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Hypnotism Made Plain

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OF ANESTHESIOLOGY

HYPNOTISM MADE PLAIN

By A. M. Hutchison, M.D.

CHAPTER I

HISTORY OF HYPNOTISM

A few words are necessary to establish the genealogy of hypnotism, and in so doing to trace its connection with suggestion and with all modern mental treatment which is classed under the heading of psycho-therapeutics (mind treatment).

The phenomena of hypnotism or magnetism first became popularly known towards the end of the eighteenth century (1778), when Anton Mesmer, an Austrian physician, came to Paris, and under the patronage of Marie Antoinette practised the art of healing by magnets. Hence arose the term mesmerism or magnetism. Mesmer claimed that he effected his cures by the application of magnetic plates, amulets, rings, and collars, which were charged with magnetic fluid, and that it was in his power to direct the flow of the magnetised fluid through the body by means of manipulations and passes. Mesmer held sêances to which flocked people of all classes of society, among them many distinguished men and women of the court of Louis XVI. These sêances were held in a dimly lighted room to the accompaniment of music, the proceedings being directed by Mesmer himself clad in yellow robes and bear-

ing a wand in his hand. In order to facilitate proceedings on account of the numbers, a large magnetised tub or "baquet" was placed in the centre of the room, those desiring treatment being arranged round it in a circle and connected to it by means of iron wires capable of application to various parts of the body. In this way large numbers of people could be treated at the same time. Mesmer regarded crises or convulsions as a necessary part of the cure, and these were indeed only too easily produced in an atmosphere so surcharged with excitement. By degrees Mesmer and his work fell into disrepute, he himself was ridiculed in burlesque poems and songs, and finally the death-blow was given to his cures by the condemnatory report of a body of scientific men who had been appointed by the Royal Academy of Medicine to enquire into them. Mesmer therefore shook the dust of Paris from his feet. His teaching however was repressed in appearance only, and the French Revolution which followed soon after was the means of spreading it in several countries, in consequence of the forced expatriation of many of his devoted followers. Though it is the custom now to decry Mesmer as a humbug and an impostor, we cannot afford to forget that in spite of the errors of his teaching he was the first pioneer of all modern psychotherapy.

In 1784 a pupil of Mesmer, the Marquis de Puységur, revived his teaching, but carried out the cures in more normal and healthy fashion. The Marquis, a man of gentle and kindly nature, aimed at effecting cures not by con-

vulsions, but by magnetic sleep. It is reported that patients came to him from great distances, and were thrown into gentle sleep while seated round a magnetised tree in his domain, and that numbers went away relieved of various ills.

In more recent times there have been two rival French schools of hypnotism, represented respectively by Charcot and Richet at the Salpêtrière Hospital in Paris, and by Liebault and later by his pupil Bernheim at Nancy; Charcot and Liebault being now both dead. According to Charcot and his disciples, the hypnotic state is merely a manifestation of hysteria, and it with its accompanying phenomena of anæsthesia, catalepsy, exaggerated suggestibility, &c., can only be evoked in hysterical subjects. This view has been controverted and shown to be absolutely erroneous, not only by Liebault and Bernheim, but by all modern hypnotists, who have amply demonstrated the fact that these phenomena can be induced in perfectly normal individuals of both sexes, not only during the hypnotic trance, but to a certain extent in the waking state. We shall dwell upon this in greater detail in a subsequent chapter.

Liebault, the exponent of the Nancy school, may be regarded as the founder of all modern psycho-therapeutics, and to him is due the honor of having cleared this branch of medicine from the opprobrium which Mesmer's methods had unfortunately cast upon it.

Liebault settled in Nancy in 1864 and for twenty years worked quietly, simply, and ignored by the medical profession at his dis-

pensary, which was daily thronged by crowds of suffering people. He was beloved by his poorest patients, and to this fact doubtless he owed much of the wonderful influence he exercised over their diseases. He would accept no fees, lest it should be said that he practised hypnotism in order to make money. It is reported that he said to his patients: "If you want drugs I will give them, but you will have to pay me; if you will allow me to hypnotise you, I will do it for nothing."

Liebault's contention was that it is suggestion that induces this so-called hypnotic sleep and the phenomena evoked during it, and not either a magnetic fluid or the psycho-physical effect of concentration of mind and eyes on a bright object. This latter theory, as we shall see later, had been already advocated by Braid. Therefore in order to induce hypnosis, Liebault availed himself of neither manipulations nor of fixation of the eyes on a bright object, but instructed the patient to gaze steadily into his eyes, whilst he suggested the phenomena of sleep in detail: "Your eyelids are heavy; you can hardly keep your eyes open," and so on. Having by this means induced sleep, he proceeded to give curative suggestions which varied according to the malady of body or mind to be treated.

To Bernheim (1882), a pupil of Liebault, is due the honor of having realised the value of the work that was being done so quietly and unobtrusively at Nancy, and of having made Liebault and his work known to the world. Bernheim has still further modified the teach-

ing of Liebault by pointing out that the phenomena of anæsthesia, suggestibility, &c., which the latter regarded as being peculiar to the state of hypnotic sleep, can be induced with equal readiness during the pre-hypnotic or slightly drowsy state. Bernheim has thus advocated and carried out treatment by suggestion without the previous induction of deep hypnotic sleep, and in this many have followed his lead, adopting it as the basis of modern psycho-therapy. Even this method has been still further modified, due to the teaching of Dr. Dubois of Berne, so that now persuasion by clear and convincing reasoning in the waking state and without hypnotism has taken its place as a branch of modern psycho-therapeutics.

We thus see that the term psycho-therapeutics must be accepted as covering several forms of treatment: suggestion during the hypnotic sleep, suggestion in the pre-hypnotic or slightly drowsy state, persuasion in the waking state, and we might add, re-education in its various forms.

We must now turn our attention to the work of various English physicians who during this same period were doing pioneer work in England on the same lines as those of the French workers, and with the same opposition. The first name of note is that of John Elliotson, who was led to interest himself in mesmerism in 1837 through the influence of a French nobleman, at whose house leading members of the medical profession had met, to witness various experiments. Elliotson was at that time

one of the foremost physicians in London and President of the Royal Medical and Chirurgical Societies. He availed himself of his position on the staff of University College Hospital to use mesmerism in treating patients suffering from various diseases, and had special success in treating hysteria and allied nervous states. Soon, however, a storm of opposition was raised by his colleagues, who heaped ridicule upon him and finally made matters so uncomfortable, that Elliotson was called upon by the hospital authorities to desist from using mesmerism. This he refused to do and was therefore forced to resign his position as hospital physician. He continued however to use mesmerism in his private practice, and widely spread his views with the help of several sympathisers, by the publication of a journal, the *Zoist*, which continued to appear quarterly for thirteen years.

James Esdaile, a surgeon in the service of the East India Company, was led in 1845 to interest himself in mesmerism by reading of Elliotson's work and views in the *Zoist*. He was at that time in charge of the native hospital at Hooghly, and welcomed the use of mesmeric sleep for operative work, chloroform being then unknown. As a result of the great success which followed his first attempt he was able to report seventy-five painless operations to his Medical Board, who however ignored the letter. Later, after an investigation of his work by a specially appointed committee, he was placed by Government in charge of a larger hospital at Calcutta. In spite

of his splendid success here, and in spite of an influential petition testifying to this and praying that the hospital should remain open, it was at the end of a year closed by Government. Esdaile continued his work in a hospital which was specially opened for him by numerous Indian admirers and sympathisers. At the end of six months however, Government once again appointed him to the Sarkea's Lane Hospital in Calcutta, and he continued to work there, doing thousands of painless operations, till he left India in 1851. Esdaile's closing years, after his return to Scotland, were saddened and embittered by the antagonistic attitude of the medical profession and by the refusal of medical journals to publish the results of his operative work under mesmerism.

There is yet a third name of note to be mentioned, that of James Braid, a surgeon of Manchester, whose pioneer work, begun in 1841, was of great value as it concerned itself not only with the practical application of hypnotism, but with an attempt to study and understand its phenomena. It was as a result of his work that in England the word mesmerism now gave place to hypnotism, from hypnosis—sleep. Braid was unfortunately regarded by Elliotson and Esdaile as an opponent because he maintained that the phenomena of hypnotism were due neither to the action of magnets nor to any peculiar fluid or force.

Braid discovered that hypnotic sleep could be induced in a patient by causing him to fix his eyes intently on a bright object held at a short distance above the head, with accompany-

ing concentration of the mind on the same object. He also noted that the depth of the sleep varied in different people from slight drowsiness to a state of complete unconsciousness, and suggested limiting the term hypnotic sleep to those cases where on awakening entire forgetfulness of all that had transpired during sleep was acknowledged. Braid laid the foundation of the theories elaborated later by Myers and Carpenter, in which an attempt is made to explain the phenomena of hypnotism by an acceptance of the view of subliminal consciousness. Like his predecessors, Braid received but small encouragement from the medical profession in this country, but was held in high honor by the German workers who were at this time interesting themselves in hypnotism and in its practical application in medical practice.

Among the German pioneers of note must be mentioned Heidenhain, a contemporary of Braid, Krafft-Ebing, Preyer and Eulenburg, Wetterstrand, and more recently Forel and Moll, but it is not within the compass of this small book to take special note of their work.

At the present time treatment by hypnotism is fully recognised on the Continent as a branch of medicine, and dispensaries exist in France, Germany, and Switzerland where such treatment is given at popular prices. In Britain no such dispensaries have yet been opened, but the use of hypnotism has spread greatly in private practice, and in most of the large towns in England one or more hypnotists may be found. A society exists, the Psycho-Medical Society, whose object it is to unite all workers

and to further the study of hypnotism both from the scientific and the practical side.

CHAPTER II

METHODS OF INDUCING HYPNOSIS

Modern methods of inducing hypnosis are based upon either the method of Braid or that of Liebault, or a combination of the two, and vary according to the individuality of the hypnotist. Some hypnotists still in certain cases employ passes to endeavor to deepen hypnotic sleep, when such deepening is deemed necessary for treatment.

These various methods may be classed as (a) Physical methods and (b) Psychical methods, though in ordinary practice, as we have seen, such varied combinations of the two are used, that a rigid classification is not always possible. Among the Physical methods we might include all those where sleep is induced by holding a finger or any bright object at an uncomfortable angle above the eyes, the operator meantime stroking the patient's forehead and suggesting sleep; or again, the employment of any form of revolving clock which induces sleep by its continuous monotonous noise in the same way that waves breaking on the seashore or the throbbing of the ship's engines at sea have the power to do; or again, the employment of Luy's revolving mirror, a modification of the bird-catcher's device for hypnotising and snaring birds, which doubtless owes some of

its efficacy to the directions and suggestions which are given during its use. Passes may also be included here, and it may not be amiss to give a word of explanation about them. Passes are commonly used to test a person's susceptibility to hypnosis. In order to do this the operator places himself at the patient's back, and slowly makes passes with both hands from the back of the head to end of the spine. This causes in many people a distinct inclination to sway backward, which is accepted as a positive indication. When using passes with the purpose of inducing hypnosis, it is customary to first place the patient in a relaxed position on a couch, and then to draw both hands from the crown of the head over the pit of the stomach to the feet, avoiding actual contact. These movements are repeated until drowsiness is induced, this drowsiness being in some people accompanied by a sensation of warmth and prickling.

Under Psychical methods we may include all modifications of Liebault's method, which was as follows: The patient was placed in an arm-chair, instructed to think of nothing and to gaze at the operator. In this way attention was arrested. The phenomena of sleep were now suggested in detail, and if the eyelids did not close spontaneously, they were closed and the following suggestions were given: "Your eyelids are heavy; your limbs feel numb; you are getting more and more drowsy," &c. This was continued for a minute or two till the desired degree of drowsiness was induced.

In all attempts to induce hypnosis for sug-

gestion treatment we would emphasise the following points as being of importance:

It is necessary that all fears and nervousness on the part of the patient should first be dissipated by a frank and friendly talk, and that the operator, by the exercise of all the tact, sympathy and insight at his command, should not only create a sympathetic atmosphere, but should make the patient feel that he has command of the situation, and is capable of not only entering into the peculiar difficulties of each case, but is also confident of being able to give the help which is sought. The further object of such a talk is to allow the operator to grasp the patient's character, so that he may not only get at the causes which the patient puts forward as being responsible for his illness, but may read for himself the deeper causes of defects of temperament and character—the fundamental causes so to speak, which must be attacked if a permanent cure is to be attained.

It is customary to insist upon monotonous environment and absence of noise as necessary to induce hypnosis. While we fully realise that in most cases these are of great help, it has on the other hand been our experience that the majority of patients if instructed to disregard noises are fully capable of doing so, and that deep hypnosis can be induced amid the clatter of pots and pans in a poor dwelling.

It is of the utmost importance to instruct the patient how to relax his limbs and his whole body, even to unclenching his jaw, and to do this in some little detail, so that he may realise

the importance of practising such relaxation for himself. There is no doubt that many of us, by our inability to relax our muscles and joints, rob ourselves of some of the rest which we so greatly need in this life of rush and hurry.

Of equal importance is it to instruct the patient how to relax his mind, either by attempting to cut off all inflowing thoughts and to make his mind as nearly as possible a blank, or by letting the mind dwell drowsily on a pleasant thought or on the details of a pleasant scene.

These points having been attended to, it is customary and helpful to prepare the patient still further by explaining that gradually as he continues to steadfastly gaze at the operator's finger, his eyelids will become weighted and tired, a sensation of heaviness will pass over his body, and he will finally feel impelled to close his eyes and to rest. Attention is then arrested by making the patient fix his eyes on the operator's fingers and the preceding directions are repeated. It has been found that stroking the skin of the forehead and temples is in most people of great service in quieting any nervousness or excitement and in inducing a state of drowsiness.

Hypnotic sleep is a means to an end, which is the giving of suggestions suitable to the disease for which treatment is sought. As we shall see in a later chapter hypnosis greatly increases the suggestibility of the patient and so facilitates the work of cure. During this passive state of body and mind the working of the conscious mind is for the time being in

abeyance, and suggestions penetrate direct to the subconscious mind and are received and acted upon.

Varying figures are given in estimating the percentage of people who are hypnotisable, some estimating these at 90 per cent, others at 10 or 20 per cent; these differences being however readily explained by the fact that the one estimate includes cases showing every degree of sleep, while the other refers to cases of deep sleep only. It is calculated that only about one person in every ten reaches the state of deep sleep or somnambulism.

There have been numerous classifications of the stages of hypnosis, but for present purposes it will be sufficient to give the short practical classification of Forel.

1. Somnolence or sleepiness, in which the influenced person can resist suggestions and open his eyes.

2. Light sleep, in which the eyes cannot be opened and obedience to suggestions is obligatory, but there is no loss of memory on awakening.

3. Deep sleep or somnambulism with amnesia (loss of memory), and fine post-hypnotic effects.

The first stage is as a rule all that is required for medical treatment, and with this degree of hypnosis alone, many cases of marked benefit and cure have been reported. So slight are its effects, that it is common for those who have experienced it to maintain that they have not been in the hypnotic state, as they heard and remembered everything that was said

though they were conscious of a quieting and soothing influence. Two points may be mentioned which differentiate this slight state of hypnosis from ordinary restfulness: (a) that during it the patient shows an extraordinary immobility, making no movement of his limbs nor attempting to change his posture, and (b) that during it suggestions are accepted and acted upon which were not accepted in the waking state.

It is so commonly believed that people can be hypnotised against their will, that we feel it necessary to state clearly that this is not so, and that on the other hand any resistance on the part of the patient must first be removed—he must, so to speak, be encouraged to give himself up—before the operator can hope for success. Equally erroneous is the belief that susceptibility to hypnotic influence is the sign of a weak will, the truth being rather that the best subject for hypnosis is the person who is willing to be hypnotised, who has the intelligence to understand what is asked of him and the ability to concentrate his mind upon it. Insane people are for this reason notoriously difficult to hypnotise, since they are quite unable to concentrate their attention upon the desired train of thought and action. The idea that it is possible to learn to hypnotise oneself is novel to most people, but Dr. Hollander has shown that many people do this habitually without their own knowledge, and that the “vacant” state with which some of us are familiar in ourselves and from which we are conscious of suddenly rousing ourselves with

a start is but self-hypnotisation. The practical value of the point is that one can cultivate such a tendency by placing oneself in a relaxed position, until one gradually drops into a state of what Dr. Hollander calls "fascination," and that one can utilise such a state for allowing helpful self-suggestions to sink deeply into the subconscious mind.

What is hypnotic sleep? and what is its relation to natural sleep?

To the first question no satisfactory reply has yet been given, and this is hardly to be wondered at when we think that similarly no adequate explanation can be given of ordinary sleep. Hypnotic sleep in some points is very dissimilar from ordinary sleep, but in other respects shows great resemblance to it. It can be induced by suggestion alone at any hour of the day, and is quite independent of fatigue or physiological changes in the brain such as make ordinary sleep a necessity for every person. During it consciousness is never entirely lost, although there may be complete amnesia on waking, and this fact is proved by the ready response to commands given by the operator to be executed either at the time or later. Ordinary sleep on the other hand is so deep that consciousness is entirely lost, and it is not only impossible to have commands carried out, but the phenomena of hypnotism (catalepsy, anæsthesia, &c.) cannot be elicited. We have a great point of resemblance between hypnotic and ordinary sleep in dreams and in sleep-walking. It would seem that in both there is a great heightening of the faculties, with

ability to perform feats which are beyond one's power in the waking state, as we shall see in Chapter III. This heightening of the faculties can be more readily demonstrated in the hypnotic state, as the subject though apparently asleep, responds to commands given with the purpose of eliciting such a heightening, and by means of post-hypnotic suggestions we can still further amply prove its existence.

The great value of hypnotic sleep lies in the fact that during it there is a state of heightened suggestibility, and that the conscious mind being in abeyance, suggestions are accepted without criticism by the sub-conscious mind and are put into action.

A few words may be said here about the dangers of hypnotism. The argument most commonly used against hypnotism by those who have no knowledge of its medical use, is, that a hypnotist acquires complete control over his subject, destroys his will-power and reduces him to a mere automaton. The aim of all hypnotic medical treatment, however, is to develop and strengthen not only a man's will-power but his whole moral fibre, so that he is enabled to rid himself of slavish habits which had previously mastered him. This will be clearly shown in Chapter VII. to be not only the aim but also the practical outcome of hypnotic medical treatment, as shown in the results of drink cases and also in those illustrating re-education, where slavishness to thoughts and emotions has by constant effort and practice given place to an increasing mastery over them. Our disputant may then argue that while this is quite

possibly the case as regards the medical use of hypnotism, it is nevertheless true that there is nothing to prevent unprincipled people from using it for the perpetration of crimes. To this we reply, that in order to avoid any such risks, it is the duty of the State to limit the use of hypnotism (as it has already limited the use of chloroform), so making its employment for public entertainments illegal and limiting its use to purposes of re-education by those duly qualified to exercise it.

As regards the element of danger which may in the lay mind be associated with hypnotic sleep itself in its deeper forms, we would point out what has been already mentioned, that light hypnotic sleep is now preferably used for medical treatment by all hypnotists, the deeper sleep being induced on rare occasions only. Even though it were customary for hypnotists to use deep hypnotic sleep without reservation, this supposed risk is negligible in comparison with that associated with the employment of chloroform. In spite of every care and precaution in the administration of chloroform, no one attempts to deny the element of risk in every case, the existence of such a risk being brought home practically by an occasional death, whereas not a single death has been reported during hypnotic sleep in spite of the fact that it has been extensively in use since the eighteenth century.

CHAPTER III

PHENOMENA OF HYPNOTISM

We propose now to consider the main phenomena observed during the state of hypnosis,

and following the lines of Bernheim, to attempt to link these with phenomena closely analogous to them which are observed in everyday life. In doing this we fully realise that deep hypnotic sleep is a thing by itself, resembling ordinary sleep in some points, but quite dissimilar from it in other points, and that no theories succeed in explaining it satisfactorily. In spite of this we feel that it is both interesting and helpful to realise that many of the phenomena of hypnotic sleep have their parallel in everyday life. Hypnotism is thus robbed of some of its mystery, greater encouragement is given to use persuasion in the waking state whenever such is practicable, and treatment by hypnotic sleep is held in reserve for selected cases. We hope to bring out this point more clearly in the chapters on Suggestion and on Education.

Catalepsy or rigidity is a striking phenomenon of deep hypnotic sleep. If the arm of the hypnotised person be raised it often remains raised when the operator's hold is released. Should this not happen at once it suffices for the operator to grasp the arm firmly, raise it again and suggest that it will remain upraised, that the patient is in fact unable to lower it, when such a position will be maintained for from twenty minutes to half an hour without any appearance of strain or fatigue. The arm is then extremely gradually lowered and brought to rest on the couch. The patient may also be placed in an attitude expressive of fear, anger, or other emotional state with a like result, or rotatory movements of arms or legs may be started, which are kept up for a con-

siderable time. Any of these movements may be interrupted by a suggestion from the operator that the subject is unable to make them. The more frequently a subject has been hypnotised for scientific experiment, the more readily and quickly does he respond to these suggestions. In hysterical patients such a condition of rigidity of the limbs is frequently induced by self-suggestion, and without any hypnotic interference.

Under what circumstances is the phenomenon of catalepsy seen in everyday life? It is a common experience that should a patient's hand or arm be lifted while conversing ordinarily, it frequently remains upraised when the supporting hand is withdrawn, as if the fact of having had the arm lifted had acted unconsciously upon the patient as a suggestion to keep it in that position. Further, it is the experience of all hypnotists that nine people out of ten seldom if ever "relax" except in sleep, and are quite unaware of the truth of this fact until it is proven to them by the operator's ineffectual attempts to induce full relaxation. To test relaxation one has only to grasp the patient's hand and arm, while requesting him to let them go so that they may be bent, raised, or put through any movement the operator may desire. The average person is quite unable to give up his arm in this way. If one suddenly withdraws one's hand while the arm is raised, it remains stiffly in the air; if one then attempts to lower it, one does so against a certain amount of resistance.

Other and possibly more familiar instances

of catalepsy in everyday life are seen occasionally under the influence of strong emotion, though here it generally only lasts for a few seconds. One may thus under the shock of a strong emotion remain petrified and immobile, while in the middle of performing some action, or "paralysed by fear" as we say, we may fail to act at the critical moment in an emergency.

Just as catalepsy may be induced by hypnotic suggestion, paralysis of any limb may similarly be induced, the arm or leg remaining at the command of the operator flaccid, inert, and incapable of performing any action. A patient may similarly feel powerless to open his eyes, should it be suggested that he is incapable of doing so, until permission is given by the operator.

In the deeper stages of hypnosis the patient entirely loses consciousness of the outer world, he hears and obeys the operator alone and on waking has partially or completely forgotten all the incidents of his sleep. This phenomenon of deep sleep is called *somnambulism*. In spite of loss of consciousness the patient's eyes may remain open; he will rise, walk, and carry out all commands given by the operator, and will answer when spoken to by him, but fails to reply to any other person. This is called being *en rapport* with the operator; and if the patient is being hypnotised for medical treatment, it is customary for the operator to suggest that no other person will have the power to hypnotise him unless he expressly desires it. This state of deep sleep is still for us shrouded in mystery, and therefore of intense interest,

but we have so far but very limited powers of understanding what it really is.

It is during this deep sleep that many subjects show themselves extraordinarily susceptible to hallucinations, and consequently afford much merriment at a public show by responding to any suggestions, even the most farcical and ridiculous if given by the operator. Needless to say all experimentation which aims at the ridiculous has no place in the medical use of hypnotism.

Somnambulism has its counterpart in sleep-walking. A sleep-walker, as we know, is capable not only of wandering about from room to room, but of doing many strange and even dangerous actions in a state of entire unconsciousness, and of these actions he has no recollection whatever on awakening the following morning.

During the state of deep sleep it is common for patients to show an entire insensibility to pain, for which insensibility the term *anaesthesia* is used. So complete is it that a pin may be pushed through the skin in any part of the arm without the slightest movement from the patient, and on awakening he finds it impossible to believe that this could have been done without his knowledge. We have already mentioned how Esdaile and others took advantage of this marked anæsthesia in pre-chloroform days to carry out large numbers of major and minor operations. In recent times tooth-extraction has been painlessly done on more than one occasion with the aid of hypnotic sleep. This anæsthesia can also be induced by

suggestion in the state of light sleep, when the patient is fully conscious, and has allowed of tooth-extraction being done so painlessly that only the sight of the extracted tooth has carried conviction to the patient.

It is a well-known fact that such profound anæsthesia is constantly noted in cases of accident, when cuts or graver injuries are sustained and where consciousness has never been lost. The injured person will maintain that he felt no pain at the time of the accident, and that the presence of blood was the first indication that he had of his injury. It would seem that in these cases the sudden shock paralyses sensation, since such injuries if inflicted in cold blood could not have been borne without great suffering. We believe that similarly the martyrs, as a result of the state of intense exaltation into which they fell in anticipation of martyrdom, were to a great extent oblivious of their physical injuries and sufferings. We have also the classical instance of Archimedes, who was found in his tower all unconscious that he had been mortally wounded and that his life-blood was flowing away, because of the intense concentration of his mental faculties in working out the solution of a deep problem. Hysterical persons on account of their extreme suggestibility are capable of producing areas of anæsthesia by strong self-suggestion, and may show a complete insensibility to deep pin-pricks over these areas.

As regards the other special senses, it is similarly possible during the hypnotic state to render a person incapable for the time being

of exercising his faculties of seeing, hearing, tasting, or smelling, except in so far as the operator allows him to do so. At the command of the operator strong ammonia may be pronounced to be odorless, a bitter drink may be accepted as tasteless, and any article of furniture or a person in the room may for the time being be non-existent for the patient.

Many such symptoms of an unhealthy type can be and are produced by strong self-suggestion in hysterical patients, and considerable skill and even strategy is often necessary on the part of the doctor to differentiate between a case where there is a genuine physical cause for them and that where no such cause exists. It may be necessary sometimes to trap a patient into betraying himself when he is off his guard, and so to convince him of and destroy his self-suggestion.

Another well-marked feature of deep hypnotic sleep is the readiness with which in some people we can create *illusions* and *hallucinations*. An illusion may be defined as a wrong interpretation of an existing object. One may thus offer a patient a glass of water as a glass of wine. He will sip it and taste it as if it were not water but in reality wine. A hallucination is the perception of an object where none exists. Thus one may offer a patient an imaginary glass of wine, which he will drink with the utmost gravity as if he really had in his hand a glass of choice wine. One may induce a very suggestible subject to play a varied role of characters with the skill and the art of an actor. At one time he is a child of six play-

ing games with imaginary children and with imaginary toys; at another he is the bashful young girl of sixteen, and at still another a general at the head of his forces.

The carrying out of such experiments is of course only justifiable when its object is to arrive at a fuller understanding of the phenomenon of hypnotic sleep.

The parallel of these phenomena in everyday life and in sleep is extremely interesting, and can be readily illustrated. If we are accustomed to regard a certain blend of tea as superior to any other, is it not true that many of us are quite capable of imagining these qualities to exist in an inferior blend, should we be under the impression that we are drinking the superior blend? If a patient is convinced that a drug called calomel invariably upsets her, one need in certain cases only call it subchloride of mercury and all the disagreeable effects vanish as if by magic, because the patient believes a different drug has been prescribed. Once again, how explain the magical effects of some patent medicine tonics, when we know, thanks to recent investigations, that many of them contain a farthing's worth of drugs? Is the person who drinks such a tonic and finds himself rapidly improving in health, in any different position from the hypnotised person who sips and enjoys a glass of water under the impression that it is a choice wine?

Dreams afford many instances of illusions and hallucinations. Our dream self, our subconscious self, lives through many imaginary scenes, acts many imaginary parts, and some-

times acts them with such intensity that we awake in terror from a gruesome nightmare, or in laughter over some amusing incident, or in tears over a tragic occurrence. Even in day-dreams we often live through past or future scenes, seeing places and people almost as clearly as if they were really existent, and sometimes so vividly that we awake with a start to realise that these were mere hallucinations.

We must now discuss the question of *post-hypnotic hallucinations* and suggestions in regard to their importance in medico-legal cases. Post-hypnotic hallucinations are such as retain their hold on the subject after he has been awakened, and which can only be dispelled by re-hypnotising the patient, and suggesting contrary ideas. A hypnotised person may thus be made to believe that he has been robbed of his purse, or that he has been witness of a terrible crime, the details of which he is made to see. If questioned about these after waking, he will describe the details with the utmost confidence and would be capable of giving evidence to that effect in a court of law.

It is familiar to us all how readily some people can similarly fabricate the details of a scandal, can so to speak create for themselves the hallucination of a scandal, every incident of which they believe themselves to have seen. For this it suffices simply that some one person should rest under slight suspicion, that a slight rumor should be set afloat, and ere long idle onlookers create the details which are wanting, and which they implicitly believe they have

founded on fact. Nowhere are more striking instances of this seen than in law courts, when an attempt is made to sift evidence. It is a well-known fact that a clever counsel may lead a witness into accepting and affirming most contradictory statements, by merely suggesting with an air of conviction that certain events had or had not been witnessed by him.

In carrying out experiments to test this matter, it has been found that in order to convince some people that certain things have been done or witnessed by them, it is only necessary to continue to insist strongly and with conviction that such is the case in order to succeed in the end. Cannot most of us recall occasions when it has been so insistently suggested to us that we had done a certain thing, that in the end we have hesitated, doubted, and wondered whether after all we might not have done it and quite forgotten the fact?

It will be interesting to dwell at this point upon another phenomenon of the deep hypnotic state, which has a very practical application in all medical treatment by hypnotism. This is the phenomenon of *post-hypnotic suggestions*.

These are suggestions given to the patient during the hypnotic sleep, to take effect after the lapse of a certain interval of time, it may be hours or days or weeks. It has been shown that in certain subjects specific commands can be given which are executed with the greatest exactness, though the subject is himself quite unaware why he has done the action, and if questioned may attempt to explain it away or maintain that he did it of his own accord.

Many experiments have been carried out by Dr. Milne Bramwell and others on the following lines. It was suggested to a woman of poor education that after the lapse of so many thousand minutes she would write on a piece of paper her name, the hour of the day and the date. At the appointed time she noted name, hour and date as commanded, in spite of the fact that she was mentally incapable of calculating the time. Other subjects were commanded to deliver messages at a fixed time at a certain house, and they too succeeded, in spite of obstacles purposely put in their path, in carrying out these commands.

The working of these post-hypnotic phenomena can only be explained by allowing for the existence of a subconscious self which receives the command when the conscious self is asleep, and at the appointed time causes the conscious self to execute it. Thus we may before falling asleep *will* ourselves to wake at a certain hour, when we shall either wake exactly at that hour or pass a restless night in our endeavor to do so. Similarly, we may promise to do a certain thing, and then go upon our way and apparently forget our promise. But some days later, for no reason that we can understand, the remembrance of the promise suddenly comes back to us in much the same way as a hypnotic command which has been heard and forgotten.

The practical value of post-hypnotic suggestions lies in their bearing on medical treatment by hypnotism. Thus a person suffering from sleeplessness may be given very definite directions as to the hour at which he will get drowsy

and the number of hours which he will sleep. In some cases these suggestions are responded to literally, in other cases a gradual improvement in sleeping occurs. Similarly, definite suggestions may be given in a case of obstinate constipation to act later in the form of a post-hypnotic suggestion, and so to lead after a few treatments to the complete cure of the constipation. The various secretions may be influenced on the same lines, and so appetite and the ability to digest any food can be successfully suggested in a person suffering from loss of appetite and who may have refrained from solid food for weeks or months. Again, a patient's entire character may be modified by suggesting an entirely new set of ideas and a new outlook, these suggestions gradually forming more and more of the patient's waking thoughts and so modifying and changing his life.

Amnesia or forgetfulness, which, as we have seen, is a phenomenon of deep hypnotic sleep, is of peculiar interest, not only because of its parallel in the waking state, but because of its bearing on the interesting question of loss of memory and of dual or *multiple* personality. *

In deep hyynotic sleep, as we have seen, a subject may do extraordinary things and act various rôles, and yet have no remembrance of this on awaking, or only a partial and hazy remembrance. On being re-hypnotised, however, he recalls the minutest details of these acts. We frequently find as regards our dreams, that we entirely fail to recall them on awaking, or that we can only recall them in a disconnected

and confused fashion.

Again, we may perform a certain action with our thoughts perhaps concentrated on other matters, and then be quite unable to recall whether we have done it or not. Perhaps the most interesting instances of this phenomenon are furnished by sleep-life as recorded in several well-known cases. It is known that on more than one occasion feats have been performed during sleep which were beyond the waking powers of the individual and of which no recollection remained on waking, and only the evidence of actual work done carried conviction. Thus Paganini woke one morning to find his famous *Sonate du Diable* written in score by his bedside, and attributed this, as the title of the piece shows, to the devil. Problems which have baffled the intelligence in waking moments have sometimes, so to speak, solved themselves during sleep, and these may be either mathematical problems or problems of daily life and conduct. So familiar are we with this fact that we often deliberately decide to "sleep over a thing" before acting, and awake often to find some solution presenting itself clearly to our mind.

As regards sudden loss of memory, we have instances, well-authenticated, mysterious and interesting, of people who have suffered a sudden loss of memory with complete obliteration of their own personality and life up to that point. In this state they may travel to a distant town, settle there under an assumed name, and continue to carry on business in a perfectly rational and normal way for months or years.

Then one day memory returns with the same suddenness that it vanished, and the unfortunate person can give no explanation of how he comes to be in these unfamiliar surroundings. Strange, too, is the fact that with loss of memory a totally different character often shows itself, while with the return of memory the former character reasserts itself. Such a phenomenon has been called dissociation of personality, and of it we have many instances in hysteria and in a modified form in daily life. Instead of the individual showing himself a united whole of ideas, feelings, and mental states, one idea, feeling, or mental state may be split off or dissociated and may for the time being most unduly and unnaturally dominate the individual's life. In hysteria an emotional cause most commonly determines such a dissociation. The most familiar instance of such a dissociated personality is that of Férida reported by Dr. Azam of Bordeaux.

At the age of thirteen Férida changed from a bright, active girl into a reserved, melancholy and suffering creature, and had already been three years in this state when she first came under the notice of Dr. Azam. From time to time, after what might be called a slight faint, she suddenly resumed her original character for varying periods, while losing no recollection of her second character. But on relapsing into her old state of melancholy and suffering she invariably lost all recollection of her bright and happy periods. Fortunately for Férida, as life went on state No. 1, which we might call her normal state, predominated more and more,

and practically filled her life. In slighter degree we have numberless such instances of alternating personality in everyday life. Just such a dual personality has Stevenson portrayed in *Dr. Jekyll and Mr. Hyde*: Dr. Jekyll, the respectable and much respected West-End doctor, and Mr. Hyde, the creature more beast than man, who, transformed by a drug, grovels in his laboratory, drawn to his bestial state as irresistibly as the drunkard to his drink. Have we not a similar alternating personality in the man or woman addicted to drink or drugs. The sober man, freed from the influence of drink, shows himself a respected business man and an exemplary husband and father; the same man under the influence of drink being, like Mr. Hyde, more a beast than a man. Do we not also recognise these dual or multiple personalities in ourselves, strongly marked in some, less strongly marked in others? Thus we speak of our "better self" and our "worst self." Some of us have many sides to our character, and though we are fortunately able to regulate them as a rule in a unified whole, any profound shock or emotion may in a nervously unstable character lead to a dissociation of any one side, which will then predominate for the time being as our character. Fortunately such dissociated mental states are often transitory. Dissociations of personality may also lead people to journey as the prodigal son did, into a far country, where after a time they "come to themselves" and cannot explain what led them there.

In no direction has more valuable service

been rendered by the use of hypnotism than in the unravelling of these mysterious states of loss of memory and of dual and multiple personalities. In cases of loss of memory it has been found possible during the hypnotic sleep to revive memory as regards the details of the former life, and to obliterate the second phase of existence, so allowing the person to resume his former life. As regards dual personalities and allied states, invaluable work has been done by eliciting from the person, during hypnotic sleep, the details of the shock or emotional state which had determined the dissociation and which it was often found impossible to elicit in the waking state. Such work has brought out the fact that the real cause had often to be sought in the subconscious life, in buried and possibly disagreeable memories of childhood. Once these are brought to light, talked over and viewed in their proper proportions, and their bearing on the present illness made clear, it is possible in very many cases to unify the dissociated personality and build up a normal controlled life.

CHAPTER IV

SUGGESTION

Suggestion has been variously defined as "A successful appeal to the subliminal self" (F. W. H. Myers); "A process of communication of an idea to the subconscious mind in an unobtrusive manner carrying conviction, when consciously there is no inclination for its ac-

ceptance and logically there are no adequate grounds" (Hollander); or, "The aptitude of the brain to receive or evoke ideas, and its tendency to realise them and to transform them into acts" (Bernheim).

Suggestion is thus associated with the subconscious mind, and as a great part of our life is subconscious, suggestion is at work in innumerable ways at almost every moment of the day. We are constantly receiving suggestions, many of which may lie hidden and apparently lost in the subconscious mind and yet be hourly and daily shaping our characters. These may eventually lead to acts of great importance. We can prove this to ourselves by tracing back and back, to an almost forgotten impression of childhood perhaps, some of the feelings which dominate our lives. As we are most open to suggestion during childhood, it follows that the impressions stamped upon a child's life are often of momentous importance, and this will therefore be further discussed in the chapter on Education.

Let us in some detail go into the working of the conscious and of the subconscious mind, or borrowing the phraseology of the author of *Body and Soul*, we may speak of them as the Overmind and the Undermind; the Overmind, for our present purpose covering everything which we are accustomed to speak of as Voluntary or conscious thought or action, and the Undermind covering involuntary or subconscious action and the whole domain of subconscious thought. The necessity for differentiating our self into a conscious and a sub-

conscious element arises from the fact that so much of our life is lived below the threshold of consciousness. There are many sensations, thoughts and emotions which do not mingle in the current of our everyday life, and which yet influence and direct it to an extent of which we are only partly aware.

In dreams, in delirium and in insanity this subconscious element sometimes reveals itself in strange and startling fashion. It is doubtless true that much of what is submerged in our minds and which we have inherited from ancestral times, existed then above the threshold of consciousness, and that so there is a constant shifting of threshold. The undermind or subconscious mind controls actions which are done by habit, in some cases by habit learnt since birth—walking, talking, &c., in other cases habit which we have acquired before birth, as a result of its exercise by generations of ancestors—digestion, respiration, &c. The undermind can work entirely independent of the overmind, as instanced by the constant action of the heart or stomach, without our conscious knowledge, or the overmind may interfere by the action of various thoughts. Thus worry may interfere with the manufacture of the digestive juices, upset the digestive action, and the first intimation that this has occurred is the danger signal of pain. Again, thoughts of fear traveling down the nerves to the heart may upset its normal unconscious action by causing violent palpitation, or they may even in rare cases entirely arrest its action and so cause death. Let us

consider very shortly the general arrangement of the nervous system and its connection with the blood-vessels, organs, &c. The human body is covered with a network of nerves, which are connected with every organ and with every tissue in the body, these nerves being united in the lower brain, and from there connected with the cortex or outer surface of the brain. The brain itself consists of millions of cells in which our thoughts and memories are registered, while from them messages are constantly being sent out by the nerves to control the working of the body and the mind. The seat of the undermind is in the lower brain, and the seat of the overmind in the cortex, the overmind having the power to control the undermind, though for the most part the latter is capable of working independently of the overmind. Further, this system of nerves called the Central Nervous System, because connected with brain and spinal cord, is linked with a second system of nerves and works in partnership with it. This latter is called the sympathetic system, and it specially controls the bloodvessels and the various secretions of the body. In physiological language it is easy, perhaps too easy, to give satisfactory and understandable explanations of how this dual system of nerves works in conjunction with the brain: how it is able to alter the blood flow constantly, now to concentrate it specially in a muscle or group of muscles to produce muscular action, again in the stomach to produce the juices necessary for the digestion of the food, yet again in the

brain to work out some difficult problem. But if we leave the domain of physiology we find ourselves utterly unable to explain *how* these daily miracles are worked. We ask ourselves *how* does a thought travel along these nerves? *how* has it power to alter the flow of the blood so that a thought of shame has the power to cause a sudden rush of blood to the face? and we have no answer to give. We ask ourselves again, *how* is the process of thought carried on by these millions of brain cells, how is it possible that no memory is ever lost, but is stored in our subconscious mind, from which we are sometimes able to evoke it either by a conscious effort of the will, or with the help of another, while we are in a slightly hypnotic state? How is it that these thoughts which we think, and that these memories which we have stored in the subconscious mind, are capable of modifying the outlines of our faces or altering the expression of our eyes or changing the tones of our voices? Is it not true also that thoughts lead often to most characteristic attitudes and gaits, and that it is sometimes so easily possible to read the salient points in a man's character by a study of his back view in motion, that we have no need to see his face? Old age alone does not bow a man down, thoughts of sorrow or shame have also the power to entirely alter his physiognomy and general appearance. Even if we accept without further questioning the working of the undermind in carrying on circulation, respiration and digestion, we find ourselves caught in a maze if we attempt to grasp the working of the overmind in its con-

stant interchange with the undermind. We know that it comprises our voluntary actions and our conscious thoughts, but we know that it comprises far more than this, more even than can be classed under the heading of "psychic": all the "thoughts hardly to be packed into a narrow act," all the "fancies that broke through language and escaped," all the intangible things expressed in a sonata of Beethoven, or in a sunset of Turner, and all that we class under the heading of "spirit." It might seem as if we were wandering far from the subject of suggestion, but we are in reality only approaching it at closer quarters, since to understand the action of suggestion both in everyday life and as medical treatment we must have spent a little thought on the action of mind, overmind and undermind, on the body.

It is a fact of common experience that we constantly accept many facts without wonder and without any sensation of witnessing the miraculous at play, simply because they have become so familiar to us. And yet if we see them in a slightly different and therefore unfamiliar setting our attention is at once arrested, and we may even marvel or assume an attitude of frank incredulity. That shame or even pleasure should cause such a flow of blood to the face that the skin becomes hot to the touch, we are so familiar with that we do not wonder at it. But to be told that in the hypnotic state an area of redness with blistering has been produced is to state what by most people is received with utter incredulity; while the fact that St. Francis of Assisi and others

were able by intense concentration of thought to reproduce the stigmata of Christ in their own bodies, is regarded as a mere fable and imposition. Again, we are familiar with the fact that in some people worrying thoughts have the power to send messages to the intestine, alter the secretions, possibly quicken the normal action and produce diarrhœa; but many people find it impossible to believe that if suitable suggestions be given in the hypnotic states, these suggestions have similarly the power to affect the secretions and movement of the bowels, and so to cure constipation, sometimes with startling suddenness, at other times more gradually. To understand how cures are worked in the hypnotic state it is therefore only necessary to study the ordinary phenomena with which we are familiar, and to realise that in the hypnotic state these phenomena are sometimes greatly exaggerated on account of the greater suggestibility of the subject, because in that state the subconscious mind exercises full control over us.

It is with the overmind and the undermind that we are concerned in our attempt to understand suggestion in its everyday aspect and in its medical aspect. Although we regard them as, so to speak, controlling different departments—the one controlling voluntary thought and action—there is yet a constant interchange and blending of their work. For instance while learning the elements of walking or of piano playing, every movement is made with a painfully voluntary effort, but once the elements are mastered the undermind is capa-

ble of undertaking the work of thought sending, and we can not only do these actions with great ease but we can if necessary relegate them to the undermind. So little need have we indeed of voluntary effort that we can think out puzzling thoughts which demand the greatest concentration while we walk on and on, forgetful even of our destination. Many other instances could easily be cited to show how many actions which are at the commencement performed by the overmind and undermind together can in time be with ease relegated to the undermind. We are also aware, if we interest ourselves in studying and in analysing these, of intrusions of our subconscious life into our everyday consciousness. Such intrusions may sometimes be produced with the aid of our various senses; thus a sound, an odor, the falling of the glance on an apparently insignificant object, are sufficient. It may be that in the hilarity of a picnic party we are suddenly dissociated from our conscious surroundings, and for the space of a moment we live vividly in quite other scenes. Why? Merely because a sudden waft of peat smoke has wakened and forced up into our conscious thoughts almost forgotten memories, which lay hidden in our subconscious mind and which centered round the smell of peat smoke. At other times these intrusions or uprushes are so intangible and elusive that we should find it hard indeed to explain in words what we had experienced. We only know that in some unaccountable way we have for a short space had an insight into things which lie below the

threshold of ordinary consciousness, and that life has been the better for such an insight. Our subconscious mind reigns supreme during sleep, that state which we so little understand, which we are accustomed to regard as a negative part of our existence, in contrast to the positive evidence of our waking hours, but which we should rather reckon as an extremely important influence in our daily life. In it, as we have seen in treating of the phenomena of hypnotism, there is sometimes an extraordinary heightening of the mental faculties, and a study of dreams has shown that these are not only a reflex of the thoughts and actions of the day but also a reflex of our subconscious life, where are stored many things which our conscious mind entirely failed to apprehend. Dreams again lie buried in our subconscious mind, influencing our daily thoughts and actions and sometimes acting as strong self-suggestions.

We have dwelt sufficiently on the conscious and subconscious mind to allow of our proceeding further to see how they are constantly and at every moment of the day being acted on by suggestions from outside and by self-suggestions, and how these are modified often by counter-suggestions. Suggestions are constantly pouring in upon us from the sights we see, the sounds we hear, the people we associate with, the work we do, the books we read, the lectures we hear, and plays and concerts to which we go. Suggestions are in fact influencing us the whole day long, some of them to be accepted and acted upon, some of them to be

resisted by counter-suggestions, many to be almost at once apparently forgotten, but to be stored for all eternity in our subconscious minds, there to act as subconscious suggestions influencing our lives momentarily. They are handed on to generations of descendants, either to help in a higher evolution of the race or to hinder that evolution, even though that hindering be so trifling that we might compare it to the resistance offered by one grain of sand to the onward flow of the wave. What one grain of sand is apparently powerless to do, a mass of many grains has a certain amount of influence to effect. So though we may feel that the stored subconscious impressions of one mind are apparently powerless to help or hinder the evolution of the race, we realise that the impressions of several minds have great power to do so. We again are enormously influenced by the store of subconscious memories which we in turn have inherited from centuries of ancestors; we fear the dark because of the subconscious memory of prehistoric days when the fall of night necessitated great caution, lest behind any wayside bush there might be hidden an enemy ready with club in hand to attack the unwary. To the stored subconscious memories of generations of ancestors the rabbit owes its pitcher-like ears, admirably adapted to catch the faintest sound of approaching danger so as to escape death, a death which overtook only too easily the rabbits of the centuries previous which had not yet developed such a protection against danger.

How do we normally deal with suggestions

offered to us? The suggestion is carried to the brain, where it becomes an idea, and the idea is then transformed into an act. Such a normal course of events may be interrupted at any point, just as an electrical machine may fail to generate electricity through a break in continuity of any of its parts. Thus a suggestion may fail to reach the brain, in which case an idea is not created, or the idea when created may not be transformed into an act, either from lack of power or through strong counter-suggestions. To instance this take the familiar example of a beggar at the street corner offering in his person to each passer-by the powerful suggestion of almsgiving. In many people such a suggestion, perhaps through the dulling influence of familiarity, fails to create the idea of almsgiving. In others the idea is created and at once transformed into the act of almsgiving, while in yet others the act is prevented by strong counter-suggestions regarding the harmfulness of indiscriminate almsgiving or the inadvisability of parting with one's penny, or it may be that the idea fails to become an act through lack of power.

Such instances could be endlessly multiplied, and have as a rule no interest to the onlooker beyond the psychological. But when the onlooker is a physician, and when such instances occur in his medical practice, and, further, when the consequences of failure of a suggestion to act may lead to disastrous consequences, then indeed the question is one of more than purely psychological interest. Here then steps in treatment by hypnotism and suggestion,

since we have shown in a previous chapter how when all other means fail, an appeal to the subliminal mind while the subject is in a slightly hypnotic state will carry conviction. Numerous instances of such successful appeals will be discussed under the heading of medical treatment. Fortunately hypnotism, though invaluable for many obstinate cases, is not the only way in which a suggestion effects an entrance into the subconscious mind and transforms itself into an act. Interesting and in some cases most unexpected are the ways in which suggestion sometimes acts both in the daily round of life and medically. Happiness, sudden and unexpected happiness, under the various forms in which it comes, is a most potent health-giving factor. When all medical remedies have failed to act and to banish nervous ills and ailments, happiness has the power of making an immediate and convincing appeal to the subconscious self, and in the space of a few days we see the external signs of ill-health gone, the eye bright, the complexion clear, digestion normal, sleeplessness vanished; in fact health, restored as by a miracle; of such happiness the most potent is undoubtedly that which is commonly called "falling in love." Further we are familiar with the far-reaching influence of one personality on another, and of the power which such an influence may have to completely alter habits and character in a comparatively short space of time. This very question of personality, of ability to inspire confidence and to give potency to even the simplest suggestion, is as we shall

see of great importance in all hypnotic treatment. Certain circumstances again act as powerful suggestions, which sink deep and are transformed into acts without delay. This suggestive power of circumstances is often unaccountable and capricious. A man is capable of wasting his weekly earnings in drink in spite of the deprivation thereby caused to his wife, gravely ill with consumption and barely able to drag herself through the day's work. But a case is known where the removal of his wife to hospital has acted as such a powerful suggestion to the drunkard that drink has been given up, and on her return a life of complete sobriety has been led. Not circumstances alone, and not the influence of a particular personality alone, but stranger still a chance word heard in a certain mood has sometimes the power to alter the current of an entire life. We have again the suggestion cures effected by patent medicines, since a farthing's worth or a half-penny's worth of drug in six or eight ounces of water can claim no power beyond that of sending healthful and hopeful thoughts travelling down the nerves to the various organs. There is the suggestion element, not only in all varieties of mental healing, but in much of hydropathic, electrical, and other medical treatment. Every physician both consciously and unconsciously uses suggestion in his medical practice; the more outstanding the personality, the greater part does suggestion play. Why not then use it in a more organised and methodical way, so that its usefulness may be still further extended, and so that every year

increasing numbers may receive mental healing, as they ought to, from the medical profession.

CHAPTER V

THEORIES OF HYPNOTISM

We propose now not only to sum up the various theories of mesmerism and hypnotism which have been touched upon in the preceding chapters, but to elaborate some of them further and to give more recent theories.

Mesmer (1778) believed that health and sickness depended on the flow of a magnetic fluid through the body, and that by the application of magnetic plates of various sorts it was in his power to increase the magnetic fluid in cases of disease and to direct it to various parts of the body by manipulations and passes. This view was shared by other workers of his time.

Elliotson (1837) and *Esdaile* (1845) both held that the phenomena of mesmerism were due to a peculiar fluid or force which they called "odylic." *Esdaile* expressed the therapeutic action of mesmerism in the following quaint words: "There is good reason to believe that the vital fluid of one person can be poured into the system of another. A merciful God has engrafted a communicable life-giving curative power in the human body in order that when two individuals are found together deprived of the aids of art the one in health may often be able to relieve his sick companion by imparting to him a portion of his vitality."

Braid (1841) made a great step forward in the study of hypnotism by setting himself to studying its phenomena in a scientific spirit, as well as to make practical use of it in the treatment of disease. By his earlier method of hypnotising, by concentrating the gaze on a bright object, he got results which no other worker had got up to that time. He regarded the mesmeric trance as an artificially produced sleep, and invented for it the term hypnosis. He regarded this state as due to mental concentration on one idea, this concentration leading to a suspension of activity of other nerve centers, and so inducing sleep. Later *Braid* entirely altered his views, as he observed that anything approaching to deep sleep was only got in about 10 per cent. of those who recovered under his treatment, also that volition was not abolished, and that a patient could even resist attempts to hypnotise him. He then elaborated the theory that the phenomena he elicited were entirely due to suggestion, and that the effect of magnets and other such means of inducing the hypnotic state were also explicable by the same theory. He therefore abandoned his method of producing the hypnotic state by concentration of the mind and eyes on a bright object, and relied entirely on verbal suggestion just as *Liebault* did. *Braid* was the first to note that some people have the power of self-hypnotisation. He also laid the foundation of theories elaborated later by *Myers*, *Carpenter*, and others, in which the phenomena of hypnotism are explained by the acceptance of the view of subliminal conscious-

ness. He was led to these views by reason of several experiments which he carried out in the hypnotic state, and which led him to a belief in the existence of "double consciousness." Thus having taught hypnotised subjects Greek, Latin, French, or Italian, he found that on recovering the normal state they had entirely forgotten this knowledge; but on being re-hypnotised it returned to them again. Not only was he impressed with the heightening of mental activity in the hypnotic state, but also with the heightening of the moral sense.

Liebault (1864) advocated the view that suggestion and suggestion alone explains all the phenomena of hypnotism. In order to produce the hypnotic sleep he used neither magnets, passes, nor concentrated gazing. By instructing the patient to gaze at him he arrested his attention, and then induced a state of drowsiness by suggesting in detail the phenomena of sleep. Suggestions were then given to cure the special complaint for which the patient had come, suggestions for the amelioration of pain where neuralgia had to be cured, suggestions as regards the person's ability to walk where a hysterical paralysis was in question, and so on.

Bernheim (1882) has advanced psycho-therapeutics by demonstrating how far the phenomena of hypnotism can be produced without inducing hypnosis, that is to say, he has reduced hypnotic treatment to simpler elements, and shown how far hypnotism can be dispensed with. "Hypnotic trance," says *Bernheim*, "is ordinary sleep; hypnotic suggestion

is ordinary command. You tell the patient to go to sleep and he goes to sleep; you tell him to get well and he gets well immediately." Unfortunately it is the experience of all those who interest themselves in psycho-therapeutics that most cures are not effected so readily as this, that in some cases it is only after a long and patient process of re-education that many states of ill-health are thrown off, that bad habits are broken and conditions of slavery are ended.

Charcot and the Salpêtrière School (1878).—Although we have shown that the views of this school are now entirely discredited, they must receive a note of mention here. Charcot, as we have seen, believed that all the phenomena of hypnotism were pure "hysteria," and therefore only demonstrable in hysterical people. He also believed with the early mesmerists that these phenomena could be induced by metals and magnets. Were Charcot's views correct it would logically follow that about 90 per cent. of people are hysterical.

Heidenhain's theory (1880) may be mentioned in passing, though it has not much general acceptance now. He elaborated the view that as a result of the monotonous stimulation of certain nerves by fixed gazing the activity of the higher brain cells is arrested. As a result, actions which are generally performed under the control of these higher cells are in the hypnotic state controlled only by the lower centres, and the hypnotised subject is therefore a pure automaton.

Theory of Subliminal Consciousness or

double consciousness elaborated in recent times by *Frederic Myers, Gurney, Carpenter, and others.*

This theory is founded upon the belief which we have already spoken of, that we have as it were two streams of consciousness, the one above the threshold called the supraliminal, and the other below the threshold called the subliminal. We commonly speak of these as our conscious self and our subconscious or partly conscious self, and a combination of the two constitutes our real self. The two halves of us may act in co-operation or there may be independent action of the subconscious half. Familiar instances of the independent working of our subconscious self are best seen during sleep life, as we have already noted. Our conscious self then being in abeyance, the subconscious self has sometimes the power to work out problems, to walk safely in dangerous places, and to act rôles which our conscious self would be quite unequal to. By strong self-suggestions before falling asleep, R. L. Stevenson was able to direct his dreams and utilise them as motives for fresh and stirring romances. Certain phenomena in everyday life give an indication of the working of this subconscious self. Thus we have the sudden remembrance of a lost name which our conscious self had tried in vain to recall, and which only came when we gave up searching for it. We are so familiar with this phenomena that we often say: "If I stop thinking about it, it is sure to come to me." Again, if we are acquiring a new branch of learning have we not often

found, when baffled by a difficulty, that if we put our work away and think no more of it for a few days, when we face the difficulty again it has so to speak resolved itself.

As this subconscious self shows itself in natural sleep, so it shows itself in that allied state, hypnotic sleep, and its working can, as we have already shown, be studied in the latter state as it cannot in ordinary sleep. After considerable study of this subconscious self during the hypnotic state Myers and others are agreed that it has a greater range of activity, both physiological and psychical, than has the conscious self. It can thus show a quite extraordinary degree of control over the nervous system and over the heart and blood-vessels. More than this, it shows a superior intellectual and mental activity and a heightened moral sense.

What we call inspiration and genius are most likely, as Myers has shown, also manifestations of the working of the subconscious mind, and therefore cannot consciously be called into action; rather we must await the stirring of the pool by we know not what intangible power ere that uprush of the one stream into the other occurs.

When the conscious half of a subject sleeps in the hypnotic state the subconscious half is alert, and all suggestions are made directly to it, and by it they are accepted and acted out, it may be at the time, it may be hours or days later.

These suggestions may bear upon physiological changes which we wish to effect, as for

example in matters relating to digestion, constipation, or any other ailments. On the other hand they may be directed to increasing mental activity, as in backward children. Still more important, they may be aimed at heightening the whole moral tone of the individual, so that he may live above temptation which previously mastered and enslaved him.

While we are fully aware in our own experience and in the light of the experience of others who are competent to express an opinion, that during the hypnotic state appeals are often made to the subconscious mind with startling success which had been repeatedly made in vain to the conscious mind, we are yet constantly impressed with the fact that similarly, outstandingly successful appeals are often witnessed which are made to the conscious self by appealing to its reason. This fact is of the utmost importance in all psycho-therapeutics.

CHAPTER VI.

SELF-SUGGESTIONS.

Self-suggestions are a factor of such paramount importance in producing health or disease, happiness or unhappiness, that we feel we cannot do better than devote a chapter to study them in some detail. Self-suggestions, as the name indicates, are suggestions which we give to ourselves. The material from which we fabricate them may be either in our conscious or our subconscious life. Unfortunately most of us, unless we have given some thought

to the matter, are not aware of the fact that we do give ourselves suggestions, and therefore we are unable to avoid or to encourage their influence. To once fully realise the importance of this matter is not only to ensure to oneself a greater measure of health but to have fuller control over one's life in many directions.

We have for the most part far too low a standard of health, many of us being content to accept freedom from disease as a substitute, and a poor substitute indeed, for health. We similarly are content to accept freedom from vice as a substitute for virtue. Health, like virtue, is however a positive not a negative state, and only by realising this shall we appreciate the vital importance of self-suggestions and of thought-control.

In attempting to picture perfect health one's thoughts instinctively turn to Browning's *Saul*, and to the song which David sang in his endeavour to rouse Saul from his state of depression and lethargy. He bursts out: "Oh, our manhood's prime vigour!" Then he describes in warm and vivid colouring the joy of living, the delight of feeling that not a muscle is stopped in its playing nor a sinew unbraced, the keen pleasure of jumping from rock to rock, of hearing the strong rending of boughs, of feeling the "cool silver shock" of a plunge in the pool, and so on. How different is this from the picture Epictetus gave of himself as "a spirit bearing about a corpse."

Let us set before us such an ideal of perfect health, every muscle and nerve exercising full play, every faculty on the alert, virility in

every detail of it, and then let us see to what extent it is in our power to contribute to such a state of health.

We feel that it is impossible to discuss self-suggestions proper without first spending a little time in attempting to controvert the popularly accepted view of nerves and nervousness, since such a view leads to a lowered vitality of body and mind in numberless lives.

In a previous chapter we said a few words about the nervous system, and showed that nerves are constantly carrying messages from the overmind or the undermind all over the body. We dwelt upon the fact that they are wonderful in their structure and marvellous in their manner of working. How different is this from the popular conception of them as shown in the phrase "an attack of nerves." We are indeed too accustomed to regard nerves as a malignant influence in our lives, to heap upon them opprobrium, and to make them the scape-goat for many things for which we ourselves are entirely responsible. We do this, I fear, because it is always comforting to have a scape-goat which we can eventually lose sight of in the wilderness of self-deception. If we wish, however, to attain to fuller health of body and mind we must be prepared to accept full responsibility ourselves and to realise that not our nerves are at fault but we, because of our inability to control them. Let us rid ourselves of the idea that nerves are malignant; let us rather, in the light of the chapter on suggestion, realise that it is the nervous matter in our body which carries on the important work

of thought-sending to keep our bodily functions in constant normal activity, that in it resides all intellect, and through it those higher moral impulses which we designate our spiritual life find expression for themselves. To speak of a person as nervous thus means literally that he is full of nervous force. Just as we use and rightly use muscular to mean a healthy development of the system of muscles, so that they have full and free play, so let us use nervous to indicate a condition of tone, balance and force in our nervous system, so that it responds to an exercise of will-power as a horse answers to the hand of a practised rider. Once we realise that this is the genuine use of the word nervous, we shall be loath to use it in the old way in speaking of ourselves, for we shall realise that by so doing we advertise the fact that we have failed to cultivate control when we had most need to do so.

Let us not make the mistake of assuming that those who show a controlled exterior (an altogether different thing from a placid exterior) are fortunate in not possessing *our* difficult temperament. Let us rather rest assured that a calm and controlled exterior is a sure sign that control has had to be greatly exercised in that life. On the other hand, if we have attained to outward control alone, let us not pride ourselves upon that as though our task were ended. It is of great value to have acquired the art of showing outward control of nerves, but our work is only half done if control ends there and we allow worrying

thoughts to reduce us to a state of bodily and mental ill-health.

We shall now pass on to discuss self-suggestions in a little detail.

Fear and worry are two kindred self-suggestions which work havoc in many lives, and lead not only to nervous breakdowns but to actual disease and even insanity. Just as courage has the power to act as a tonic and an invigorator, so fear paralyses all the bodily forces and saps the vitality out of a life. It has been truly said that we have great power to attract the things we fear and to repel those of which we have no fear, because fear lowers the bodily resistance and courage raises it.

The following story is much to the point: "Where are you going?" asked an Eastern pilgrim on meeting the plague one day. "I am going to Baghdad to kill five thousand people," was the reply. A few days later the same pilgrim met the plague returning. "You told me you were going to Baghdad to kill five thousand people," said he, "but instead you killed fifty thousand." "No," said the plague, "I killed five thousand as I told you I would; the others died of fright."

Many people live in constant apprehension, one might almost say in constant expectation of developing some bodily ailment, and so are ready at any moment to interpret trifling symptoms as having a grave significance. Should they have slight indigestion they convince themselves by self-suggestion that they have heart disease, and promptly suffer palpitation and breathlessness. Fortunately in some cases

such symptoms vanish with wonderful haste after a medical examination and an assurance that no heart disease exists, and consequently the harm done has been slight. In many cases, however, a cure is not so easily effected, since the type of mind that wastes its nervous energy in unhealthy self-suggestions has generally the capacity for either holding on to these in spite of every effort to displace them or of constantly creating fresh ones.

Worry is responsible for more cases of nervous breakdown than any amount of hard work. We worry in some cases over our daily work, because we either feel unable to cope with it or are too conscious of our own errors. We worry over the past which cannot be altered, and waste precious moments in vain regret, instead of utilising the lessons of the past to build up a worthier future. By worrying self-suggestions we positively create obstacles which do not exist, or we magnify to such gigantic proportions those which do exist that we are terror-stricken at sight of them. Much need have we to fully realise the extent to which we are dominated by such suggestions and to attempt to exercise a certain measure of control over them.

In still other directions have we evidence of the influence which self-suggestions exercise over us, though we are generally only too loath to admit that certain things came to pass because we courted them by our expectant attitude. If an article of diet once under special circumstances upset our digestion we are too apt, prompted by strong self-suggestion, to feel

sick or be sick every time we chance to renew our acquaintance with it, until we finally decide that it does not agree with us. If we be lovers of fresh air the lack of an open window will cause us to suffer agonies, and such sufferings are often quite disproportionate to the atmosphere of the room we enter.

Fortunately for ourselves, should we be among those who wish to progress to greater control, we are sometimes trapped by this very attitude of expectancy. It may be that one day we find we have suffered most unnecessarily from lack of ventilation, since we learn that a window had unknown to us been open while we believed it to be closed. Worse still, on the eve of a voyage we may retire to rest prepared to be sick according to our usual custom, and may succeed in being so in spite of the fact that the vessel, owing to unavoidable delay, **does not lift anchor till morning.** Humiliating as such experiences are, they are still most helpful in demonstrating to us practically what a small measure of control we have over body or mind.

Self-suggestions have sometimes the power to so dominate a mind that they become a veritable obsession, and life is rendered unendurable. Many such cases which have been successfully treated by hypnotism were already so to speak on the borderland of insanity. Others again cross the borderland and are eventually certified insane.

Such obsessions show themselves under very various forms, and often elude all attempts at cure until the original baneful self-suggestion

is searched for and eradicated. Such obsessions will be discussed in the next chapter.

The harmful power of self-suggestion is shown in its most exaggerated form in hysteria. In this diseased state, as we have seen, there is such complete lack of control that the personality is for the time being dissociated, and one thought or emotion dominates most unduly. A hysterical person is so extraordinarily open to self-suggestions that, as Dr. Bernheim has shown in his book *De la Suggestion*, the mere fact of testing such a person for loss of sensation or diminished power of a limb is in itself sufficient to induce the very symptom which is being tested for. It is also of common occurrence in hysteria to find complete blindness or loss of voice due entirely to self-suggestion and extending over a lengthened period. A person may even spend months or years in bed in the conviction that he is completely paralysed.

Having dwelt upon the harmful influence which unhealthy self-suggestions have the power to exercise in a life, let us turn our attention to the remedy, thought-control.

It behooves us to examine our power of thought-control honestly and with brutal candour, since only by attaining to a high degree of perfection in this, can we hope to enjoy a full measure of health and vitality. Having satisfied ourselves that we are far from touching that high-water mark of perfection which we would wish to have as our ideal, let us set to work patiently and earnestly day by day in an endeavor to improve such a defect. This

we can do both by following any system of concentration exercises and by putting these into practice at every moment of the day when we find ourselves urgently in need of self-control or thought-control. It is not possible in the small space at our disposal to enumerate in detail the various forms of concentration exercises which have been advocated, but we should like to suggest the following method as one which has been helpful to many, both as a means of practising thought-control and of giving oneself suggestions.

Complete relaxation is first induced by reclining either on a couch or in a comfortable chair, then with eyes closed, the thoughts are concentrated upon describing in detail a well-known room, scene, or object. The experience of many people at a first attempt will be that long before five minutes are up the thread of their thoughts has been broken. Any form of exercise, therefore, to be effective must be carried out daily with the utmost regularity, while gradual improvement in thought-control is shown by an ability to concentrate without a break for longer and longer periods.

As we have repeatedly used the word concentration we shall make its meaning clear with the help of a familiar illustration, *i. e.*, the effect which a convex lens has upon the sun's rays. If on a hot day the rays be allowed to fall directly upon the hand a sensation of warmth is experienced, but if a lens be interposed, so greatly is their power increased by the focussing action of the lens, that blistering is soon produced. Thus when by interpos-

ing our will-power we concentrate, we so intensely focus our thoughts upon one point that many things which had previously seemed impossible are accomplished with ease. The "point" upon which we concentrate may be work we have in hand, a quality we wish to concentration exercises, we are in a position develop, a special power we wish to acquire, or a bad habit we desire greatly to break.

Having thoroughly practised some form of to put them to practical use in our daily life and to give ourselves suggestions. Having relaxed as before and closed the eyes, we focus our thoughts upon the "point" in question. We then express clearly to ourselves what it is we desire to effect, even saying it aloud and repeating the words over and over with calmness and assurance. We need not reaffirm that such an exercise to be effective must be often repeated.

Many people while under treatment by a hypnotist have been able to reinforce his suggestions and hasten their own cure by following some such plan.

In carrying out these exercises we should do well to set before us the great truth expressed by Emerson, that kingship is in reality not an attribute of those who sit on thrones but of those who rule their thoughts.

CHAPTER VII.

MEDICAL TREATMENT.

We indicated in a previous chapter that the

word psycho-therapeutics, due to the gradual evolution of mental treatment, has at the present day acquired a wide interpretation, and we doubt not that with increased knowledge and insight this interpretation will be still further extended.

It has been seen that, though the hypnotic state is regarded as one in which the subconscious mind is peculiarly receptive to suggestions, it is yet a fact of everyday experience that suggestions have the power to reach the subconscious mind in many other ways. Every year this fact is brought home to us more and more forcibly, and in consequence psychotherapy becomes proportionately modified. Treatment by hypnotic sleep, valuable and helpful though it is, thus comes to be regarded as but one department of mental healing, and much discrimination and judgment are exercised in the use of it, freer play being given to all forms of re-education by an appeal to the reason.

We feel strongly and wish to state clearly that all curative attempts are to be deprecated which aim at treating a particular ailment only, without at the same time treating the deeper cause where such exists, since such a cure leaves the patient in unstable equilibrium, and therefore liable to a relapse. Thus in a case of hysterical paralysis it is possible to effect a cure with or without hypnotic treatment, by persuading the patient that he has more power over the limb than he believes himself to have, by encouraging him to carry out gentle movements and so restoring his

walking powers to him. But only half the cure is effected unless hand in hand with such treatment we attack the condition of defective thought-control and dissociated personality, which has permitted an unhealthy self-suggestion to rule supreme for weeks or months, thus reducing the individual to a state of invalidism. If on the contrary we concentrate our efforts on attempting to re-educate and reunify such a dissociated personality and to force the patient to work out his own salvation, then indeed we have done work which was worth doing.

Psycho-therapeutics thus comprises every form under which an attempt is made to act on the body through the mind for the cure of various bodily ailments, and also all efforts at re-education by breaking injurious and slavish habits, by inculcating thought-control and by building up a controlled and stable character.

It is self-evident that the more fully one has realised the defects of one's own character in lack of thought-control and deficiency of will-power and the keener the fight has been to overcome such defects, the greater will be one's influence, especially in difficult cases. To urge self-control and thought-control upon a patient as moral precepts only, and without the stamp of personal conviction through experience of their great value, must inevitably hamper all one's efforts. Particularly will this be the case with patients who are sensitive to any lack of genuineness and who are at once adversely influenced by it.

It can only be by carrying on the education

of oneself at the same time that one attempts to give a helping hand in the education of others, that one earns the right to speak with authority. Such is also the surest way to convince the patient that one has an expert knowledge of the difficulties to be overcome through intimate personal experience of them.

A deep and growing knowledge of human nature coupled with a certain sensitiveness to the moods of others is of great value both in guiding one to an accurate diagnosis and in influencing one as to the line of treatment to be followed in each individual case. Beyond this are necessary a big sympathy, much tact, and infinite patience.

As regards the patient we should like to insist again that the fundamental aim of psychotherapeutics is to rouse every dormant power in him and to convince him that only by drawing upon and developing these powers will he effect his cure. It is in addition of the utmost importance that he should be made to realise the fact that to a great extent he is himself responsible for the state of lowered health and vitality, which he has so far regarded as being due to causes entirely beyond his control. We shall touch upon these points in more detail in discussing individual cases.

In all medical treatment two dangers confront the physician, the danger of overlooking the mind in treating the body, and the danger of overlooking the body in treating the mind; the harm which may result from such an omission being fully as great in the one case as in the other. The physician who interests him-

self in psycho-therapeutics uses at the same time every ordinary method, both for arriving at a correct diagnosis of the physical condition of the patient and for treating the physical condition where such treatment is necessary. He thus in no way regards psycho-therapeutics as replacing other forms of medical treatment, but as an additional weapon in his hands, a weapon that has often proved of incalculable help in difficult cases. Failures and partial successes there are in psycho-therapeutics, as in every other form of treatment, but great indeed is the joy of being able to effect a cure in certain cases where all other means have been tried without success. As regards the failures and partial successes, the question constantly arises whether, with an increased development of insight and of spirit in the physician using mental healing, fresh powers may not be set free in him and so the number of failures be diminished year by year.

We propose now to deal with the various types of ailments and mental states for which psycho-therapeutics has been found useful and to illustrate these in so far as space will allow, in order to show the line of treatment which has been followed.

Among the class of cases which have given good results with treatment by psycho-therapy are neurasthenia, hysteria, obsessions, constipation, sleeplessness, drink habits, drug habits, bad habits, stammering, sea sickness, muscular tremors, headaches and neuralgia of nervous origin, and the endless variety of similar affections.

Neurasthenia and *Hysteria* figure largely in every physician's practice, and in some cases one's resources are taxed to the utmost to restore the patient to perfect health, in spite of prolonged rest treatment, massage, electricity, change of surroundings, &c. A cure has, however, in many cases been fairly rapidly effected once it was realised that all these means were mainly directed to the improvement of the bodily tone, and that a more direct attempt must be made to investigate and treat the mental state.

Miss ——— first came under observation in the summer of 1908, suffering from a breakdown due to overstrain. She was prescribed a rest cure with massage, and returned to work after six weeks feeling greatly improved in health. The improvement, however, was only temporary, and during 1909 she was forced to leave her work for varying periods. In the interval she had developed symptoms and signs pointing to slight heart disease, and was, therefore, again treated by rest in bed, massaging, electricity, &c., and finally sent to the country for a complete change. She then returned to work and succeeded in keeping at it, but presented herself periodically at the consulting hour to complain about her palpitations, sleeplessness, tiredness, and general ill health. By this time it was fully realized that there was a big mental element in the symptoms she complained of, and several attempts were made to reason with her, in order to lead her to realise this for herself and exert her will-power to pull herself

together. She always professed that she felt much better after such talks, and invariably left with a determination to try and effect her own cure, but in a few days relapsed into her former state. On May 14, 1910, hypnotic treatment was begun, the patient never passing beyond the state of light sleep. In all, fourteen treatments were given, first thrice weekly, then twice weekly, then weekly, fortnightly, and monthly. At each treatment suggestions were given to meet the various symptoms of sleeplessness, constipation (previously thoroughly treated by ordinary medical means), tiredness, nervousness, &c., after which the patient was left to rest for half an hour. Soon these suggestions were extended, the whole onus of her recovery being thrown upon herself, concentrated effort at self-control and thought-control being strongly urged, with the displacement of self from the centre of her life. Improvement showed itself after the first one or two treatments, the constipation and sleeplessness yielding first. The patient then ceased to think or talk about the heart palpitations, gradually attained to greater and greater control in every direction, and in consequence to greater calmness and happiness. It was commented upon by her friends that she showed more consideration for others and welcomed any opportunity for unselfish acts. During the two years which have followed this course of hypnotic treatment the patient has never lost a grip of herself, though it has sometimes cost her a hard fight not to do so. As she has expressed it herself more than once,

the state of mental misery she was in before the treatment began has always acted as the most powerful deterrent, when in moments of depression she has been tempted to let herself fall back.

Miss ———, a typical case of hysteria, was treated entirely without hypnotism, as the only occasion on which hypnotism was attempted, her usual state of excitement was greatly exaggerated. She was first seen on January 17, 1910, when she was most excited and uncontrolled. She was convinced that she was quite incurable and was in danger of becoming insane. She had been going from bad to worse for the past year or more, medical treatment with drugs, scaldings, &c., having been of no avail. The patient was put in restful surroundings in a nursing home for two or three weeks, in order to quieten her and help her to more easily make a fresh start. The mental treatment she was given consisted entirely of attempts to reason with her in a clear and convincing way in order to force her to realise that lack of self-control had brought her to this pass and that therefore cultivation of self-control was the only way to restore her to health. The question of thought-control and self-suggestions was also discussed with her in detail, and she was given exercises in concentration to be done daily. Every effort was made to occupy her attention and time by suitable work and suitable literature, and she was encouraged in every way to interest herself in others so as to displace self from the centre of her life. To do her credit it must be stated that she

pretty soon got a fair measure of outward control, and was ashamed of the occasions when this failed her. After returning to work there was however a hard fight to be gone through for about a year before she arrived at the stage when she had full control and objected to have any reference made to this period of uncontrol. This fight she for the most part carried out alone, only turning up at intervals of a few weeks or a month or two when the strain became too great.

Obsessions or imperative ideas have the power not only to cause such misery and despair that suicide has on more than one occasion been contemplated or carried out, but they may also and often do lead to insanity. The root cause of obsessions is such a lack of thought-control that an idea which in the majority of people would have the power to cause worry for a time and would then be thrown off, becomes instead the dominant idea in a life and eventually leads to a complete loss of balance and of sanity.

Miss — came for consultation on June 28, 1910. At that time she was truly on the borderland of insanity. She had for some time had a trifling eruption on her cheeks, and with increasing insistence the thought had grown that on account of it she was infectious to all those who spoke to her or sat beside her. On attempting to trace back the origin of such a thought to its source, it was found that one day when conversing with a friend she noticed this friend raise her hand to her cheek as if on account of some irritation there. The

thought then took birth that she (the patient) had somehow infected her friend, and from that day onwards she found herself watching for such a gesture on the part of any person whom she chanced to be beside. Should even her neighbor in a tramcar raise a hand to her cheek, the patient at once concluded that infection had somehow been transmitted from herself. She was so haunted and obsessed by this thought, that life was a burden and it seemed as if it would be no light task to rid her of her obsession. In the course of a long talk an attempt was made to attack the obsession from every side by making common-sense deductions from facts known to herself, and she was in the end restored to a calmer state of mind and left expressing herself perfectly satisfied of the extreme foolishness of her thoughts and promising to report should there be any relapse. In a fortnight she returned, more miserable and agitated than ever, to report that relief from her obsession had been temporary only and that it seemed now to have taken a firmer hold than ever. It was therefore decided to give suggestions during hypnosis, in addition to attempts to convince by reasoning, but only a very slight degree of somnolence could be produced. She had six treatments on these lines, the point which was strongly and unfailingly insisted upon being that if she had even had an average amount of thought-control she could have kept such an obsession at bay or conquered it. It therefore followed that cultivation of thought-control by every means in her power was the only way to

succeed in curing herself, and to this end exercises in concentration were prescribed for her. The unreasonableness of her obsession was also pressed home, as shown by the fact that she had failed to infect a single person of all those with whom she was in daily and hourly contact. In the course of the treatment the patient showed definite signs of becoming more normal in her outlook, and so it was decided, with some hesitation, to allow her to keep to plans originally made for a seaside holiday, on the understanding that she would relax no effort to effect a reliable cure and would at once report a relapse. In a fortnight she wrote to say she was still "keeping all right," and two or three months later reported that she was now not only free from the obsession, but that her powers of thought-control were so much improved that she could even banish pleasant thoughts if they interfered with her work.

Constipation has various causes and so demands a varied treatment in individual cases, and there is no doubt that in some forms hypnotic treatment is of great value, as instanced by the following case:—

Miss ——— sought advice on June 7, 1910, for very obstinate constipation. All ordinary methods by dieting, exercises, massaging, &c., had been tried without success, and so hypnotic treatment was suggested and gladly agreed to. In all, eighteen treatments were given—daily for nine days, then twice weekly. At each treatment clear and definite suggestions were given for an evacuation of the bowels at the same hour every day. It was also suggested

that concentration of the patient's thoughts on the subject was of importance, and that before the end of the treatment a regular habit would have been acquired which would ensure success after the treatment ceased. At first the results were slightly erratic, very satisfactory some days and disappointing other days, but before the daily treatment was changed to twice weekly, things were steadily improving, and three weeks after the last treatment the patient reported herself as quite normal. Recent reports have confirmed this.

Drink habit.—In no class of cases has hypnotic treatment shown more striking results than in those associated with the drink habit. For such cases every kind and variety of treatment is to be welcomed, since not only individual lives but homes are wrecked through slavery to drink. The following two histories illustrate the line of treatment which has been followed in such cases:

Mr. ——— was seen in his own home on December 14, 1911. He had been drinking heavily for some time and was in a state of great distress and misery, and suffering in consequence of the heavy drinking from symptoms of palpitation and breathlessness due to heart disease, which he had known himself to have had from boyhood as a sequel of scarlet fever. He stated that he had begun to drink in a mild way as a boy of sixteen, but that during later years (he was then thirty-four) it had taken such a hold of him that in spite of many a hard fight, a month or six weeks was the longest time he had managed to keep sober.

Treatment by hypnotism was commenced the following day, the patient falling into a fairly deep sleep, though not to the degree of somnambulism. Suggestions were given to the effect that he would not only lose desire for drink, but that the smell of it would create a feeling of repugnance and disgust in him. It was further suggested that he must avoid every place or person associated with drink, and in order to entirely free himself from the power of temptation he must live above it by creating a higher moral atmosphere as regards his home obligations and his obligations to his brother-man. At each visit these and all other suggestions given were discussed with him and his criticism of them invited, and fresh incentives were thought of and given in the form of suggestions. From first to last it was insisted that, in spite of the help he got from the treatment, assured success would only come as a result of personal effort. He had in all nine treatments, and from the first treatment completely lost all desire for drink in a way and to an extent that he could not explain. On his word, verified by that of his wife and others, he has never touched it since.

Mr. — was first seen on January 19, 1912, in his own home. He had begun drinking in a moderate way as a young man, and even after the drink habit had fairly taken hold of him he had on more than one occasion been able to pull himself up and keep free from it for varying periods, the longest being two years. Of later years however (he was forty-two years at the time of commencing treatment), he realised

that his physical state was getting steadily lowered, and that the control which he had once been able to exercise was completely forsaking him. When first seen he was so thoroughly ill and unstrung from heavy drinking that he had been forced to remain in the house in an attempt to pull himself together with more drink. After a preliminary talk, in which he agreed to give himself up to the treatment, all drink which he had in the house was thrown away before his eyes and with his consent. He was then hypnotised, falling at once into a state of somnambulism, and the usual suggestions were given. In all, eleven treatments were given. He stated that the day following his first treatment, when he still felt physically ill and depressed, he hurried home from town on a car rather than risk having to face temptation in any form. From this time on he felt that the desire for drink was gone, and when a few weeks later temptation (as a mental picture) once presented itself definitely and vividly to him, it vanished in a way he could not explain the moment he faced it. Still later he went through a period of depression in his business which would in former times have most certainly led him to seek relief in drink, but he now felt no such temptation, realising rather that the only way to face his difficulties was to keep sober. As in the former case, drink has never been touched since the first treatment.

Sleeplessness.—In treating sleeplessness by hypnotism the same line has been followed as in other cases, combining the giving of suitable suggestions with an effort to rouse the dormant

powers in the patient. Thus it is not only suggested that the patient will experience a desire to sleep at a certain hour, but that he can by concentration learn the art of sleeping, so that in the future, should sleeplessness recur, he has learnt how to treat and overcome it.

Miss ——— had been a bad sleeper more or less all her life, almost regarding it as her usual habit to lie awake till two or three o'clock every morning, and was therefore given special suggestions for sleeplessness while undergoing hypnotic treatment for other reasons. She was counselled not to worry about sleeping badly and not to retire to rest dreading lest she should lie awake, but rather to adopt an attitude of indifference. Suggestions were given during hypnotic sleep to the effect that sleepiness follows complete relaxation of body and mind, that she should therefore deliberately practise relaxation of her body and mind every night on lying down, and that in consequence sleep would come quickly to her, and that she would so realise that it was in her power to acquire the art of always sleeping well. Great stress was laid on the necessity for complete relaxation of the mind by so to speak switching off the current of worrying thoughts or of any definite train of thought, and allowing the mind to dwell restfully on a pleasant thought or a pleasant scene, should it not be possible to create a state of absolute mental blankness. The first night after treatment began she felt sleepy before bedtime came, slept at once on going to bed, and did not awake till her usual rising time. Such a result was not kept up to

quite the same pitch on succeeding nights and she once or twice even had a wakeful night again, but she nevertheless gradually acquired the art of sleeping well, which has stood her in good stead through periods of stress and worry. of great help when given as ordinary directions for sleeplessness and without the aid of hypnotic sleep.

Indigestion is so often due to an underlying mental cause that time and money may be wasted without effecting a cure, unless such a mental cause be sought for and removed. The two following cases illustrate this truth:

Miss —, who had had hypnotic treatment for neurasthenia two years previously, sought advice for ill-defined symptoms of indigestion. She allowed that she was having rather a worrying time at her work, but did not think it was sufficient to cause the indigestion, as she felt she was quite able to keep her worries under outward control. She was put on ordinary medical treatment, but as she could report no improvement on two subsequent visits, she agreed to try hypnotic treatment, on the assumption that the mental influence was greater than she was capable of appreciating. During hypnotic sleep it was suggested that the indigestion was in reality due to worry, and that therefore she must face her work with greater calmness, since the most that could be expected of her was to genuinely do the best she was capable of. Two days later the patient reported herself as greatly improved, both as regarded the indigestion and also as regarded her attitude to her work, and after a second treat-

ment complete recovery was reported.

Though the cure in such a case might have chanced to be pure coincidence, it was accepted by the patient as a clear indication that she had still something to learn about the extent to which the mind is capable of influencing the body.

Miss ——— sought advice for very acute indigestion with occasional vomiting, which had lasted for some days. After a careful physical examination, inquiry as to diet, &c., was coupled with an inquiry as to any mental worry. The patient was, as a result, put on ordinary medical treatment, but reported no improvement on two subsequent visits. The possibility of a mental cause was then still more closely investigated, when a big and genuine worry was acknowledged. The patient was therefore advised to face the worry and talk it out at home, and then try to put it from her as being the possible or even probable cause of her indigestion. She came a day or two later to say that she believed the advice to have been on the right lines, since talking over things had considerably cleared the atmosphere and the indigestion had vanished.

The following two cases, treated by Dr. Milne Bramwell, are of great interest, as showing practically that hypnotism can be and is of immense value in treating defective and difficult children and in enabling them to grow up to be useful members of society.

"Miss ———, aged fifteen, January 22, 1894. Her mother, who had a family history of insanity, was morally insane and lived a vaga-

bond drunken life. Her father and uncle both drank and died insane. I was informed that the patient was deceitful, rebellious, and mischief-making. She frequently complained of queer feelings in her head, but it was difficult to tell how much was real and how much pretence. She was quick and intelligent, and could do her lessons in about a quarter of the time most children took. She was impatient of restraint; she had been sent to two or three families and one school, but in each instance had been dismissed as she was so insubordinate and unmanageable. I was also informed that the patient lied, stole, and had frequent outbursts of violent passion. I found her strong, muscular, and well-developed; palate normal, menstruation regular.

"On January 22, 1894, after consultation with the late Dr. Hack Tuke, she was placed in a nursing home and regularly treated for a month. This was followed by marked improvement, and for the next three years she was seen occasionally but at distant intervals. She grew into a bright, healthy, attractive woman, who in 1903, with the exception that she was still somewhat emotional, showed no trace of her former defects. Recovery confirmed by later reports."

"Miss —, aged 13, March, 1894. Bad family history. Before the patient was born her mother suffered from melancholia. The child herself had been mentally peculiar from infancy; she was persistently untruthful, deceitful, insolent, and dirty in her habits. She had been addicted to self-abuse since the age of

seven. On several occasions she had stolen money from servants and others, sometimes considerable amounts. She had been expelled from school, and had to be kept at home. She was strong, healthy, and well-grown, with nothing abnormal about the head or palate.

"After consultation with Dr. Savage the patient was treated three times a week from March to May, 1894; this was followed by marked improvement. She was seen at intervals during the next two years, and complete recovery took place. Up to the present time (1909) there has been no relapse."

These cases, though few in number owing to lack of space, serve to illustrate the lines on which mental treatment is carried out, sometimes with the aid of hypnotism, at other times without it. They also serve to show how hypnotic treatment has sometimes proved of immense value in cases where other forms of medical treatment and all attempts at reasoning had failed. At no time has the value of psycho-therapeutics been more insistently felt than in attempts at re-education, whether it be the re-education of difficult and defective children or the even more difficult task of the re-education of those who have allowed themselves for years to go through life blind to the fact, that in themselves lie dormant powers which, if drawn upon at every moment of the day, can effect a profound change and lead to the development of a sane and controlled character.

CHAPTER VIII.

EDUCATION OF CHILDREN.

As we have just seen in the preceding chapter, the importance of psycho-therapeutics has been nowhere more strikingly shown than in the treatment of bad habits in children, and also of difficult and backward children, who had resisted all other methods ranging from gentle persuasion to corporal punishment. Such results have opened up a most hopeful outlook for the education of children, especially as regards the possibility of modifying or eradicating hereditary defects. We feel that while many parents are fully alive to their responsibility in this matter, others seem content to provide food, clothing, school education, and a start in life for each child, and trouble themselves but little with the bigger and more vital question of the education and development of each individual character. This chapter has therefore been written for the latter class of parents, in the earnest hope that the value of education may be brought before them in a new light, and that they may be led to interest themselves in it practically, as the biggest and deal with many questions relating to crime and most momentous question of this age and of every age. We feel confident that education, and education alone, is the only radical way to immorality, which we at present attempt to solve by Acts of Parliament. Acts of Parliament but lop the branches, so to speak; educa-

tion alone strikes at the root of the tree. Overwhelming then is the responsibility of every mother, since on the mother rests the onus of much of the early education of her children.

Each child is born into the world resembling in outer appearance either one or other parent, or it may be a near relation or an ancestor, and bearing in itself the elements of the good qualities or the defects of its forbears. Some children start life with a generous dower of

The above suggestions have often been found good qualities, others heavily handicapped by unlovely hereditary traits. While the same education may be given to any six children it is fully realised that each one of the six children will absorb and utilise it differently, according to the individual drift of its character. To wish to have this otherwise would be to wish to repress and obliterate all originality, which would be a retrograde step. There is however an overwhelming difference between realising that one cannot have anything approaching to full control in shaping each child's character and, on the other hand, to allow that character to develop the best way it can with no wise guidance. Perhaps fully as harmful as indifference and neglect is the inculcation of a set of hard and fast beliefs and dead precepts which have not the support of a living example. It is possible, even probable, that an education carried out on these lines is responsible for many wrecked lives.

Hypnotism has strikingly brought out the fact that every human being is suggestible to a greater or lesser extent, but at no time more

suggestible than during childhood, and that for this reason all education given during our earliest years is of untold value. So indelibly indeed are the impressions of childhood stamped upon us that they influence our lives for good or for evil to an extent that is only now being practically realised. In consequence those who have attempted the task of re-educating a warped or twisted character, with or without the help of hypnotic treatment, have been constantly impressed with the necessity for seeking the cause of the warp or the twist in the half-forgotten experiences and memories of childhood.

We therefore urge the fact that this age of extreme suggestibility is the chosen time for deliberately making deep and lasting impressions on a child, that much suffering may be saved if bad hereditary traits be deliberately watched for, and if one set oneself patiently and earnestly to modify them before they acquire a firm hold. Babyhood and childhood are, above all, the time for forming life habits, which will in later years ensure happiness to ourselves, and which will to some extent minimise suffering in others.

Those who have set themselves to train a baby have often marvelled at the ease with which the average baby learns quite unconsciously the habits of regular feeding, regular sleeping, regular motion of the bowels, &c. These habits are taught as it were by suggestion only, and we would urge the fact that it is similarly possible to instil the elements of control, obedience and consideration for others

during the earliest years of a child's life. By a lack of wise influence during these early years much suffering is laid up for the child in after years, when in the hard school of experience it learns slowly and laboriously and with much kicking against the pricks. To a great extent it is true that we must all learn by experience, but how much easier it is to acquire that learning if we have some fundamental principles to guide us. How much easier is our task if we start out into the world realising that we and our affairs are not the central point of the universe, realising that the only way to have happiness is to develop it in ourselves, and above all realising our great responsibility to every soul whose life touches ours.

Having insisted so strongly upon the enormous value of early impressions and early education, we would venture to dwell now upon some points in that education which we feel are not sufficiently emphasized, and which yet are of paramount importance in helping to shape a character to high and useful ends.

No question claims our attention more urgently than the necessity for giving knowledge concerning the functions of the body to growing boys and girls, so that they may realise something of the meaning of manhood and womanhood. It has been found that the elements of this knowledge can be given most easily and naturally by first interesting the child in plants and the method of propagation of plants, and so on through bird life and animal life to human life. It is imperative that such

knowledge should be given to every child, preferably by the parents, or, should they feel themselves unequal to the task, by some competent person. Such knowledge wisely given is the greatest protection that a growing boy or girl can have. For lack of it not only has many a sensitive nature suffered terrible distress of mind, but many a life has suffered shipwreck. Triply armed is he who starts out in life with a deep sense of the high purpose of creation, respecting his body as the temple of his soul, accepting his manhood as a sacred gift which he dare not barter for a mess of pottage, but which he holds as dearer than life itself and closely linked in its rise and fall with all womanhood. Degradation of manhood must then mean to him degradation of womanhood, and elevation of manhood must mean elevation of womanhood.

We would next plead that during the suggestible age of youth every effort should be made to stamp a broad and sympathetic religious outlook on children, so that they may realise that unity of purpose is all-important and that differences of detail are of the utmost insignificance. The thing of vital importance may surely be regarded as being the attitude of every human soul to Goodness, Truth, and Beauty, as shown, not in any special set of creeds but in all acts, even the most trivial, of daily life and conduct. To love one's fellow-beings in vague theory brings to them no sense of warmth or comfort, and can have no practical value except in so far as that theory translates itself into acts of considera-

tion and kindness.

We feel that it is impossible to set too high a price on truthfulness, sincerity, and high moral courage, as the fairest flowers that any life can show. It surely cannot be too deeply impressed upon a child that never do we display a greater grandeur of soul than when we stand upon our feet to acknowledge our errors and to accept full responsibility for them, nay more, that not to do so is to stunt all moral growth within us. Great need is there also to emphasize the value of having the moral courage to dare to be ourselves, and to regard all deliberate self-deception as a lie, to dare to set aside all conventions which cripple our thoughts and actions, to dare to throw off the dead hand of a false respectability which glosses over wrong-doing, but which dreads any false step which may reveal it to the world.

Above all, in all efforts at early education let us put in the forefront the divine quality of forgiveness, not a grudging and churlish forgiveness, but a forgiveness that "droppeth like the gentle dew from heaven," a forgiveness that we give in good measure pressed down and running over.

CHAPTER IX.

EDUCATION OF ONESELF.

In the preceding chapters we have attempted to show the extent to which psycho-therapeutics, with or without hypnotism, has modified

medical treatment, how it has thrown a flood of light on the mental origin of many diseases and put a fresh weapon in the hands of the medical profession. Through the knowledge it has given us of how characters may be transformed, of how bad habits may lose their hold and a more balanced and controlled life be built up, we are led to turn our thought to consider the extent to which this may be applied in the education of oneself. How seek to change the characters of others unless one has first learnt and appreciated to the full the defects of one's own character, and set oneself with might and main to carry out the education of oneself with a view to building up just such a balanced and controlled character as one would fain help others to attain to. Too common is the tendency to regard a man's character as something quite beyond his control, as something he was born with and must carry unaltered to his grave; and this tendency finds expression in the oft-heard phrases, "I have always had a quick temper," "My nerves always get the better of me," "I am emotional; I was made so," pronounced in a tone of fatalistic acceptance of the fact, and as it were with a refusal to accept any responsibility for the consequences which may accrue to others from such defects. To talk to such people of the possibility of educating oneself so as to eradicate such defects is to suggest what seems to them something entirely outside the practical politics of daily life, something too cloudy and vague to be considered practicable.

The question of the education of oneself is indeed a vital one, since it is intimately bound up with the whole question of human happiness. To find happiness is the desire, the craving of every human creature, whether expressed in words or only vaguely felt as a something that is lacking. We set out by very various paths to search for happiness, and but few, I fear, return from the search satisfied. Many of us, like Noah in Ibsen's *Doll's House*, awake one day to find that we have only been "merry," not "happy," and well is it for us if we then realise as she did and with deep conviction, that we shall only find happiness by setting out afresh, on the more steep and thorny path of self-education:

"Does the road wind uphill all the way?
Yes, to the very end."

Life seems but ill-adapted for happiness to be found in worldly success, in the enjoyment of pleasure or even in the joys of home life, if we, as it were, stake our all on finding it and holding it there. Fortune with one turn of her wheel may destroy the worldly success which only yesterday seemed so assured, may dash the cup of pleasure from our lips, or may cloud the home life with sorrow and leave us lamenting our lost happiness. Further, if we pause to think for a few moments we are bound to realise, as a profound truth, the fact that we ourselves create much of the suffering we endure, and for which we blame others, our temperament, our environment, our ill-luck, in fact anything and everything except our un-

disciplined selves. We feel certain that in other surroundings and with other work we should be happy, forgetting that we largely create our own environment and carry it about with us wherever we go, so ensuring to ourselves either a great measure of happiness or a great measure of misery. Were it only we ourselves who suffered from this neglect that were sad enough, but sadder still is the fact that those with whom we come in daily contact suffer perhaps more, since life is not lived alone but in company with other human souls. Life being so full of uncertainties and much of what we count happiness being held on such an uncertain tenure, we ourselves creating so much of our unhappiness, it would seem that the most sane and rational thing to do would be to face these facts, and to set ourselves to the task of self-education by developing those qualities which will be a shield and buckler to us, and by modifying and even eradicating every defect which would lend additional difficulty to an already all too difficult life. So and so only shall we find happiness, a happiness that exists in the depths of ourselves, a happiness that grows in fulness as our life grows, a happiness that enables us to meet the rebuffs of life with greater equanimity and that expresses itself in a sane and controlled life. Nor can such a means of finding happiness be termed egotistical or selfish, since individual progress implies the progress of the race, since everything that leads to greater control in one life leads to a diminution of suffering in numberless other

lives, and since the cultivation of the Good, the True, and the Beautiful in one human being leads inevitably to such a profound change in him that life is counted of but small worth, except in so far as it is spent in service for others.

The education of oneself may be expressed in other words as the formation of one's character, and the formation of one's character is incontestably *the* most important business in life. In attempting to navigate the difficult seas of life without having devoted any time to what we might call the laws of moral navigation, we show the same appalling foolishness as would be shown by any man who attempted to cross the Atlantic alone with not a vestige of nautical lore. Such a man would be indeed condemned as mad, and yet numbers of us are in much the same position without realising it. Happy indeed are those to whom this knowledge comes before their frail bark suffers shipwreck.

What then is character, the attainment of which is the ultimate object of all attempts to educate oneself? The Greek word from which character is derived at once gives us the key to its meaning, that word signifying a mark engraved or impressed, as on a coin. To quote an American author, character is "an epitome of a man's past and a forecast of his future."

From these definitions we realise that as a result of our attitude to life, as a result chiefly of the manner in which we have acted in times of storm and stress, we set a mark upon ourselves which is visible to others, and which constitutes our character. Character, however,

is not a fixed and stationary thing; it changes from day to day, it possibly suffers infinitesimal modification from hour to hour, from minute to minute, according to the great law of transformation, and it is because of this law that we dare to urge with confidence and hope the task of the education of oneself. We see the law of transformation at work both in the animal kingdom and in human lives, and though these transformations are for the most part gradual there are some which startle us by their suddenness, or shall we rather say by their apparent suddenness, for a sudden change or crisis is after all only the outward evidence of changes which have been at work invisibly for an indefinite period. As we are concerned at present with individual lives we shall not dwell upon transformation in the animal kingdom and in nature, fascinating as such a study would be. We would only indicate one or two instances in passing, such as the wonderful lesson of triumphant progress contained in the life history of the nautilus, which in its spiral home "ceaselessly leaves the past year's dwelling for the new," and which inspired Holmes to write "The Chambered Nautilus." Most wonderful of all perhaps is the miraculous transformation of the Mayfly, so fascinatingly described by Edward Carpenter. In the twinkling of an eye "the brown scaly creature, clumsy and sluggish, that crawls about the bottom of running streams, or hides itself in small semicircular burrows in the banks," bursts its bonds, leaves its scaly husk on the

water, and flies into the air "a little fairy with four pearly lace-like wings, and whitey-green body about an inch long, and tail of three long hairs." Wonderful as these are, is there after all any transformation more wonderful or more miraculous than the "ungaped-at Pentecostal miracle" of spring?

No less interesting and no less wonderful is the study of transformation in human lives during the development of the embryo to perfection and during each life history from infancy to old age, gradual evolution being marked at intervals by apparently sudden crises. Our bodies alter from day to day, as the result of a combined process of decay and regeneration; each morning sees us subtly transformed by the preceding night's sleep; our ideals suffer modification as from year to year life opens out more vast and more endlessly full of hidden possibilities, and there may come sudden crises altering the whole current of a life. We dare to affirm that in a far greater measure than many of us realise it is in our power to direct these successive developments, to take command at the time of a crisis, and so to build up a stronger and more balanced character than we started with at birth. It is but our bare duty to bravely undertake this task, this herculean task of the education of oneself, in the interest of our fellow-creatures, since they suffer in a greater degree even than we do from our neglect of this duty.

The keynote to all sane, healthy, and happy life is control, control in every direction, con-

trol of our bodies, control of our thoughts, of our emotions, of our acts. As our thoughts are the mainspring of our lives, all efforts at control must first be directed to them.

It is impossible to enter here into a discussion of freewill versus determination, to discuss the question of whether under certain given circumstances we act as we do by choice, or merely because certain powerful motives draw us in that direction and so cause us to have the illusion that we act by choice. While we fully appreciate the fact that the object of all education is to create in us such an intense enthusiasm for the Good, and the True, and the Beautiful that these shall draw us upward powerfully with magnetic force and away from baser motives, it is yet the experience of all of us that even such an intense enthusiasm does not save us from exclaiming many times and oft with Paul, "The good that I would, I do not, and the evil that I would not, that I do." When we come to realise that thought-control, with control of our emotions and acts, is something that we cannot merely be enthusiastic about at a distance, but which must be put into practice at every moment of the day if we are seriously to pursue Goodness, Truth, and Beauty; more than that, when we realise at close quarters the appalling difficulty of our task, then we awake to the fact that hand in hand with enthusiasm there must be concentration of our will-power in constant daily practice. It seems strange that while we realise that to master the piano, a new language, or any new branch of learning, steady

practice day by day is necessary, we expect thought-control, a far more elusive and difficult pursuit, to come as it were by intuition.

We have in a previous chapter dwelt on the enormous influence of the thoughts we think to cause ill-health. Equally great is their influence to cause happiness or misery, and vast numbers of us doom ourselves to a lowered state of bodily health, to daily unhappiness, to nervous breakdowns, and even to temporary or permanent mental derangements, by our lack of control over the thoughts we think. We are obsessed by fears and apprehensions—fear for ourselves, fear of life and of the vague future, fear of death, fear for others, fear of public opinion and conventions. We live through in apprehensive imagination many trying and painful moments which we are never called upon to face, we torture ourselves by brooding over things which cannot be altered, and at every step we magnify our sufferings by self-pity. Comforting indeed is the thought that many of the real difficulties of life have to be faced at a moment's notice, and come upon us often most unexpectedly. While it is true that all day long thoughts come pouring into our minds against our will, that we cannot will to think one thought and not to think another, it is on the other hand forcibly true that by constant and unceasing practice we can gradually acquire the habit of controlling our thoughts and of banishing from our minds worrying trains of thought.

The necessity of opening our eyes wide to the far-reaching influence of our thoughts in caus-

ing health or disease, happiness or unhappiness, cannot be too strongly urged. Still more strongly would we urge the duty of every human being to set himself to gain thought-control by persistent and patient effort, by devoting to it some of the time, energy, and interest which are cheerfully given to pursuits which have but little bearing on the great question of the art of living and the art of happiness.

Much help may be got in acquiring thought-control by altering our outlook on life, by realising that an altered point of view often has the power to rob thoughts of their sting and their worrying quality, and so to make it easier for us to banish them. If a train or steamship accident occurs regrets alone are not indulged in, but an inquiry is instituted with the object of providing greater safeguards for the future. So with the "accidents" of life, either those which are past or those whose advent we dread, much help may be got by readjusting our point of view, so that self does not fill the whole horizon.

The greatest safeguard we can have is to accept limitations and to dwell upon and make the most of compensations, that is, to accept life as a compromise, for a compromise it is from beginning to end. Many of us waste precious years in pursuing a will-o'-the-wisp; "mine be some figured flame, which blends, transcends them all," we cry. Many of us go about from day to day with our eyes upon "the ends of the earth," losing all the joy which is stored in near and familiar objects. Happy

indeed are those who learn in time, not merely to accept life as a compromise, but to accept it gladly and joyfully, to realise that in doing so we escape much fruitless fretting and worrying, that we open many doors which had otherwise remained closed, and set free fresh energies to make that compromise a supreme success.

Another priceless safeguard against "accidents" is the conviction that our temperaments cause half our sufferings, and that temperaments are wonderfully subject to modification, if we choose to pull ourselves together and will that we *shall* effect this modification, however uphill and difficult the task may be.

Again, we have great need to learn the truth that suffering, if met with a courageous and undaunted spirit, has the power of effecting sweeping reforms in ourselves, of putting into our hands the keys of many locked doors, and of giving a wonderful strength and dignity to life.

Lastly, many of us refuse to realise the great fact that, however much we may wish to, we *cannot* live to ourselves alone, that during our progress from cradle to grave we touch and influence hundreds of other lives, and that therefore we are responsible in an appallingly wide circle for all our thoughts and acts, and that this responsibility does not expend itself in a vague theory to that effect, but must hold for every thought we think, and every act we do in the trivial round of our daily duties.

We have dwelt at length on thought-control, since thoughts are the mainspring of acts, but

a few words must now be said on the practical application of self-control and exercise of will-power in everyday life by the formation of habits. It has certainly been the experience of many that we leave our habits to form themselves, and often first become aware of their existence when they obtrude themselves pleasantly or unpleasantly into our daily life. How often we hear, "I have got into the habit of doing so-and-so"; how comparatively seldom we hear, "I have formed the habit of doing so-and-so." And yet our habits form our characters, just as our habits are an outcome of our thoughts. It is, however, when we turn our thoughts to the question of self-suggestions that the necessity for thought-control presses itself home. A self-suggestion, as we have seen, is a suggestion which we give to ourselves either consciously or unconsciously. It has been shown that most of us are dominated by our self-suggestions to an appalling extent without realising it, and therefore without realising that it is in our power to turn the tables by dominating *them* and to deliberately give ourselves suggestions of a healthy and invigorating character.

Let us frankly realise the extent to which we are ruled by unhealthy self-suggestions; let us indulge in a good laugh at ourselves after each fresh discovery, since no healthier form of exercise exists than that, and let us set ourselves not only to make counter-suggestions, but to deliberately suggest to ourselves each morning strong and healthy thoughts which shall dominate our day. In this way we shall

find not only that it is in our power to exercise a great control over our bodies and minds, but that we can train ourselves to many things which we had previously regarded as quite beyond our control. To many people the idea is novel that one can train oneself to sleep well, should one have previously been a bad sleeper, and yet as we have shown in a previous chapter the failure to do so is often due to a refusal to use the powers we have.

We believe that similarly by exercise of will-power, and by constantly drawing upon the spiritual forces around us and in us, it is possible for every sane man and woman to modify and even eradicate defects of character, and to deliberately cultivate qualities which are lacking and which they would fain acquire. We believe that for this, not only is a great faith in the existence of, and an equally great enthusiasm for, Goodness, Truth, and Beauty necessary, but a constant and unceasing effort, literally the same constant and unceasing effort which we put forth to acquire a new branch of learning, a new accomplishment or a new sport. The direction which the fight takes will depend on the individual character, since the weak points of one person may be the strong points of another.

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