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# THE Journal OF HYPNOTISM

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# ANNUAL REVIEW OF HYPNOSIS LITERATURE

VOLUMES I AND II

Compiled, Reviewed and Edited by

The Society for Clinical and Experimental Hypnosis

*An integrated survey of clinical and experimental hypnosis in Psychology, Psychiatry and The Medical Specialties, 1950 and 1951*

The Annual Review of Hypnosis Literature is a publication of The Society for Clinical and Experimental Hypnosis. Originally designed to provide Society members with a comprehensive review of contemporary research, the general demand for The Review has been so great as to necessitate a reprinting of Volume I (1950) combined with Volume II (1951) which will be available for general circulation.

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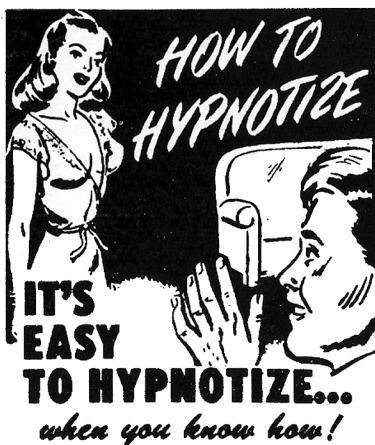
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## EDITORIAL



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expects. Not only are the pictures quite proper — but the course itself deals with rhythmic breathing. The text is by Konradi Leitner, and is called the Master Key to Hypnotism. While rhythmic breathing might be a good idea for wolves to practice, it certainly won't help their projects.

Why are we opposed to this type of promotion? First of all the man who is lured into buying will be defrauded, and he will be justified in rejecting the real value of HYPNOTISM. What is far more important is, the overwhelming majority of people who read the ad, but don't buy the book, will certainly get a very wrong idea of hypnotism. Fortunately what such ads suggest, cannot be done. The general public should not be exposed to this type of trash. It is these beliefs, fostered by this misinformation that have prevented hypnotism from reaching the level of achievement it deserves.

■ In the last issue we started a policy of exposing the abuses to which hypnotism is subjected. This issue we call your attention to an ad that appears in many of the cheaper magazines every month.

The text states, "Want the thrill of imposing your will over someone? Of making someone do exactly as you order? Try hypnotism!" This is aptly illustrated with a male (presumably a purchaser of the book) getting ready to "impose his will" on a sexy looking female. There is a convenient couch in the background. The implication is all too obvious. Anybody old enough to read the ad will get the idea that the advertiser is trying to put over. Added bait is the inclusion of "24 revealing photographs" with the text. This is a rather cute offer. First of all the photographs are not what the prospective buyer

RICHARD L. NORTH

## 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, the first issue of the new year, we change to a two-color cover. You will also find this issue increased in size by four pages. We hope to continually add pages and improve **your** Journal.

Ormond McGill, this month's cover personality, recently concluded a long theatre tour. Now that he is back at his Palo Alto headquarters, we are looking forward to having him write additional articles for the Journal. Incidentally, we have his two new books—*It's Fun To Be Hypnotized*, and *A Better Life Through Conscious Self Hypnosis*. Both are at the printers now. The typesetting has started, and the books will soon be ready.

Soon after this issue reaches our subscribers, I will be leaving for Florida. While in the South on a lecture tour, I will spend considerable time with Dr. Milford J. Ellison at the College of Applied Psychology. I also hope to meet many of our subscribers.

Dr. Gordon S. Mitchell of Chicago, Ill. was a recent visitor at one of my Carnegie Hall lectures in N.Y. He had just returned from a trip to Europe. It is always a pleasure to meet our readers. During Dr. Gordon's visit we engaged in some interesting experiments that I hope to write up for a later issue of the Journal.

Lately I have had a number of inquiries as to whether or not I would conduct classes for groups in various cities throughout the country. The answer is "yes." I will be able to arrange for intensive courses in any city that can be reached by plane. Interested groups are invited to write for full details, telling me how many prospective students they have.

In closing the column this issue, I would like to extend my very best wishes to our readers for the coming year.

REXFORD L. NORTH

# HYPNOTHERAPY FOR HOMOSEXUALITY

By Dr. HERBERT CHARLES

A flip of the wrist, a twist of the hip, a toss of the head and a high pitched voice. This is the picture which the layman has of the male homosexual. A heavy voice, a strong jaw, a muscular figure in a tailored suit is the popular conception of the female homosexual (Lesbian). But these extremes are only seen in a small percentage of the homosexuals, the true or absolute inverts. If Dr. Kinsey's report on male homosexuals is a true indication of conditions, then almost 50% of all males engage in homosexual activity at some time or other.

There is a growing belief that the absolute inverts, with their exaggerated mannerisms, are 'that way' because of hereditary factors. This belief is strengthened by reports of anthropologists that in the primitive cultures there are homosexuals who exhibit the same type mannerisms. There is the further opinion (also the writer's) that the great majority of homosexuals are conditioned into choosing their sexual objects of the same sex. Note that in the primitive cultures as well as in the lower animals, homosexuality, other than of the absolute invert variety, is practically non-existent, **except** when the normal sexual object is inaccessible.

In considering therapy for the absolute invert, cognizance must be taken that it is possible that a hereditary gonad disorder is responsible for the condition, which results in imbalance of hormonal distribution or production. It would seem that treatment by 'male' or 'female' hormones would be effective, but such therapy has been disappointing, probably because the patient has already been conditioned psychologically towards seeking a love object of the same sex. Note that the male who is castrated after puberty may continue heterosexual activity. In antiquity, many a harem's tranquillity was disturbed by this lack of knowledge of the proclivities of the post puberty eunuch. A combi-

nation of hormonal and psychotherapy seems to be indicated for the absolute invert with the better prognosis if such treatment is begun **before** puberty (the invert may be recognized at this period).

The main purpose of the author's new work, HYPNOTISM AND HOMOSEXUALITY is concerned with other than the absolute invert, the normal appearing homosexual. In a previous work, HYPNOTISM AND SEXUAL MALFUNCTION, the author presented the theory that frigidity in females and psychical impotency in males resulted from faulty childhood conditioning and environment. By means of authoritative hypnotic suggestion, coupled with partial re-education, and using the fantasy-evoking technique, these conditions were eliminated. For the elimination of homosexuality, a carefully designed technique has been presented. The method of induction of hypnosis is also important and is the technic introduced by the author for the first time in his work HYPNOTISM AND CHIROPRACTIC. The technic is variously known as the

*(Continued on Page 17)*

## IMPORTANT NOTICE

We have been deluged with letters from readers pointing out that more time should be allowed for entries in the HYPNOTISM AWARDS of 1952 CONTEST that the time for entries has been extended to January 31st, 1953. All entries must be postmarked not later than midnite of that date.

Full information about the contest appeared in the November issue. A limited number of copies are still available at 50c per copy.

Send all contest entries to

The Contest Editors  
COLL. OF APPLIED PSYCHOLOGY  
P. O. Box 146 Miami, 44, Flid.



# HOW TO HYPNOTIZE YOURSELF FOR SELF-IMPROVEMENT

By HARRY ARONS

## Part II

### Hypnosis, Autohypnosis and Autosuggestion

(Note: Readers may have been annoyed by confusion in the text of the first part of this series. The author wishes to explain that due to carelessness in the print shop, several sentences were actually split and parts of others were appended. A section of the article was omitted entirely. Since the writer did not get the opportunity to read proof the context of the article, i.e., that suggestion is the basic force that accounts for successful therapy in any of the systems mentioned, may have been misconstrued by some readers.)

■ The reader may have gained the impression from the foregoing that the writer makes little or no distinction between hetero-hypnosis and autohypnosis. And, since autosuggestion is often used synonymously with autohypnosis the reader would be justified in assuming that the three terms are used indiscriminately. It is therefore necessary at the very start to clear up the matter of terminology as used in the following pages.

#### Hetero-hypnosis and Autohypnosis

Hypnosis or hetero-hypnosis refers to the trance state which has been induced in one person, the subject, by another person, the hypnotist or operator.

Autohypnosis or self-hypnosis refers to the same type of mental condition, but with one which has been brought about by the subject himself without, in the final analysis, the outside help of any other person. For the purpose of this book the autohypnotic subject will also be referred to as the "student."

As regards the trance state itself, it is true that it is the same to all intents and purposes whether it is induced by an outside agent or by oneself. The differences that do exist are en-

countered in the process of induction: it is comparatively difficult for the self-hypnotized person to direct himself in the desired channel.

It is the purpose of this book to explain as clearly as possible the methods employed in enabling the individual to attain the autohypnotic state, and also to expose the techniques used in circumventing the difficulties encountered in applying the self-induced trance to practical purposes. And since this book is not only for autohypnotic students, but also for operators who wish to train others to master this art, considerable space is devoted to information for instructors. It must be stressed that no two hypnotists work exactly alike — the science of autohypnosis is much too young for any standardization worthy of the term to have been established. However, the techniques which are recommended have been investigated and actually used by the writer and may therefore be considered entirely practical within the specified limits and with suitable subjects.

#### Autohypnosis and Autosuggestion

When we speak of autohypnosis or self-hypnosis we refer to the actual trance-state in which the usual hypnotic phenomena are manifested and through which definite post-hypnotic responses can be produced. When we speak of autosuggestion or Coueism, we mean conscious suggestion which the subject gives himself during his **normal waking state**, with the intention and hope that these suggestions will in due course of time and with sufficient repetition seep into the subconscious sphere and thereafter be realized. In autohypnosis, the suggestions, though self-administered, are direct and unequivocal as in hetero-hypnosis, and the results are generally

immediately apparent; the critical conscious mind is in abeyance and therefore is not able to resist or countermand these suggestions. In autosuggestion, the conscious mind merely initiates the suggestions — introduces them, as it were; the suggestions must then somehow or other circumvent the critical and antagonistic elements of the conscious, reasoning mind before they can be accepted by the credulous but powerful subconscious and carried out.

The effects of autosuggestion, where there are any effects, become apparent in due course in a general or vague way — perhaps in a changed attitude toward certain problems, in an improved sleeping or eating regime, or in a feeling of general well-being. ("Day by day, in every way, I am getting better and better.") Autosuggestion rarely if ever produces definite and specific changes as in hypnosis.

Autosuggestion would be left out of this book altogether were it not for the fact that it sometimes can be useful in helping to condition the subject to the point where a definite self-hypnotic trance can be achieved. Thus autosuggestion becomes a medium through which the desired goal may be reached when other methods fail or when the help of a competent and informed hypnotist is not available. In itself, however, the advantages to be gained from autosuggestion are negligible from a practical standpoint. The individual, unaided, eventually becomes discouraged by the lack of substantial results and drops it entirely.

#### Effectiveness of Hypnotic Suggestion

Regardless of the method employed to attain the hypnotic state, the effectiveness of suggestion administered in self-induced hypnosis compares well with direct, hetero-hypnotic suggestion given to a subject by the hypnotist. Again as in hetero-hypnosis, the effectiveness of suggestion varies with the depth of the trance. The student will therefore need to familiarize himself with the characteristics of the various

degrees of hypnosis in order to avoid discouragement in attempting to produce effects which are too advanced for his particular stage of autohypnosis. This information will be given in a later chapter.

In general, it may be said that any effect that can be produced through hetero-hypnosis, can also be elicited in a comparable stage of autohypnosis. Thus, a somnambulist subject who can be anesthetized easily in hypnosis can bring this effect about in autohypnosis as well. The advantages of this method can be appreciated when one considers the inconvenience of a subject's having to drag his hypnotist along to the dentist's office with him.

#### Practical Uses for Autohypnosis

Autohypnosis can be put to practical use in a large variety of ways. Following is just a partial list:

The ability to relax can be easily and speedily learned through even a light degree of autohypnosis. This happy knack can be instrumental in changing a person's entire outlook on life.

Resistance to fatigue can be substantially increased. Thus, a person can be rendered more productive in his work and more pleasant in his social contacts. Relaxation is one of the primary factors in developing resistance to fatigue.

Autohypnosis makes insomnia a thing of the past. The student can learn to fall asleep practically at will, and to awaken refreshed and rested at any moment of the day or night. (See the writer's "How to Develop an Alarm-Clock Mind", Power Publishers, \$1.00).

Memory can be improved.

The ability to concentrate can be markedly increased.

Visual and hearing acuity can be increased for specific tasks. Hearing or visual difficulties of a hysterical nature may be permanently corrected.

Learning can be speeded up, together with the increased ability to retain the assimilated information.

The ability to recall long—"forgotten" events of the past can be promoted. A

trained autohypnotic student, when taking an important exam, will find facts and figures flowing smoothly into his mind. This phenomenon of hypernesia has contributed immeasurably to psychoanalysis; quite a number of analysts today are using an accelerated form of psychoanalysis called hypnoanalysis.

Dental work can be made painless, even pleasant, through the use of hypno-anaesthesia. More and more dentists are taking up hypnotism for this purpose.

Stage fright can be autohypnotically controlled. Public speakers, actors, singers, stage, radio and television performers of all sorts could benefit immensely through use of this method. Not only does autohypnosis remove stage fright and the nervous tension usually associated with it, but it also helps the individual put on a better performance by allowing whatever talents may be dormant in the subconscious to come to the fore. Autohypnosis may actually be used to advantage by persons who suspect they have hidden talents but who, because of inhibitions, fears, or other adverse influences have never attempted to develop them.

Childbirth may be made painless and pleasant by prospective mothers trained in autohypnosis.

Stuttering, stammering and other psychogenic speech defects can be corrected.

Self-consciousness, bashfulness, timidity, etc. can be conquered.

A large variety of habits, including smoking, drug addiction, alcoholism, nail-biting, bed-wetting, nervous tics and twitches, undesirable sexual habits, etc. are amenable to autohypnotic control. Habits which are symptoms of deep-seated neuroses require competent outside help in addition.

The flow of creative ideas may be stimulated. For example, a writer trained in autohypnosis need no longer wait for periods of inspiration — he can create them practically at will.

In surgery, as in dentistry, hypno-anaesthesia can be of great help. Actually, it has many advantages over chemical anaesthesia, one being the fact that

the usual post-operative pain and discomfort can be prevented.

In the field of medicine, numerous psychogenic complaints can be effectively treated by a combination of hetero-hypnosis and auto-hypnosis. It must be stressed that any disorder which seems to be within the province of the medical profession should be treated or at least supervised by a qualified physician.

Hypnosis has achieved signal successes in the correction of obesity. A combination of hypnosis and autohypnosis is the ideal method for controlling the abnormal craving for the wrong types and quantities of food, which is the principal cause of overweight. (See the article "Hypnosis in Diet Enforcement-Case 35B" by E. D. Samson, R.N., in the March, 1952 issue of the Journal of Hypnotism.)

#### A Word of Caution

Although the dangers inherent in hypnotism can be minimized, the student who masters the art of autohypnosis has such a powerful tool in his possession that he must be warned to use it judiciously at all times. Since in most cases the student will have to enlist the services of a hypnotist to get him started, it will fall to the instructor to stress the necessary precautions and also perhaps to discourage such applicants as are obviously unqualified to wield this great power.

The instructor must appraise the prospective student carefully and decide first of all if he has the necessary intelligence to understand the various implications of autohypnotic mastery. Probably the most important qualification is good judgment; can the student exercise sufficiently good judgment about what effects he can safely undertake to produce through autohypnosis and what effects had best be undertaken with outside help?

The principal danger is that a student will be tempted to anaesthetize himself to pain indiscriminately. He must be

(Continued on Page 21)

## REALLY SEEKING THE TRUTH?

by DR. REXFORD L. NORTH

■ A student recently called my attention to the May, 1952 issue of a publication entitled "TRUTH SEEKER". There I found a full page article under the title of "MODERN MESMERISM". This was divided into two parts. The first part was sub-titled "Svengali Up To Date." This was a rehash of the Slater story. The second half was sub-titled "Hypnotic Anesthetists" and attempted to rake me over the coals. The gist of this part is herewith printed in the box on this page.

The writer of the article is unquestionably a most misinformed person on the subject of hypnotism. He seems to be laboring under the impression that the use of hypnotism in dental practice is simply a pipe dream, a wild idea that we are trying to palm off on the dental profession. He doesn't seem to know that leading dental publications such as Cal, Oral Hygiene, Dental-Items-Of-Interest, etc. have published and are publishing many illustrated articles on the subject. He doesn't seem to know that ethical medical publishers are issuing volumes on the use of hypnotism in therapy. He doesn't seem to know that dental and medical societies are sponsoring lecture-demonstrations on hypnotic therapy because they ARE becoming aware of its possibilities. He doesn't seem to know that I am only a small part of this movement. He just doesn't seem to know.....ANYTHING about hypnotism.

The "TRUTH SEEKER'S" writer states that, "like the Indian rope trick it (hypnosis in therapy) is always beyond the reach of verification." It is obvious that he is beyond the reach of facts. Let's look at the sort of men who can verify the therapeutic value of hypnotism and have written published papers and books on their findings. William S. Kroger, M.D., Chicago Medical School.

S. Charles Freed, M.D., Mount Zion Hospital, San Francisco, Calif.

Thomas O. Burgess, Ph.D., Concordia College, Moorhead, Minn.

Aaron A. Moss, D.D.S., Bernardsville, New Jersey.

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### Condensed From The May, 1952 TRUTH SEEKER Published In N. Y. C.

If there is not a mad rush to obtain Dr. North's Dental folio for use in tooth extracting and dealing with exposed nerves it is probably because dentists have their own method of dulling sensitivity.

(Editor's Note: Dr. North's folio on DENTAL HYPNOSIS is now in its third edition in less than two years.)

The airs which hypnotism gives itself are highly amusing, especially in the field of therapy.

"Medical hypnosis is by no means new," says Dr. Rexford L. North, a Boston hypnotist, in his Medical Hypnosis folio. "The curative powers of hypnotism have been known for many centuries, but it is only in comparatively recent years that the medical profession has accepted its possibilities more generally. Hypnotism is definitely not a cure-all. It has many limitations but it warrants investigation and further experimenting will undoubtedly increase its value in Therapy."

If the medical profession "has accepted its possibilities more generally" it is not observable in medical practice. To be sure, you will find an occasional doctor who once knew of a man who knew of someone else who knew of a woman who was hypnotized in child-birth, but like the Indian rope trick, it is always beyond the reach of verification.

Hypnotism is a sorry mess, which is no more acceptable in the range of therapy than a witch's brew of bat's ears and cobwebs.

## IDEO-MOTOR AND FATIGUE

by Ormond McGill

■ In our present day civilization where we are continually under stress and strain, there has been a marked increase in neurotic symptoms of all kinds. We must cope with problems which our grandparents or even our parents did not dream of. One of the many symptoms, most widespread, yet very injurious to our happiness and well being is what the psychiatrists call neurosthenia, or, an undue amount of fatigue. The many people who suffer from this are unable to muster the interest and strength to work successfully. It lessens their efficiency and prevents them from reaching fulfillment of their hopes.

Fatigue, the most outstanding part of this condition, is defined as "exhaustion of strength by toil-weariness." There are many different kinds of fatigue. We shall briefly enumerate some of the main causes for different kinds of fatigue.

If a muscle is made to contract by electric stimulation, it will contract for a long time in response to a shock. After a certain period of time, which differs with the type of muscle used, it will no longer contract. It is fatigued. This fatigue is due to the exhaustion of the immediately available biochemical energy which provides the fuel for its contraction. (Creatine phosphate and Adenosine triphosphate) While this is going on, a "waste product" (lactic acid) accumulates in the muscle. Older theories have made a point that fatigue is due to the toxic effect of lactic acid. The current belief is that fatigue is due to the running out of immediate energy. If the muscle is given a rest, it will be able to reconvert some of the lactic acid back into usable energy by burning oxygen from the air, thus converting heat into bio-chemical energy. This muscular fatigue only occurs in laboratories when the muscle is directly stimulated. In the body, the muscle is stimulated by the nerve which controls its action, ra-

ther than directly. Nature has provided us with a safety device, whereby the synaptic connection of the nerve gets fatigued long before the muscle itself is completely exhausted.

There are many theories about this process, and scientists are not yet in agreement. Most research men believe it is due to exhaustion of Acetylcholine, the substance which transmits nerve impulses. We now have mentioned two types of fatigue. One which happens within the muscle itself; the other, in the nerve which controls the muscle. For all practical purpose, only the latter is important.

Till now we have spoken only of fatigue as a result of work. There is another type. It does not occur in the limbs or muscles of the body. It is of central origin, occurring within the brain. This fatigue is a neurotic symptom, and is the cause of a decrease in our ability to do work. While we cannot prevent muscular fatigue which results from physical exertion, we must and should try to help people to overcome this mental lassitude.

Again many theories have been proposed to account for this phenomena. The question is raised as to whether this is not just boredom or ennui—mere lack of interest. In this case a man is said to be tired of work instead of tired by work. When an observer watches workmen pour out a factory gate at the end of the day, he cannot tell whether the weary face of the crowd reflects muscular or mental fatigue, or just boredom. For practical purposes then it does not matter whether fatigue is mental, muscular, boredom, suggestion or even monotony; the effect appears to be the same—a lowering of efficiency and weariness.

From the point of view of mental hygiene, it is justifiable to try to eliminate the causes of heavy fatigue, even if it cannot be defined.

Now we would like to proceed to the main essence of our topic, and show the close relationship between IDEO-MOTOR & FATIGUE. As we know, ideomotor action implies a muscular counterpart to every thought. (This was outlined in my previous article, *THE POWER BEHIND SUGGESTION*). Such being a truism, it logically follows that the mental attitude of an individual forms a definite basis for the fertile or unfertile development of fatigue within his body or mind. If fatigue, as has been cited, is caused by toxin in muscles of the body or the brain, then obviously the motor responses of the mind can be directly responsible for much of the fatigue subsequently experienced.

We have all noted situations in which we find ourselves filled with such enthusiastic interest that we are amazed at the tremendous output we seem capable of; while other situations, less energy-consuming, leave us thoroughly exhausted. In such examples we can clearly recognize the mechanism of ideomotor responses at work, and economy experts in any organization would do well to supply their workers with the type of environment that leads to interested minds for the maximum cultivation of work through a lessening of fatigue.

Let us now turn our attention to "suggestion-fatigue" for a last consideration of this apparently theoretical, and yet so downright practical study. Here we have a type of fatigue not due to actual work either muscular or mental. It is not due to monotony or dis-

traction; it is due purely to the mere presence of suggestion, (suggestion in this case, being regarded as carried-out motor activity that develops from the sum-total of ideomotor activities manifested in muscular response).

For an explanation of this "suggestion-fatigue" idea, let us recall the fatigue theory; that fatigue is due to the befogging of the general synaptic connections, or to the shrinkage of the nucleus in the cell body of the nerve.

Thus basing our thoughts on authority, we can, with confidence speculate: Fatigue is a learned response, first developed as the result of toxic poisoning through overworked muscles. Were this toxic poisoning of the muscles allowed to continue, it would end in the ultimate destruction of the cells themselves, to which end nature has put a safety valve in the development of a synaptic befogging or withdrawal which automatically tends to cut down the efficiency of the muscle thus checking the development of further toxic poisoning.

When the original neural action to the toxic poisoning of fatigue has been thus learned (set), the mere presence of the idea (when insufficiently opposed) through ideomotor action tends to directly affect the nerves causing a synaptic befogging or withdrawal—producing directly the symptoms and manifestations of physical fatigue.

Of such is the power behind suggestion's relationship to fatigue—any one of them is our cue to apply the positive aspects of this power to lighten the effects of the negative.



#### OUR COVER

ORMOND MCGILL of Palo Alto, California, is an outstanding hypnotist as well as the most prolific writer in the field. His published works include the *Encyclopedia of Stage Hypnotism*, *The Master Method of Hypnotism*, *The Supernormal Powers of Hypnotism*, etc. Two new books (*It's Fun to Hypnotize* and *A Better Life Through Conscious Self Hypnosis*) are in production.

# HYPNOTISM AND MEMORY

By HERBERT CHARLES

## Part IV (Final)

■ In the section on mnemonics we saw that this system consisted of firmly entrenching in the mind certain standardized material and the acquirement of new knowledge by means of association with that material. However, it was pointed out, the task of learning the system itself was a difficult process and it was because of this difficulty that auto-hypnosis was being utilized in connection with the mnemonic system. The means of applying autohypnosis will be described.

Originally the student was asked to fix in his mind a series of 20 words which represented vivid mental pictures. Although the student was given a method for memorizing these visualizations this method did not represent a radical departure from the ordinary learning procedures. Now another list of 20 words are given the student but these 20 are to be learned under auto-hypnosis. Notice the ease with which these 20 words will be learned and firmly fixed in the mind as compared with the first 20 words.

A warning is in order. Do not attempt to use auto-hypnosis for memory training unless you have thoroughly mastered the technic for instant auto-induction. Try it now and then awaken yourself. If you have succeeded you are ready to proceed, otherwise train yourself further.

In the waking state examine the following 20 words. You may make up your own words if you so desire in the same manner as previously shown. Since the first 20 words were numbered from 1 to 20 these next 20 words are numbered from 21 to 40, thusly:— 21. NET. 22. NUN 23. NAME 24. GNOME (of course the G has no value here since

it is soundless) 25. NAIL 23. NICHE 27. NAG 28. NAVY 29. KNOB 30. MOUSE 31. MAID 32. MINE 33. MAMA 34. MOWER 35. MULE 36. MATCH 37. MUG 38. MOVIE 39. MAP 40. HEARSE.

As you look at the words note that they are formed in the same manner as the first 20 words, that is the values of the respective letters are constant. Although there is a variance in several of the words in the initial letter this variance in no way changes the numerical value. Note again that the value system gives another point to attach associations.

Consider now the first five words in the new series, 21 to 25. Now by the signal method induce instantaneous auto-hypnosis. Now form mental pictures of the series of five always associating the respective number to the proper word. When you can clearly visualize each word and its number awaken yourself. Now test your knowledge of the word and your visualization of the picture you have formed.

Now go on to the next series of five words and in a manner similar to the above alternately put yourself into the trance state and then awaken yourself for the waking test. When you have done this put yourself back into the trance and visualize and review all 10 words. Proceed to the last series each time adding the previous learned words. When you have finished you should have a fixed mental image of each word and the number assigned to that word. Test yourself over and over in the trance state and the waking state until you are sure you know the entire series perfectly.

Now go back to the first 20 words



which you learned in the waking state and visualize them again in the trance state. Do NOT change your original visualization, merely review them under auto-hypnosis. When you have them all well fixed test yourself in the waking state.

Now with the series 21 to 40 play the parlor game mentioned in a previous section. That is, make up a list of any 20 objects and assign them a number from 21 to 40. As you do so associate the object with the corresponding number in your basic list. You do NOT go into a trance for this associative process. Merely see mentally a picture of the object with your basic word and go on to the next word.

Very often the student attempts to spend too much time in trying to make such associations. This is not necessary. You need have no fear of not remembering the desired object and its corresponding number. Merely the mention of the number desired will immediately bring a picture in the mind of the basic word with the new object imposed upon that word. It is a fascinating game and you can amaze your friends. Have one person write down the words as the group calls them out. As they do so you can immediately make your association with the basic word. Of course you will take the list when it is finished and study it for a short time, renewing your associations. Then give back the list and let them call out any number and you will immediately give the object the group called out. It doesn't matter if they call the words in or out of order.

If the word game were the only possible usage which could be made of the system it would hardly be worthwhile learning, amusing as the game can be. It can also be used in remembering any list of items or things which have to be done. You can add as many words to the basic list as you desire although it is not advised to go over 100.

The student has a surprise in store for himself. In the section devoted to the study of the brain it was clearly shown that whereas there were fixed motor positions and areas the associative processes seemed to take place in

the entire cortical area. This is sufficient indication that if the memory is sharpened as it is by the usage of auto-hypnosis and mnemonics the **entire** memory activity for any learning process will be accentuated. This seeming by-product of the system as outlined is the real value which the student of the system earns.

We cannot leave this work without some discussion of other usages of auto-hypnosis. Many of the readers will feel that perhaps the greatest value they received from the series is learning how to induce hypnosis in themselves. We certainly believe that a clear cut method such as was presented here, the 13 steps listed in the previous section for inducing auto-hypnosis and the subsequent instantaneous induction via post hypnotic signal, was a very necessary and much needed methodology. However, anyone who has no other knowledge of hypnosis and self-suggestion than contained in this work, should NOT use this knowledge gained herein for any other purpose than for memory training. There is a great deal more to autosuggestion than has been described.

The method given for inducing auto-hypnosis can certainly be used to induce it for other purposes than memory training but whereas a procedure for memory training has been outlined distinctly no other procedure has been shown. For instance, if auto-hypnosis were to be used for therapy the student would have to know just how to give himself suggestions which were beneficial. He would have to know what suggestions are to be given also.

Of course there is here no question that very often the very state of auto-hypnosis may have beneficial therapeutic results. The student of the memory training course given here will have already learned that by experience. However it is best to leave it at that until more is learned about hypnosis generally. There are many worthwhile works on the subject and it seems anyone who has even a modicum of association with auto-hypnosis becomes an avid reader of the literature of the science.

## BUILDERS OR DESTROYERS

By Rev. M. C. Bell

■ That, my fellow hypnotists, is what races us today. Are we going to be builders or the future? We stand today on the threshold of a new era in a field of science; a science that is as old as the mind of man, yet as new as the headlines in your morning paper. A science that has been misused, abused and maligned in every age and in every manner by those who were ignorant of its great and unlimited power.

The custodians of that power that we know as "hypnotism" are you and I. Upon us who practice or teach the art or hypnosis in any form rests a very great responsibility. Just to mention a few points that must be our goal, (a) a high standard of ethics that is beyond reproach; (b) an unswerving sense of loyalty and unity within our own group and organization, be it local or national, for united we can withstand the outside influences that are bound to harass our efforts as teachers and practitioners of the science of hypnotism; (c) to remove at least some of the stigma and erroneous information that is in the public mind, placed there by unethical practice of the hypnotist himself and the misinformation placed in the public mind by those who would destroy us. (And remember you only try to destroy that which you fear, or do not understand) (d) Last but not least is the importance of our own discipline, for as surely as night follows the day if we do not police the conduct of those within our own group and make our influence felt on those outside, an outside force WILL POLICE US AND OUR POLICIES.

Great credit must be given to Dr. North and his associates who have worked so hard in that direction, in the establishment of the National Guild of Hypnotists, an organization that can be of invaluable service to all of us in the

future. And since we are speaking of the future, let me add that my twenty years in the field of hypnosis and its various forms and uses has led me to this one conclusion. Within the next decade you will see hypnosis used in all schools of healing, not as it is today, limited through ignorance, but in a sense so broad that not only will every school of the healing arts use it, but educational institutions such as Teachers Training Schools will make it a must.

Think this thought over just a little. How about a lay magazine to be sent from your office every month or so as an educational medium? I am hopeful that Dr. North and his associates will at a future date publish such a magazine for office distribution.

As a final word as one who has gone it alone for many years as many of you have, and now are no longer alone, let us unite under the banner of the Guild, support it, its officers and its program, and in so doing you will feel within yourself a glow of warmth that you have not known before. Man does not like to be alone, now we are hypnotists united for the first time.

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# MEDICAL HYPNOSIS

*By Lewis R. Wolberg, M.D., Associate in Psychiatry, New York Medical College*

Dr. Wolberg's new book is one of the most important contributions to psychotherapy of all time. It is important to the future of psychotherapy in that it shows that methods and a system of treatment can be taught and in that it demonstrates the significant role of short term treatment in modern psychiatric practice. Hypnosis is presented as an integral part of psychotherapy, not as a mere adjunct to it. It is employed to canalize treatment.

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**HOMOSEXUALITY***(Continued from Page 6)*

Indirect or Charles Method, whereby the subject is inducted into hypnosis without his knowledge (or consent). Since with a homosexual it is all-or-nothing (you cannot participate in a 'little' overt homosexuality) the purpose of the therapy is to change the sex of the love object completely. Cognizance is taken, of course, of the 'part time' homosexuals who may vary homosexual activity with heterosexual practices.

Society, which is itself greatly to blame, generally considers homosexuals as degenerates. On the other hand, the homosexual is quite apt to consider his or her inversion as normal and to firmly demand the same rights as any one else. The great fault seems to be that our culture assumes a sharp line of demarcation between what it considers proper masculine and feminine interests. If a male child shows signs of interest in what is considered female activities, we say 'sissy' and if the girl exhibits interest in normal masculine pursuits, we say 'tomboy'. The child is quite apt to have doubts of its sex. Little note is taken of the genetic fact that 47 of the

48 chromosomes are identical for male and female. The problem of homosexuality will be better met when it is realized that it is, with the possible exception of the absolute type originally, a neurosis, and as such is amenable to psychotherapy.

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**HYPNOTISM and SEXUAL MALFUNCTION**

by Dr. Herbert Charles

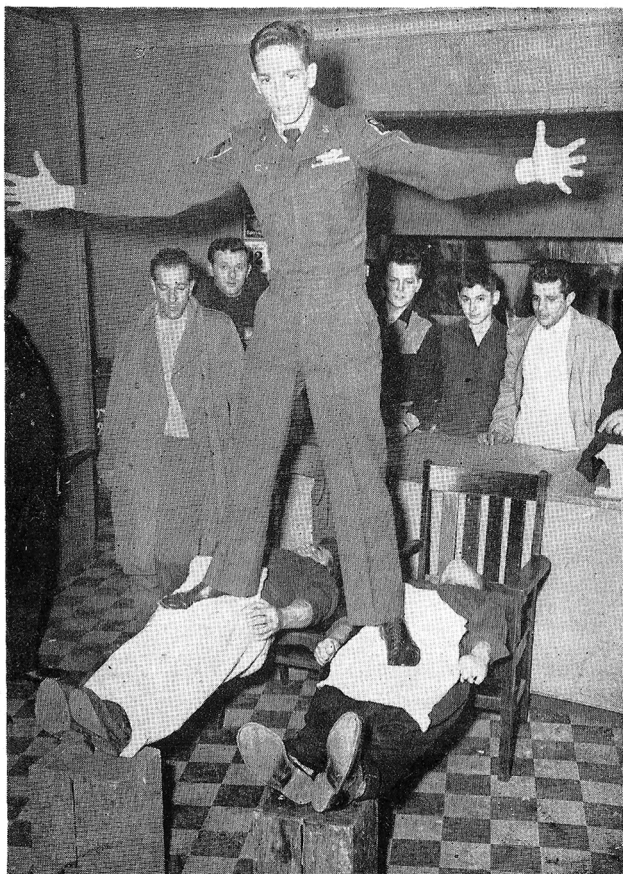
Here, for the first time, is a clear, simply-worded presentation of the methods used in Hypnotherapy for the problems of sexual frigidity in the female and sexual impotence in the male. This book was written for the serious student. Every hypnotic practitioner will want to read, study and practice this 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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## DOUBLE CATALEPSY



This unusual photo of double catalepsy shows Corporal John C. Hughes of the 453rd Military Police Company, Fort Devens, Massachusetts, popular young hypnotist, now in the Army, standing on two subjects at once. Hughes has been active in the field for some time and intends turning full time professional when he leaves the Army in May.

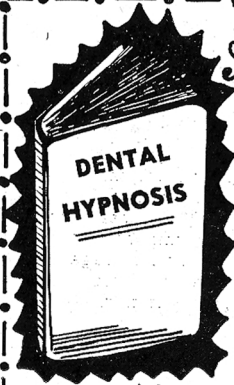
## HYPNOTISM IN THE NEWS

■ "HYPNOTISM IS DYNAMITE" is the title of an article recently published in **THIS WEEK** (9,700,00 circulation) the magazine supplement distributed with the largest Sunday newspapers from coast to coast. Authored by Ward Cannel and Leonard A. Paris, the article has certainly created a stir. (More than 60 subscribers sent copies of the article to this office, an all-time high.) Since this department is simply interested in calling your attention to articles published about hypnotism and we do not editorialize here, we will not do so this time either. However, we are planning an article for the future to take up the questions posed by the writers.

Edwin L. Baron, the Chicago hypnotist who garnered world-wide publicity with his diet enforcement, crashed the papers again recently when he restored the memory of an amnesia victim. A pretty blonde waitress walked into the office of the Chicago Herald-American in an almost hysterical state and told them that she did not know her own name and address. A reporter from the paper took her to the office of The Chi-

cago Institute of Hypnotism, of which Mr. Baron is director. While in the trance she regained her memory and gave her name and address as Mrs. Jonie Spletter of 2020 N. Orleans Street. Upon being awakened Mrs. Spletter said, "Oh, what a relief. I remember everything now."

Miami, Florida City Commissioner Leslie Quigg recently garnered a front page story as well as a four-picture layout in the Miami Daily News. Commissioner Quigg hypnotized Mrs. Mary Schaffer for a complicated dental operation. The operation was performed by one of Miami's best known dental surgeons in the presence of two dentists and an M.D. The operation consisted of removing an infected piece of bone and a cyst from Mrs. Schaffer's jaw. Mr. Quigg is well known in Florida for his ability as a hypnotist. A bit over a year ago the nation's wire services carried stories about an amnesia case in which he brought back a boy's memory. We have arranged to publish the news photos of this story in the next issue of the JOURNAL.



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## BOOK REVIEW

### HYPNOTISM TODAY

by Leslie M. LeCron, B.A. and Jean Bordeaux, B.A., M.A., Ph.D.

(As reviewed by Dr. Arnold Levison)

■ This is not a new book, but is considered to be one of the best works of its kind. It was first printed in 1947 and again in 1949, but has so much merit that I feel it should be reviewed in the Journal for the benefit of those who have not, as yet, had the pleasure of reading it. As you read the review, you will come to realize that the book contains a complete explanation of every phase of hypnosis, and leaves out nothing.

Part one opens with an explanation of hypnosis as we know it today. This covers its several fields as well as the men who have contributed greatly to its advance, and their individual contributions. The background of hypnotism is covered and gives the reader the history in a very well written form. Hypnosis induction is covered and the complete explanation of suggestibility in all its aspects is uncovered for you. The principles of suggestion and phenomena of hypnosis is given a little different slant that is readily understood by even the slowest reader. Posthypnotic suggestion, autohypnosis and autosuggestion is a chapter that would interest almost everyone whose curiosity led them to hypnosis or psychology. The theories of hypnosis are given without any prejudiced thoughts and are presented both pro and con. A very interesting part of the book comes at the end of part one and is headed Hypnotism and The Psychic Sciences. It is only 10 pages long but covers many aspects heretofore untouched upon.

The second part of Hypnotism Today is headed Hypnotherapy. This seems to be a magic word, in our present day,

due to the lack of knowledge on the part of the lay-people as well as many students of psychology, of this subject. This section is the "meat" of the book and covers every conceivable thought on the subject. It starts out with an explanation of Abnormal Psychology and Functional Diseases, and their relationship with hypnosis. A detailed description of Psychotherapeutic methods is given and may inject a new trend of thought into the stagnant techniques of many practicing psychologists. Functional Hypnotherapy is a field in itself but is very well done in twenty-four pages. The authors give a system of brief Hypnoanalysis and an explanation of Psychosomatic Hypnotherapy, which has long been a subject for common misconceptions, and is now detailed in a non-technical language that will give absolutely anyone a keen understanding of the subject. The authors, Mr. LeCron and Dr. Bordeaux, have kept the book alive and modern with their final chapter on Research in Hypnotism.

As a reviewer of books on the subject for the Journal, I have had opportunity to recommend many books but in this case, I truly state that I cannot recommend Hypnotism Today too highly. You, the readers, will bear me out in my elation over this book, when you have turned over the last page. At that time you will feel, as I did, that you regret it is finished. It is the kind of a book, so well written, that your interest is held until the end. See for yourself . . . order one from the Book Dept. of Hypnotism Center, 26 St. Botolph St., Boston, Mass. The price is Four dollars postpaid.

**HOW TO HYPNOTIZE YOURSELF***Continued from page 9*

made to recognize that pain is a warning about something wrong, a symptom rather than an end effect, and that it is dangerous to mask it without trying to discover the cause. He must also be warned against producing negative hallucinations, suggested deafness and blindness, and many other things which a person of good judgment will instinctively recognize as hazardous.

He must also be told, quite frankly, that autohypnosis is not to be regarded as a panacea or cure-all, and be informed about its limitations. He must be warned, moreover, that he should consult a physician before he even starts with autohypnosis, to be assured that there is nothing organically wrong to begin with. And he must be ready at all times to get medical help with anything that seems to fall within the province of medicine.

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The Editor

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**M. C. BELL**, 569 Door Street, Toledo 2, Ohio

**SEEKING THE TRUTH***Continued from page 10*

Jacob H. Conn, M.D., John Hopkins School of Medicine

Milton E. Erickson, M.D., Phoenix Arizona.

Lewis R. Wolberg, M.D. New York Medical College.

This short list of names of men who are actively experimenting with hypnotism in therapy should give him a source for verification. Scores more could be added to this list and more are joining their ranks daily.

I still say, "Hypnotism warrants investigation and further experimenting will undoubtedly increase its value in therapy."



## BEHIND THE CURTAIN WITH THE NATIONAL GUILD OF HYPNOTISTS

by George L. Rogers



■ Introducing Leo E. Wagner, of 31½ North McNeese Ave. Whittier, California. Besides being an engineer, Mr. Wagner is a noted song composer, writer, inventor, and one of the foremost hypnotologists in the country. At present he is writing a book on Hypnotism. Mr. Wagner is interested in forming a group to study and prove the natural law functions of all so-called mystical phenomenas. If you are near him, and are interested, be sure and write.

Get a copy of "Future Science versus Fiction," Jan, 1953. There is a very good article in it by Leo L. Martello, a charter member of the Guild. Look for, "Hypnotism Facts versus Fiction."

The following is an extract from a letter by Dr. Hassan, "Hypnotism in Egypt." Egypt was one of the foremost countries practicing this science from early ages. The Ancient Egyptians used Hypnotic power for everything in their life, and this science was one of the very important subjects of interest to the priests and chiefs of the country. They used hypnotism instead of medicine, and found it very successful. Through their own experiences, they discovered and then wrote about psychology and hypnotism.

The following men are starting chapters. Please, if you are near any of them, contact them. They need and welcome help. A. Edward Gross, 3900 West Pine Blvd., St. Louis 8, Missouri..... Louis M. Gibson, P. O. Box 535, Peoria, Illinois ... Curtis W. Peck, 2517 K. Street, N. W. (No. 701) Washington 7, D. C. .... Peter J. Soban, 846 No. Maplewood Ave., Chicago 22, Illinois ... Dr. Richard J. Johnston Rte. 4, Wayzata, Minnesota ....



Dr. Aziz Hassan, 51 Safia Zaghlool St. Alexandria, Egypt: Hypnotist—Psychologist, is interested in having friends and members write to him. Dr. Hassan is at present a government official. Despite the fact that he lost a foot in the Egyptian Hebrew Wars, he is a prominent swimmer as well. He has represented Egypt in the festival of magic in London and performed at the "Paladium." He has also taken part in a floor show in the "LIDO" in Paris.



Edwin E. Morrow, 9574 Patton Avenue, Detroit, Michigan is one of our most prominent members; chairman of the Detroit Chapter, which is our largest and most active group. Director and head of the Media School of Hypnotism, Mr. Morrow is an ardent Hypnotist and intelligent Hypnologist.



Joseph Samson, 44 Irving St. Cambridge, Mass. is one of our local members, and has been doing Hypnotism for years. Mr. Samson, a French Canadian and an amazing Hypnotist, and presents his program in both the French and English language. He works throughout New England. At one time he was a professional wrestler.

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EDITED BY: Leslie M. Le Cron

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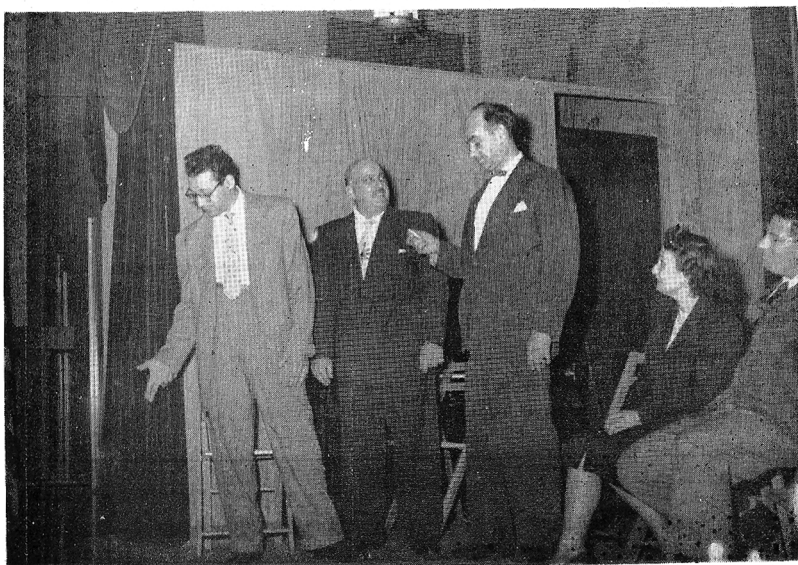
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## BREAKING SMOKING HABIT



The above photo shows Ted Schlesinger (second from left) popular New York hypnotist, demonstrating how the smoking habit may be broken through hypnotic suggestion. Show-type demonstrations such as these can do a great deal of good in giving people a better conception of what hypnotism actually is, and what it can do.

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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 would like to know the name of a qualified hypnotist in a nearby city—I mean like St. Louis, Chicago, Memphis or Nashville. I stammer and have been told that hypnotism would help.

R. C. Paducah, Ky.

A. Dr. William S. Kroger, Chicago, Ill. This doctor is an expert and should be able to help you if anyone can. I don't know his exact address; if you can't find it in the telephone directory call the local Medical Society.

Q. Will you please send me the name of a dentist who uses hypnotism as an anesthetic? One who lives in Newark or New York.

C. H. Hawthorne, N. J.

A. Dr. Sidney Samet, 17 William St., Newark, N. J.

Q. It seems to me it would be of considerable interest to your readers, I among them, if you could find out whether the "Jack Wafer" mentioned in the attached clipping used hypnotism (hetero or auto) in any way to aid his fast

(as the East Indians do) or possibly simply to anaesthetize himself to hunger pangs.

L.P.Y., Greenwich, Conn.

A. I have read quite a number of accounts of Jack Wafers' feat—a fast of 72 days, 3 hours, 3 minutes. But in only one was there any mention of his using hypnosis—in this article it mentioned "... it is said he subsisted entirely on soda water, cigarettes and hypnosis." In my opinion the whole thing was just a publicity stunt. It is unlikely that he used hypnosis, too, because hypnotists are notoriously poor subjects; so any hypnotist who is adept in using autohypnosis is quite a rarity. Of course it is possible that Jack Wafer is that rarity—possible, but not likely.

Q. The hypnotic methods which you have in your book are too long for stage work. Because I saw a hypnotist put a subject to sleep in 30 maybe 60 seconds by using a quick method, I would be very glad if you would give me a short way to produce hypnosis.

M. G., Los Angeles, Cal.

A. I am afraid that you have missed the point of rapid hypnosis. There are several methods in my book suitable for stage work, but certain conditions must be observed before you can use them to advantage. I have a book in preparation at present, to be released in February, which deals exclusively and adequately with instantaneous methods. But in the meantime you could get substantially the same information by getting the last 5 issues of the Journal of Hypnotism, in which this book was serialized in condensed form.

Q. How can a person be made to develop Clairvoyance and Telepathy through hypnosis?

M. G., Los Angeles, Cal.

A. Sorry to disappoint you, but I have finally come to the conclusion after 20 years of experimentation, that hypnosis has no bearing on extra-sensory perception (telepathy and clairvoyance) at all. The findings of Professor Rhine and his associates of Duke Parapsycho-

(Continued on Next Page)

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## QUESTIONS AND ANSWERS

*(Continued from previous page)*

logy Laboratory seem to bear me out. A person either has or does not have these unusual abilities, and hypnosis cannot help develop them. Many hypnotists will jump on me for saying this, but it took a long time for me to reach this conclusion, much against my inclinations. But I must say that I have not found a single case of apparent psychic ability which, upon investigation, did not fold up like an accordion.

## DRAMATIZING THE HANDCLASP TEST



The above photo illustrates how Dr. Herbert Charles adds "punch" to the hand-clasp test. Note the forceful gaze he employs while the subject is obviously fascinated. Dr. Charles, a highly skilled hypnotist, is best known for his "Indirect Induction" methods.

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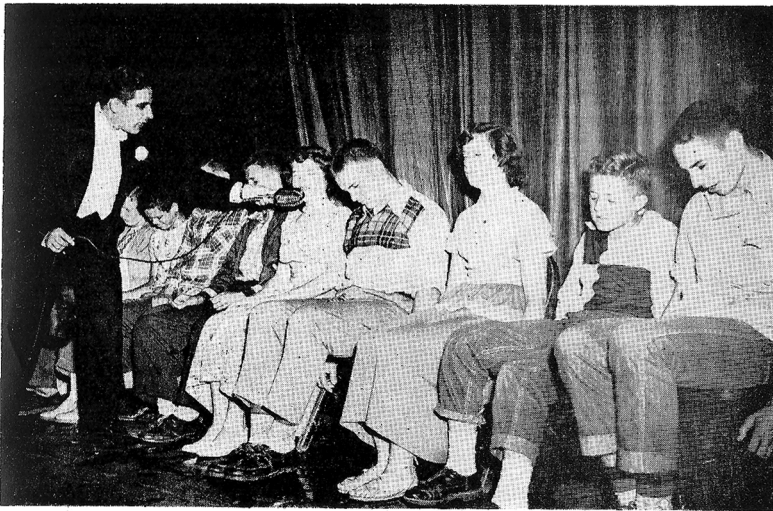
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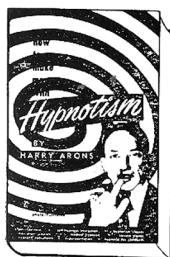
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