a person is the more hypnotizable he is or to put it another way the intelligent person is a better hypnotic subject. With this in mind we can assume that the person who appears to have little intelligence and yet is a good hypnotic subject has potentialities for developing and bringing forth that subconscious intelligence under hypnotic guidance. The author expects to see the day in the near future when backward children will be treated by hypnosis as the method of first choice. It is realized how revolu-

*(Continued on page 27)*

#### OUR COVER PERSONALITY



Dr. Herbert Charles is a prolific writer in the field of hypnosis. Besides being the author of many books and articles he is a regular contributor to the *Journal of Hypnotism*. As a lecturer of many years experience he stresses the scientific and beneficial aspects of hypnotism. In his experimental work his main concerns have been methodology and more formalized therapeutic procedures. He has synthesised the indirect method of hypnosis into a patterned technique now known as the Charles Method and which is available in recorded and printed form.

To Whom It May Concern:

I, Jack Lanning, of 333 First Street,  
Brighton, Michigan, was suffering from a severe skin  
disease for at least ten (10) years.

Medical doctors and skin specialists, also all  
medicine, did nothing to alleviate the itching rash that  
doctors diagnosed as Psoriasis. When I was unable to go to  
work at the Wesson Multi-Cut Company, Brighton, Michigan,  
something had to be done. But what. I was home - I had  
three children and a wife to support, and my skin was a  
mass of sores from the top of my head to my toes. My  
trousers and shoes were soaking wet from the discharged pus  
from these sores; my nerves were jagged - I could not sleep  
at night or even during the day due to constant scratching.

The Union representative of the M.E.S.A (they  
have the contract at the Wesson Company), whose name is  
Orville O. Flake and his residence is 13807 Thornton Avenue,  
Detroit 27, Michigan, heard about this sickness of mine and  
suggested I let him place me under Hypnosis. I agreed and  
was put under hypnosis and within ten days, all the sores  
left my body and even the hard calluses on my hands  
disappeared.

Now my skin is as smooth as a baby's skin.  
Also I can sleep at night because there is no thought of  
the sores.

My work has improved considerably and my entire  
family is very grateful to Mr. Flake and Hypnosis.

Sincerely yours,

Jack Lanning  
Mrs. Jack Lanning

Witness:

Raymond Miller

Gene Singer

Jan. 13, 53

Mich.  
Jan 13, 1954

#### DR. CHARLES COMMENTS ON ABOVE

The accompanying case is only an example of the many skin diseases which have responded to hypnotic treatment. This dramatically points out that there is no purely organic illness of any kind, that man is a psychobiological entity and that therefore the most effective therapy is that which treats the man as a whole. Best suggestions are those which simply order the symptoms away and in skin disease hypnotherapy a feeling of warmth around the affected areas is the suggestion most commonly used.

## HYPNOTIC COMMENT

### WHO CAN BE HYPNOTIZED?

by Ormond McGill

■ In our last session together we asked the question, "Can you be hypnotized?" and pointed out that persons of weak will, or those who are insane are either decidedly difficult to influence or cannot be at all. So, if you're in neither of these classes there's a chance that you can be. However, the question still remains of just who among the strong-minded can definitely feel the effects of hypnosis?

It has been said that everyone can be hypnotized to a certain degree; but this is true only if we realize that the degree of hypnosis possible to some persons is hardly deeper than a mild sleepiness.

When we think of hypnosis, we usually envisage an entranced person, looking with blank staring eyes into space, or walking somewhat stiffly in response to orders from the hypnotist. Now such a state of hypnosis is possible, a state so deep, indeed, that the subject recollects absolutely nothing upon awakening. But such a complete condition of artificial sleep is possible only to about one out of five people. The remaining four may have partial recollections upon awakening, or they may never feel at all as if they had been asleep.

The greater majority of persons undertaking hypnosis will experience what is known as "waking suggestion." This term is given because the person feels the effects of suggestion—mild hypnosis—but does not seem to be completely asleep. By mere waking suggestion quite remarkable things are possible, but of course nothing so spectacular or profound as is possible with somnambulism—the deepest sleep of all.

It is interesting to note that most people experience a distinct increase in the effects of hypnotic suggestion as

they repeat their attempts to be hypnotized. This is partly because feeling the effects of hypnotic suggestion requires certain mental attitudes of concentration and cooperation with the operator, and partly because the response to suggestion is one which tends to help itself. Thus people not only learn better how to attain the necessary mental state, but also benefit by the effects of suggestions given them to the effect that later trials will be more successful.

We can, therefore, say that **NEARLY ANYONE OF GOOD MENTAL ABILITY AND POWERS OF CONCENTRATING HIS ATTENTION CAN BE HYPNOTIZED TO A DEGREE, ALTHOUGH THE DEPTH OF HIS HYPNOSIS WILL DEPEND UPON A NUMBER OF FACTORS SUCH AS HIS MOOD, HIS PREVIOUS ATTITUDES AND HABITS OF MIND, AND HIS NATURAL SUGGESTIBILITY.**

Well, so much for "Who Can Be Hypnotized?" Let us next consider: **THE POWERS OF HYPNOTISM.** See you next issue.

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*by Ormond McGill*

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## IMPOTENCE OR FRIGIDITY

(Continued from page 9)

wards." His background included a broken home and a deep sense of insecurity. He was shy, sensitive, diffident, and considerate. He "...never wanted to hurt anyone."

The first attempt at hypnosis resulted in light trance only, but in subsequent sessions the depth of trance gradually increased. Some people appear to resist hypnosis at the first session, but if even light trance is obtained, it may be sufficient to start therapeutic suggestions. In such cases I always include: "When ever I suggest sleep, you will go to sleep quickly and deeply, very quickly and very deeply, more quickly and more deeply each time." This is conducive to progressively better results at subsequent visits.

With this man, because his premature ejaculation appeared to result from his inferiority and anxiety patterns, I relied upon an approach which emphasized improvement of self-confidence. Post-hypnotic suggestions along the lines of conditioned reflex therapy were made, coupled with: "This new pattern will make you feel more manly and independent, and this will assert itself in all spheres of action."

During the sixth and last session he reported that intercourse now lasted between five and ten minutes, that he felt much better generally, less self-conscious; that where he used to feel other people would get angry if he said what he wanted to them, now that feeling was all gone and he said and did what he wished all the time; that he used to feel he did not want to bother anyone or say anything to displease another, but that now he said and did what he wanted to and enjoyed it. "What about the attitude other people have to you?" He answered, "It seems to me that now everyone respects me more." How about his experiences with superiors? "It's easier to talk to them than it used to be; I'm not afraid of being reprimanded."

Finally I asked him, "What's your problem now?" He answered, "I don't

have any." At a telephone check-up six months later he stated that everything was all right. Apparently his therapeutic gains, including the ability to sustain erection, were maintained, and had become self-perpetuating.

The use of hypnosis in these cases has several advantages. It enables the psychologist to supplement the analytical discussion with posthypnotic suggestions which go deep into the patient's mind and become a part of his personality. When these suggestions pertain to new attitudes like extraversions instead of introversion, pleasure-seeking instead of fear of failure, or acceptance of the conditioned reflex therapy pattern, they help dissipate the complexes, habits, and anxieties which underly the impotence syndrome. Thus, not only is the impotence cured, but the patient is simultaneously taught to live a happier life through a free, more outgoing approach toward his interpersonal relationships.

Many cases are helped through learning autohypnosis. The method I use in teaching autohypnosis is the one described in detail in the chapter on **Self-Taught Autohypnosis in THERAPY THROUGH HYPNOSIS** (edited by me and published by Citadel Press, New York). It is a simple technique adapted even to persons who are difficult heterohypnotic subjects.

## Cases of Frigidity

One of the best discussions of hypnosis for frigidity is found in Dr. W. S. Kroger's **The Treatment of Psychogenic Disorders by Hypnoanalysis** (reprinted as **Hypnosis in Gynecologic Disorders in THERAPY THROUGH HYPNOSIS**). Dr. Kroger, who is Assistant Clinical Professor of Obstetrics and Gynecology at the Chicago Medical School, differentiates true frigidity from pseudo-frigidity caused by ignorance, misconceptions about sexual matters, poor technique, or male impotence. He defines true frigidity as "The incapacity of women to have a vaginal orgasm." Quoting E. Bergler, he points out "that a typical frigid woman does not suffer

from a deficiency of libido but from a neurosis," and that therefore hypnoanalysis is the preferred therapy for this complaint...because every neurosis is an illness of the unconscious." The frigidity is a psychological masquerade, concealing suppressed desires or unconscious strivings. In most cases the condition is accompanied by complaints of pelvic pain, backache, headaches, dysmenorrhea, and similar difficulties which are in fact merely psychological manifestations of the unconscious wish for lack of sexual gratification.

Frigidity is generally found in homosexuals aggressive spinsters, feminists, viragoes, narcissists and expousers of virginity. In many such cases their frigidity is psychological (the physical sex factors being potentially normal). Other cases of psychological frigidity are found among the "gold digger" type (exploiting the sexual partner), the prostitute, and the nymphomaniac. When these people marry, the pattern of combat and flight is carried into the marriage relationship, and the union is characterized by failure of the female to assume the responsibilities of wife and mother. These persons find outlets in excessive card playing, club attendance, pursuit of sports, travelling alone, buying expensive clothes and pursuing a career.

Some frigid women mask their psychological abnormalities by excessive devotion to household duties. When this is carried to the extreme (obsessional cleanliness, orderliness, over-devotion to children) while the husband is continually relegated to the background, the condition is often psychologically based, with resultant frigidity.

Where frigidity is due to unconscious psychological causes it is, like most neuroses, amenable to hypnotherapy; and since hypnosis fosters a rapid understanding a re-evaluation of subconscious factors, this type of treatment generally results in cures in a considerably shorter time than would be possible with analysis alone. Dr. Kroger's article, above referred to, mentions the treatment of twelve cases, nine of which were permanently relieved by this method. Although one of the cases took sixty hours

of treatment, the others took considerably less time, and one was cured in eight sessions.

### Conclusion

Impotence and frigidity, though different from each other in cause and effect, are alike in two respects: (1) they both interfere with sexual enjoyment and (2) they are both psychologically based in many cases. When the psychological cause of either difficulty is attacked by hypnoanalysis or by posthypnotic suggestion, or by a combination of them, the patient is enabled to gain rapid insight into, and control of, the subconscious factors underlying the difficulty, and thus to develop new personality patterns which effect permanent improvement in social adjustment and interpersonal relationships in general, as well as in physical reactions resulting in sexual satisfaction.

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for THE JOURNAL OF HYPNOTISM

## WANTED!!

Authentic articles, true experiences, photos, etc. about hypnotism. We are planning to enlarge THE JOURNAL and need more material.

The Editor

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## HYPNOTISM IN THE NEWS

The May, 1953 issue of COSMOPOLITAN MAGAZINE has a very fine article entitled MEDICAL HYPNOSIS by Ann Cutler. We urge you to get a copy of this for your files. This is a far cry from the recent article in THIS WEEK. The COSMOPOLITAN article tells of the work of several physicians and dentists. It cites a number of case histories and presents a wonderful case FOR hypnotism. Practitioners should be sure to have a copy in their waiting room.

Wire services recently carried the story of two state representatives in Penna. who introduced a bill to ban the use of all hypnotism. See our editorial in this issue. . .

The June issue of EBONY MAGAZINE carries a very elaborate picture spread on John Garrett, believed to be the only Negro stage hypnotist. Garrett was photographed during a recent appearance at the huge Granada Theatre in Detroit and his performance was so successful that he was held over. Readers will find it interesting and we

suggest that you get a copy.

Memphis (Tenn.) Press-Scimitar recently carried a story on a hypnotism demonstration before the Decatur Dental Society. The story reported that Dr. J. Paul Phillips of the University of Tenn. extracted six teeth from two patients using hypnotism as the anesthetic.

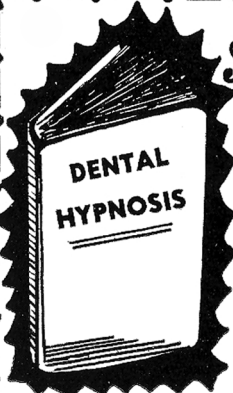
Victor Vinmar, leading Irish hypnotist recently garnered considerable publicity in the Dublin newspapers with a story about the use of hypnotism for curing "bad boys." Vinmar seems to be very active in Ireland and the JOURNAL will soon carry more material on his activities.

Be sure to send your clipping and stories in for our next issue.

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## Hypnotism in Dentistry

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by Dr. Rexford L. North and Ormond McGill

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## BOOK REVIEW

### THE ANNUAL REVIEW OF HYPNOSIS LITERATURE

*reviewed by* DR. ARNOLD I. LEVISON

■ The 1953 edition of this publication is a combined work of volumes I and II (1950-1951), and is edited by a committee of four prominent men. Milton V. Kline of L. I. U's Psychology Department, Arthur D. Haggarty of Brooklyn, N.Y., Bernard E. Gorton of the N.Y. State Psychiatric Institute, and Henry Guze of the L. I. University Psychology Department; all well known in the fields of psychology and psychiatry. The Annual Review of Hypnosis Literature has been edited from the foremost articles and experimental papers on the titled subject. This book is recommended very highly for those interested in clinical and experimental hypnosis, psychotherapy and hypnotherapy; and should be read by every person proficient in administering hypnosis so as to bring about a greater understanding of the problems, experiments and successes that have been encountered. This edition is made up of over one hundred papers and reports, each as important and interesting as the next. I could not do justice to them all if I were to follow the general pattern of a book review nor would I be doing justice to the reader. Therefore, I have decided to be unorthodox, in this review, and in order to make it more interesting and complete, I shall list the subject titles.

**HYPNOTHERAPY**

The Technique and Value in Child Psychotherapy

The Value of Hypnotic Suggestion in Anxiety Reactions of Children

Psychological Treatment in a Child Guidance Clinic; with Special Reference to Hypnotherapy

The Hysterical Reaction in Children: Treatment by Hypnotherapy

The Treatment of Post-Traumatic Syndrome by Hypnotic Analysis

Hypno-Synthesis. Hypnosis a Unifying Interpersonal Experience

Hypnotic Treatment of Persistent Hic-

cup: A case Report

Situational Cardiovascular Symptomatology and Hypnosis

The Application of Hypnosis to Non-Directive Psychotherapy

Personality and Hypnotherapy in Psychogenic Disorders

Relief of Myopia by Hypnosis and Eyetraining

Postoperative Prolonged Hiccups Relieved Through the Uncovering by Hypnosis of the Psychological Cause

Juvenile Warts Removed with the Use of Hypnotic Suggestion

Hypnosis in Electric Shock Treatment

Hypnosis Y Psicoterapia

Treatment by Suggestion of Verrucae Planae of the Face

Hypnotherapy of Functional Dysmenorrhea and Hyperemesis Gravidarum

Experimentally Induced Dreams as Psychotherapeutic Aids

Some Cases of War Neuroses Treated by Combined Psychotherapy

The Hypnotic and Hypnotherapeutic Control of Severe Pain

Radical Hypnotherapy of Apparent Medical and Surgical Emergencies

Psychosomatic Reactions to the Induction of Hypnosis

Hypoanalytic Elucidation of the Hypnosis-Death Concept

Some Aspects of Homosexuality in Relation to Hypnosis

Notes on the Homosexual Component of the Hypnotic Transference

A Note on Spontaneous Hallucinations During Hypnosis

Spontaneous Homonymous Hemianopsia in Hypnotic Imagery

Hypoanalysis, Hypnotherapy and Card

12M of the Thematic Apperception Test

The Unconscious Relationship Between Hypnosis and Death Hypnoanalysis

Fragments of a Hypnoanalysis

A Case of Stage Fright Originating

at the Age of Seven, Relieved with the Aid of Hypnotic recall and Partial Regression

On the Psychotherapeutic Importance of Hypnotic and Sleep Protective Devices

On the Psychotherapeutic Importance of Hypnotic and Sleep Protective Inhibitions

Hypnotherapy in the Military Setting

#### EXPERIMENTAL HYPNOSIS

The Perceived Size of Coins in Normal and Hypnotically Induced Economic States

Brain Wave Patterns Accompanying Changes in Sleep and Wakefulness During Hypnosis

Brain Wave Patterns During Hypnosis, Hypnotic Sleep and Normal Sleep Hypnotic Experiments With Light and Color

Reversibility of Stimulus Function under Hypnosis

Emotions Induced and Studied in Hypnotic Subjects, Part II: The Findings Personality Dynamics in Hypnotic Induction

Time Distortion in Hypnosis

Personality Characteristics in Hypnotically Induced Hostility

Hypnosis and Involuntary Movement The Influence of Unconscious Factors on Hypnotizability Concerning the Possibility of Reducing the Basal Metabolism Through Psychic Influence

The Influence of Hypnosis on Temperature Perception and Warmth Regulation

Emotions Induced and Studied in Hypnotic Subjects, Part I, The Method

Animal Hypnosis; A Study in the Induction of Tonic Immobility In Chickens

Automatic Writing as a Means for Investigating Experimentally Induced Conflicts

Hypnotic Age Regression and Intelligence

An Hypnotic Experimental Approach to the Genesis of Occupational Interests and Choice: Theoretical Orientation and Hypnotic Scene Visualization

Hypnosis and Age Progression: A Case Report

A Measure of Mental Masculinity and Femininity in Relation to Hypnotic Age Progression

An Hypnotic Regression Series

Hypnotic Production of Visual Imagery

The Headache as an Internalized Rage Reaction: A Preliminary Report

Individual Difference in Animal Hypnosis

An Experimental Study of the Hypnotic Dream

A Study of the Effect of Hypnotic Suggestion on Physiologic Performance

Mechanisms of Hypnotic Age Regression: An Experimental Study

The Genuineness of Unilateral Deafness Produced by Hypnosis

A Study of Differential Stimulus Function in Hypnosis

Electrometric Correlates of the Hypnotic State

Standing Potential Correlates of Hypnosis and Narcosis

Mental Age Changes in Experimental Regression

Experimental Control in Hypnotic Age Regression State Controlled Experiments Correlating Electroencephalogram, Pulse and Plantar Reflexes with Hypnotic Age Regression and Induced Emotional States

A Case of Hypnotic Trance Induced in a Resistant Subject in Spite of Active Opposition

The Production of Antisocial Acts under Hypnosis

The Discriminatory Recognition of Visual Patterns Under Hypnosis

A Preliminary Study of the Hypnotizability of Psychotic Patients

#### HYPNODIAGNOSIS

Hypnosis and Diagnostic Psychological Testing

Hypnosis in Relation to the Word Association Test

Rorschach Content in Hypnosis

Clinical Psychiatric Status and Psychological Test Alterations Following Hypnotherapy

A Control Study Relating to H-T-P Testing and Hypnosis  
Hypnodiagnosis and Evaluation of Therapy in Psychiatry and Clinical Psychology

#### THEORETICAL AND DESCRIPTIVE HYPNOSIS

Hypnotism and the Imagination  
Psychosis Following "Amateur Hypnosis": A Case Report  
A Way Into The Hypnotic State  
The Physiology of Hypnosis  
Posthypnotic Behavior and Personality  
Narcotic Hypnosis  
Medical and Philosophical Results of Hypnotic Self-Observation  
A Study of the Hypnotizability of Hypnotists  
Famous Names in Hypnotism: John Elliotson  
Famous Names in Hypnotism (III)  
James Field  
Psychology of the Hypnotist  
A Note on Hypnotic Technique  
Contributions to Role-Taking Theory:  
1. Hypnotic Behavior  
Supplying an Auditory Stimulus for the Induction of Hypnosis  
Hypnosis and The Productive Orientation  
James Esdaile, Hypnotic Dreams, and Hypnoanalysis  
A Hypnosis Reading List for Professional Instruction  
Will Hypnotism Revolutionize Medicine?  
Some Misconceptions Met With in Hypnotic Practice  
Hypnosis and Anxiety  
A Note on The Persistence of Hypnotic Suggestion  
Hypnosis and Personality—Some Unsolved Problems

#### HYPNOSIS IN THE MEDICAL SPECIALTIES INCLUDING DENTISTRY

Hypnosis in Obstetrics and its Relation to Personality  
An Objective Evaluation of Hypnosis in Obstetrics  
Hypnodontia—Hypnosis as Applied to Dentistry I  
Hypnodontia—Hypnosis as Applied to Dentistry II

Hypnodontics, or Hypnosis in Dentistry  
Hypnosis and Suggestion in Obstetrics  
Hypno-Relaxation Classes in Ante-Natal Clinics  
The Use of Hypnosis in Anesthesiology  
Psychosomatic Sleep, Applied to Dentistry  
Uses and Limitations of Hypnosis in Dental Treatment

#### ADDENDA

Space and Time Perception and Distortion in Hypnotic States  
Interpretation in Animal Hypnosis  
Dental Hypnosis and Personality  
I'm sure you will agree that the above is quite an impressive array of topics on the subject of Hypnosis. I'm sure, also, that you will agree that this book covers every single type and phase of the subject. You can also understand why it would have been quite a project to elucidate on each topic in this review . . . now that you have read about the contents, I shall let you be the judge for yourself.  
Book Department, Hypnotism Center, 26 Saint Botolph St., Boston, Mass., and ask for The Annual Review of Hypnosis Literature. (\$2.50).

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## BEHIND THE CURTAIN WITH THE NATIONAL GUILD OF HYPNOTISTS

by George L. Rogers

### THE NATIONAL GUILD OF HYPNOTISTS "CREED"

by LEO E. WAGNER

The following is the creed of The National Guild of hypnotists. We feel it is of interest to all men and women—professional and amateur hypnotists. If all of us will live by this code I am sure the science will never come to any harm.

As conscientious individuals endowed with the high standards required of a legitimate practitioner of the art of hypnosis, we pledge ourselves:

To practice this art for the good of humanity and in compliance with the ideals that make us qualified to do so.

That, we will not tolerate any transgressors of this natural science.

That, we will not cloak in mystery such truths as we come to know them.

That, our aim will be enlightenment and not concealment. We will recognize the higher power and humbly serve to aid and assist humanity.

That, we entertain, only to bring to light the power that may be lying dormant through lack of understanding. Recognizing that ignorance is the cause of mistrust and knowledge is the cure.

That, we further qualify ourselves through additional study, legal experimentation and absolute concern for welfare.

That, we will bind our forces together for good and will have at hand the essentials necessary to explode superstition and disbelief, being mentally and intellectually balanced with common sense reasoning that our science will be worthy of the place, the recognition it deserves.

That, we will maintain and extend throughout the entire world, high standards of ethical practise.

That, we will blend our qualifications in a harmonious relationship, strengthen our forces and tender our abilities to accomplish the most good.

That, we will be open minded to reasoning factors, acclaim the better proven methods, and listen intelligently to the leaders in our field.

That, we will not practice in doubt but in the faith and belief of all methods proven and established by our organization.

That, we will lend support to right any injustice and will relinquish any affiliations of a detrimental nature that would harm ourselves, our guild, or the science of hypnotism.

That, our thoughts will be positive and good, that we may radiate the high ideals we maintain within ourselves, and that we practice as qualified practitioners be we hypnotist, hypnologist or student.

Elsewhere, in this magazine you will find a membership blank to the Guild. If you agree with our creed, why not join our ranks? The purpose of the Guild is dedicated to the promotion of Hypnotism.

Here are listed the reasons for the failure of the acceptance of hypnotism as written by James T. McBrayer, Attorney of Miami, Florida.

1. Ignorance
2. Lack of Ability to use and understand Hypnotism.
3. Fear that it will curtail their income from their profession.
4. Fear of Public Disapproval.
5. Lack of Moral Stamina to face Reality.

(Continued on page 26)

### DIRECTORY OF HYPNOTISTS

The hypnotists listed in this directory are available for demonstration, auto-suggestion, etc. The rate for having your name, address and phone number listed here is \$1.00 per issue or \$4.00 for a full year.

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## EMPHASIS ON SHOWMANSHIP

*(Continued from page 12)*

start weeding out those who will not make good subjects, and ask them to return to their seats, that no offense was meant, and do this with poise and dignity. Do not make any hecklers out of this rejected personnel. Tell your remaining group that are in a hypnotic trance that every time you mention "sleep," they will go to sleep quickly and deeply.

Now select one or two, and put them asleep immediately again. This can be done by using your key word, or whatever you have suggested as a possible hypnotic method. Stiffen out their arms and legs. You are in the middle of your act, and the audience is now seeing something which some of them have never seen before. Your audience is now starting to enjoy themselves from an amusing standpoint. Go on to your next subject and put his arms in motions, tell him he can not stop the movement until you stop it. Ask another one to sing some well-known song. Ask another to eat a lemon and imagine it is a wonderful and fine piece of candy. You may lay a string across the floor and give one the post hypnotic suggestion that they will see a stream of water and will not be able to cross it. This string should be laid across the stage near the exit. However, always give the subject the post hypnotic suggestion of returning to sleep at your command. Wake the person up and ask him to return to his chair in the auditorium, thank him and ask the audience for his applause. Your subject will look around and be stupefied at what he sees the other subjects doing. He will start off the stage until he sees the string, then stand there horrified at the stream of water. At this moment you have a general three ring circus going, and your audience will be laughing and thoroughly enjoying themselves. Take your horrified subject away from the stream, return him to his chair, and put him back to sleep. There are many things that can be done at this time with your subjects. However, do not take any chances on over-exerting any-

body that does not look extremely healthful. They have placed their confidence in you, do not betray it. Keep your act clean and dignified, and yet insert the comedy that is necessary for a successful show. Select the subject for them, thinking they are the President of the United States and give a political speech. Suggest to one person that the minute that you say "Good Night" and they have returned to their seat in the audience, that they will instantly jump up and shout "Hallelujah, Hurrah for (insert your name)". Select one of your subjects who seems to be best suited, put him in a deep sleep and suggest the body muscles become perfectly rigid. At this moment if possible have the light turned down with a dark spot on you and your subject. Have him placed between two chairs, his shoulders on one chair and his feet on the other. Your pre-arranged signal to the orchestra is that when you remove your handkerchief from your pocket and place it across the rigid body of your subject, the drums will start to roll. Be sure to use a handkerchief to protect your subject's clothing, stand on him for a few seconds, and you have built up a fine finale. You have induced showmanship with your blue spot or some other color, the drums rolling and someone out of the audience doing something that everyone realizes would be impossible at any other time.

Again return to your subject, make sure he is completely relaxed and ask the audience for a huge round of applause for all the wonderful people who have assisted you. Thank them again and say good night. At this moment the subject that you earlier returned to his seat with the post hypnotic suggestion, will jump up and shout "Hallelujah, Hurrah for (insert your name)." Acknowledge your last subject with a nice brisk wave and retire from the stage.

If your show has been successful, you will take several encores,

Showmanship in Hypnotism is your difference between success or failure. Study it and ever profit by your experiences.

## NATIONAL GUILD

*(Continued from page 22)*

6. Fear of legal involvement in event of use.
7. Shortage of teaching facilities in Medical and Dental Schools.
8. Adherence to outmoded methods and doctrines, going back to Medieval medical teachings.
9. Laziness of certain professions to mentally alert themselves to new methods and new sciences.
10. Antiquated laws and regulations restricting its use.
11. Sensational journalism conducted without regard for truth.

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(The following are giving instruction in hypnotism. Write for details to the ones nearest you. The rates for listing in this department are \$2.00 per issue, payable in advance. Listing is confined to name, address and phone number.)

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## BETWEEN OURSELVES

(Continued from page 5)

phic Studios take a number of pictures and one of these will be used soon on the cover of the JOURNAL.

Plans are now under way for a documentary film, in full color, to be produced by the HYPNOTISM CENTER. This will run about 45 minutes and many of the scenes will be photographed in hospitals and clinics showing the use of hypno-analysis and hypno-therapy. The film will be made available to schools and study groups. Full data will be released in a later issue of the JOURNAL.

Our newly developed record department is creating much interest. This is the first time that any organization has built a list of records in the field of hypnosis. Records now available are ULTRA MODERN HYPNOTISM by Dr. Rexford L. North and MASTER METHOD OF HYPNOSIS and SELF-HYPNOSIS by Ormond McGill.

Don't miss the Sept. issue. This, the first of the third volume, will be one of our most important ones.

Rexford L. North

## LATENT TALENT

(Continued from page 14)

tionary such a statement is but there is no question but that hypnotism does offer this possibility with the present knowledge which we have. Furthermore, although psychotherapists seem mortally afraid to use hypnosis to remove symptoms by direct suggestion because of a few relapses or symptom conversions, the usage of hypnosis for development of intelligence certainly cannot be considered as harmful in any way. Perhaps hypnosis will use this door to enter into the field of respectability.

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by Margaret Steger, Ph. D.

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(Note: Address all questions to Harry Arons, in care of this Magazine. Questions of general interest will be answered in this column. All questions with their answers, will be compiled in a special folio, mimeographed, and made available to readers at a nominal price. Questions of a medical nature, if received on the professional stationery of qualified physicians, together with stamped, self-addressed envelopes, will not be answered in this column but sent directly to the inquirer.)

Q. I recently attended a meeting of the Essex County Dental Society at the Academy of Medicine in Newark, N. J., where Dave Elman of Passaic gave a lecture and demonstration of hypnosis. I noticed you were there with a group of your dental pupils. Someone asked Elman this question: "Approximately what percentage of the average dentist's patients can benefit to some degree from the use of hypnosis, and what percentage will go into a sufficiently deep trance for dental surgery, extractions, etc.?" Elman refused to answer this question, saying he is not a dentist. Can you enlighten me on these points?

Dr. S. B., Morristown N. J.

A. Yes, I was puzzled too by Elman's refusal to answer this question, which is almost invariably asked by prospective hypnodental students. But he probably had his reasons. However, despite the fact that he is not a dentist, I am

sure that he is familiar at least with the estimates given by Moss and other prominent hypnodontists, as well as by his own pupils.

At any rate, the same figures would apply to dental patients as to the American population generally, as everyone is a dental patient from time to time. Estimates of benefits to some degree from using hypnosis vary from 70 per cent to as high as 90 per cent, this wide range being due probably to the degree of skill of the individual practitioner. Complete anesthesia can be produced only in about 20 per cent, analgesia (partial or glove anaesthesia) in about 50 per cent. It must be stressed, however, that complete anesthesia is not always necessary, as the same results can be obtained by using negligible injections of novocain or weak mixtures of nitrous oxide in conjunction with hypnosis. Moreover, where reflex reactions to painful stimuli are noticed, often amnesia for this can be produced in the patient so that when he awakens he cannot remember any pain or discomfort during the dental work.

Q. When Mesmer's work in France was discredited by the Academies of the Arts and Sciences as being based on worthless theories, was there not another report—I think a minority report—of a more significant nature, in which I believe Benjamin Franklin had a hand?

Mrs. F. F. McM., Denver, Colo.

A. That's quite true. Both reports were given in a negative and disparaging vein, but the minority report written by Franklin was significant, though none recognized it so at the time, in that it hit the nail right on the head. It stated that Mesmer's cures were based on "imagination." Nobody in those days realized how strong was the power of the imagination. We know today that imagination (or suggestion, if you will) is behind all hypnotic phenomena.

## HYPNOSIS – THE NEW DENTAL ANESTHETIC

by GERTRUDE VAUGHN

● Hypnosis is being used successfully as an anesthetic in dentistry at Omaha, Nebraska. So far it is being used only on a limited scale and with caution. Those dentists using this method declare it must be used only under expert hands and with the co-operation of individual patients.

This method was demonstrated successfully Tuesday, November 25, 1952 at Creighton University School of Dentistry in Omaha, Nebraska.

The patient used for the demonstration was an 18 year old boy from Boys Town by the name of Ellis Nemer.

This boy was in a hypnotic state for two hours and forty minutes while his teeth were being treated by Dr. A. F. Ridder.

When Ellis Nemer awoke and was

questioned as to how he felt his first word was: "Great!"

He also said he felt no discomfort while he was asleep and he had no bad after-effect either.

This experiment was conducted during a two-day clinic of the Woodbury Study Club, an organization of practicing dentists.

This club's director is Dr. L. E. Myers of Omaha. He stated that while the hypnosis demonstration was successful, it does not mean that this club condones the practice generally.

The dentists of the Club were quick to point out at the clinic that hypnosis is being used to some extent in dental offices but the full co-operation of each patient is necessary and it won't work on persons who are not susceptible to hypnosis.

### HYPNOTISM and SEXUAL MALFUNCTION

by Dr. Herbert Charles

Here, for the first time, is a clear, simply-worded presentation of the methods used in Hypnotherapy for the problems of sexual frigidity in the female and sexual impotence in the male. This book was written for the serious student. Every hypnotic practitioner will want to read, study and practice this valuable information. Dr. Herbert Charles is a regular contributor to THE JOURNAL OF HYPNOTISM and the author of several books. This is certainly one of his most important works. Sent sealed for \$1.50 per copy.

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# HYPNOANALYSIS

by  
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## Sokeitous Demonstrates Group Hand Clasp Test



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# HYPNOTISM

## (ITS ASPECTS AND CONTROL)

by RICHARD L. HOLMES

■ To begin, the same might well be said about Hypnotism as we find in this verse from the Bible—"And ye shall know the Truth, and the Truth shall make you free" (Job 8:32).

It seems today that the science of Hypnotism could make better strides if it weren't for the damage done it in years gone by. During its 'rareity' period when few people professed to know anything about it—we were led to believe that it was Voodoo, an Evil Spell, or that we were given the 'Evil Eye' from the operator, etc.

Now, it has finally begun to gain a name for itself as people can really understand that it is a science and not a religion. We see today where it is constantly put to use by Lawyers, Doctors, Dentists, Police Dept., and the like with good results. Through these various mediums it is being used for painless childbirth, curing bad habits, improving inferiority complex, painless dental surgery, and for 'sweating' the truth from criminals. There are many more phases too numerous to mention.

There are many, many people who don't really understand what Hypnotism actually is. Likewise, there are even Hypnotists who cannot define it. HYPNOTISM is an induced artificial sleep which brings the conscious mind into a stupor and permits the subconscious mind to be free to receive suggestions. In other words, we could briefly say that it is a condition of the mind in which it is easily and successfully impressed and controlled.

It is, more or less, in universal agreement that hypnotism is produced most commonly in three ways:

1. By psychical influence of one person over another by suggestion of ideas so that they are accepted.
2. By self-hypnotism or auto-hypnosis—wherein a person through sug-

gestion causes his own mind to react on itself.

3. By tiring one or more senses within a person; suggestive influence as to the medicinal value of pills or liquid content in a bottle; and even by magnets.

While under hypnosis, a person will ONLY act out the highest conceptions that he may have of any one thing which is suggested to him. In other words, nothing super-normal can be expected. A perfectly normal and healthy person cannot be hypnotized and commanded to commit suicide against his will unless he was already mentally ill and had those intentions. On the other hand, suggestion can be very fatal. The story is told of an incident of this nature in an early 1900 hypnotic publication. It seems that a young lad was playing with his older boy friends out in the yard. The older boys blindfolded the youngster, then informed him that he was going to be beheaded. He was then laid out on the ground, his neck was cleared of clothing, and when he was slapped across the neck with a cold and wet rag, he died instantly.

Thus, you see, the act of suggestion is powerful and destructive if used wrongly and by the wrong persons.

The operators using hypnotism in this way are still more than plentiful in this universe today. They are the ones who usually boast heavily of their powers, abilities, and apparent earned-degrees in the art. Again the Bible speaks of these people in 2nd Timothy, the 3rd Chapter, and verse Two—"Lovers of their own selves covetous, boasters proud, blasphemers, disobedient, unthankful unholly—". Fellow hypnotists it is our duty to rid the country of this type of operator in order for the science of Hypnotism to reach its desired goal. And without the shadow of a doubt, thi

(Continued on next page)

# NORTH OF THE BORDER

By MAURICE KERSHAW

■ Via Europe and America I find myself once again home in Canada, and have collected en route the very pleasant task of reporting hypnotic activities North of the Border. The previous lack of such news has lead our readers to believe that these activities have been very limited, whereas in effect, the interest and volume of activity in this field has been too extensive to neglect any longer! True, we have suffered from the lack of personal instruction, but a prescription to cure this malady has been written and filled and adequate instructional facilities will be available in the very near future for those interested.

We in Canada have been blessed with periodic visits from DR. ROBERT MORTON and some of his contemporaries and we are truly grateful to him for bringing hypnosis to the public's eye in such an elegant and convincing manner. He richly deserved the success and popularity which was his at every performance, and I feel that we all reaped the benefits of his amazing achievement.

My recent visit to Boston was most refreshing and stimulating, and my tour of that hypnotist's Utopia, The Hypnotism Centre was an experience never to be forgotten! Dr. North has certainly spared nothing in his efforts to cover all possible angles and present them in his usual masterly manner. A visit to this hive of knowledge with its full programme to back that knowledge up is a MUST to every hypnotic enthusiast in this continent. I also paid a visit to the headquarters of the National Guild of Hypnotists and was received with typical cordiality by George Rogers, the National Chairman. Here again I was greatly impressed with the industrious way in which the Guild is working in our interests, and I was honored by being asked to head the Guild's Canadian interests, a gratifying job which I humbly accepted.

Through this column we in Canada

now have the wonderful opportunity of making our presence known throughout the world, and I urge all conferees to not hesitate in sending all items of news, views and photographs which they feel would be suitable for inclusion in this series of articles. In any case, make your presence known to me by writing to 3660 Lorne Crescent, Montreal, Canada. After all, this is our page of the Journal, so lets make full use of it.

My task of introducing myself to you, and the endeavors of my column is now complete, and I eagerly await the reaction of my Canadian brothers in the field of hypnosis and the interest of our readers everywhere. During the next few weeks I shall be "making the rounds" and will faithfully report anything hypnotically interesting North of the Border.

## HYPNOTISM

*(Continued from previous page)*

goal is high HIGH above that which the people of the past generations estimated.

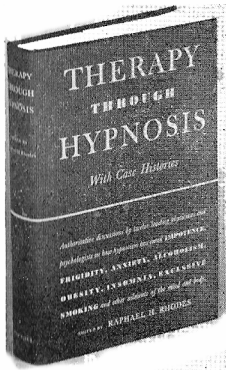
Again in closing might I say that if we know the Truth about the Science of Hypnotism and practice it both wisely, honestly, and with caution:—that we and millions of other people the world over will realize that HYPNOTISM is here to stay.

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Raymond C. Kenney, a psychology student, wrote, "Dr. North's course follows the most advanced scientifically accurate theory in teaching this technique, but most important are the practical aspects he so ably demonstrates."

(NOTE: These are just a few of the many unsolicited letters we have received about this course. The original letters are on file at our office.)

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ULTRA MODERN HYPNOTISM is the text used in Dr. North's course. His current and graduate students, include doctors, dentists, lawyers, policemen, salesmen, housewives, students, entertainers, etc.

**Dr. Rexford L. North**

26 St. Botolph Street, Boston 16, Mass.

Please send \_\_\_\_\_ copies of ULTRA MODERN HYPNOTISM at \$5.00 per copy, postpaid by return mail. I understand that the purchase price will apply to the regular group or personal instruction course at any time. I further understand that the course is sold with the full understanding that I MUST BE SATISFIED or my money in full will be refunded.

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