

HYPNOTISM AND ALLIED PHENOMENA.

BY WALTER SPENCER, M.D., M.R.C.S., ETC.

In judging newly observed phenomena for the purpose of reconnoitering the field for further exploration it is not easy to steer a medium course between the caution which demands too much and the receptivity which is satisfied with too little investigation. The former borders upon obstructiveness, the latter merges into credulity. In the first part of this paper I shall state ascertained facts, after which I shall have to lay bare the dilemma between necessary caution and regrettable credulity.

In 1843 Dr. James Braid, of Manchester, found that he was able in certain patients to induce an artificial sleep, accompanied by insensibility to pain. He made use of the power more for the relief of pre-existing pain than as a help in surgery, but under his auspices the eminent dentist, Sir J. Tomes, was surprised to find that he could extract several teeth without his patients having any consciousness of the operation. Dr. Braid used to rivet the attention and eyes of the patient upon something shining placed close at hand so that it was a strain to look at. He considered that fatigue of the ocular muscles was a chief factor in inducing the required condition. The new process was christened Braidism, but was not adopted to any extent in England, the triumph of the easy anæsthetics, chloroform and ether, seeming to render its practice unnecessary. In France, however, two great schools devoted to the subject (which Braid called hypnotism) have conducted interesting experiments for many years, under Professor Charcot, at the Salpêtrière, Paris, and Professor Liébault at Nancy, the latter becoming known to fame as the originator of "hypnotic suggestion." Charcot is one of our foremost authorities on the management of hysteria, and has pursued the enquiry into hypnotism chiefly with reference to that abnormality of nerve function. We shall see, however, that the popular impression as to hysterical subjects being most predisposed to hypnotic influences is by no means proved.

At a general meeting of the British Medical Association held in August, 1889, a special section was devoted to hypnotism. It resulted in the expression of divergent opinions, in which, broadly speaking, French physicians maintained the affirmative and English physicians the negative view of the value of the study. Amongst the speakers was Dr. Voisin, of the Salpêtrière, who stated that he had by this means cured persons suffering from hallucinations and from

sensory disturbances. Suicidal ideas and mania had disappeared under the use of the method. He had succeeded in curing dipsomania and morphinomania, as well as obstinate cases of juvenile depravity. Some of his patients had been put to sleep for from six to eight days. He had been able to transform his patients' habits of thought, and had brought them to love the good, whereas they before had only loved the evil. Dr. Yellowlees expressed amazement at these assertions, and remained incredulous, but Dr. Tuckey confirmed them from his experience of the practice of Dr. Liébault, who had successfully treated dipsomania and neuralgia. He cited the institution at Croydon, conducted by the Rev. Arthur Tooth, for the treatment of inebriates, where hypnotism was employed with much success, but he had been disappointed in the results of its application to the cure of melancholia, only 6 per cent. of the patients having proved susceptible. In the majority of cases it was not true that a patient after hypnotism remained a mere tool in the hands of the operator. Dr. Ireland remarked that Braid had made claims as startling as those of Dr. Voisin. In one instance which he had published a flow of milk had been brought into one breast of a woman, while the other remained flaccid. Dr. Robertson said he had visited the Salpêtrière Asylum, and could corroborate Dr. Voisin. Dr. Percy Smith, of Bethlem Hospital, concurred with Dr. Yellowlees. He had made trial of the method with the assistance of a professional hypnotiser, and the results had been almost entirely negative; in fact, he had not been able to get insane patients into the hypnotic state. It seemed impossible to secure the necessary attention. This view of the question was confirmed by Dr. Goodall and others. Dr. Turnbull Smith asserted that in his experience nineteen patients out of every twenty had proved to be susceptible, but in some cases only after repeated attempts. Exhaustion of the optic nerve by means of staring had been found most efficacious.

This divergence of opinion extends to the methods recommended. Dr. Forel, of Zurich, states that he had noticed very ill-effects from using what he terms "the old bad method of fixation of vision."

Last year the attention of the medical profession in England was aroused by the report of a meeting held at Leeds, on March 28, of some sixty medical men and dentists assembled, at the invitation of Messrs. Carter Brothers, to witness a series of operations under the hypnotic influence of Dr. Milne Bramwell.

The first case was hypnotised at a word, and three teeth extracted without the operation having been felt.

The next case was that of a servant girl, M. A. W., aged 19, on whom, under the hypnotic influence induced by Dr.

Bramwell, Mr. Hewetson had a fortnight previously opened and scraped freely, without knowledge or pain, a large lachrymal abscess, extending into the cheek. Furthermore, the dressing had been daily performed and the cavity freely syringed under hypnotic anæsthesia, the "healing suggestions" being daily given to the patient, to which Dr. Bramwell in a great measure attributes the very rapid healing. She was put to sleep by the following letter from Dr. Bramwell, addressed to Mr. Turner:—

"Burlington Crescent, Goole, Yorks. Dear Mr. Turner,—I send you a patient with enclosed order. When you give it to her she will fall asleep at once and obey your commands.—J. MILNE BRAMWELL.

"Order.—Go to sleep at once, by order of Dr. Bramwell, and obey Mr. Turner's commands.—J. MILNE BRAMWELL."

This experiment answered perfectly. Sleep was induced at once by reading the note, and was so profound that, at the end of a lengthy operation, in which sixteen stumps were removed, she awoke smiling, and insisted that she had felt no pain, and, what was remarkable, there was no pain in her mouth. She was found after some time, when unobserved, reading the *Graphic* in the waiting-room as if nothing had happened. During the whole time she did everything which Mr. Turner suggested, but it was observed that there was a diminished flow of saliva and that the corneal reflexes were absent, the breathing more noisy than ordinarily, and the pulse slower.

Dr. Bramwell took occasion to explain that the next case, a boy aged 8, was a severe test, and would probably not succeed, partly because the patient was so young, and chiefly because he had not attempted to produce hypnotic anæsthesia earlier than two days before. He also explained that patients require training in this form of anæsthesia, the time of training, or preparation, varying with each individual. However, he was so far hypnotised that he allowed Mr. Mayo Robson to operate on the great toe, removing a bony growth and part of the first phalanx, with the result that he appeared to know very little of what had been done.

It was necessary in this case for Dr. Bramwell to repeat the hypnotic suggestions. Dr. Bramwell remarked that he wished to show a case that was less likely to be perfectly successful than the others, so as to enable those present to see the difficult as well as the apparently easy straightforward cases; "in fact," as he said, "to show his work in the rough."

The next case was a girl of 15, highly sensitive, requiring the removal of enlarged tonsils. At the request of Dr. Bramwell Mr. Hewetson was enabled in the hypnotic state to extract each tonsil with ease, the girl, by suggestion of the

hypnotiser, obeying every request of the operator, though in a state of perfect anæsthesia. In the same way Mr. Hewetson removed a cyst of the size of a horse bean from the side of the nose of a young woman who was perfectly anæsthetised and breathing deeply, and who, on coming round by order, protested "that the operation had not been commenced."

Mr. Turner then extracted two teeth from a man with equal success, after which Dr. Bramwell explained how his patients had been completely cured of drunkenness by hypnotic suggestion. To prove this to those present, and to show the interesting psychological results, the man was hypnotised, and in that state he was shown a glass of water; he was told by Dr. Bramwell that it was "bad beer." He was then told to awake, and the glass of water offered him by Dr. Bramwell. He put it to his lips, and at once spat out the "offensive liquid."

Mr. T. S. Carter next extracted a very difficult impacted stump from a railway navvy as successfully as the previous case. Dr. Bramwell described how this man had been completely cured of very obstinate facial neuralgia by hypnotism, which had been produced by working in a wet cutting. On the third day of hypnotism the neuralgia had entirely disappeared (now some weeks ago) and had not returned. The man had obtained refreshing hypnotic sleep at nights, being put to sleep by his daughter through a note from Dr. Bramwell or by a telegram, both methods succeeding perfectly.

The facts as recorded may be taken as establishing the existence of hypnotism and of hypnotic suggestion. The divergent opinions of practitioners are, however, very hard to reconcile.

Dr. Moll denies that any hysteria or weakness of any kind in the physique of a patient leads to his being more readily hypnotised. Professor Wetterstrand says it depends more on character than temperament, and that the most impressionable ages are from 3 to 15, fit subjects after the age of 30 being rare. Dr. Sherman Bigg maintains that no man of average capacity can be hypnotised against his will, and that even when hypnotised he can restrict the hypnotiser's influence. Professor Bernheim believes that the suggested effects exist only in the idea of the patient; that if it is suggested that he cannot see a certain object he continues to see it, but imagines he does not, and acts accordingly. He is of opinion that the number of persons who can be readily influenced is very limited, and yet at a demonstration given in Paris he elicited confessions of imaginary crimes, weeping, laughter, dumbness and powerlessness at will from persons who had not been previously hypnotised, and who, to all appearance, were in full possession of their senses, playing on their nervous system as upon an instrument.

At a meeting of the Medical Institute of Liverpool Dr. Grossmann reported he had seen Dr. Bernheim hypnotise one patient after another in his hospital wards until not one remained awake; also that a blister was produced by the application of a postage stamp, which, it was suggested, would act as a vesicant.

Dr. Liébault asserts that concentration of a patient's mind on the idea of sleep will induce sleep by leading to forgetfulness of the outer world and to a state in which suggestions are readily adopted and acted on, the hypnotic differing from the ordinary sleep in that there exists a relation between the sleeper and the operator. Dr. Forel considers that hypnotism is a state of sleep artificially induced, during which the course of the patient's dreams can be influenced. It depends, firstly, on the power of falling asleep easily; and, secondly, on willingness to submit to the operator's will, the disappearance of nervous symptoms being explained in the same way as the sudden cessation of toothache or sciatica after a shock. He could induce sleep readily in fifty patients out of seventy-two.

The school of Nancy teaches that the lethargic, cataleptic, and somnambulic stages of hypnotism can be produced at any time by the suggestion of the operator, suggestion being the key to all the phenomena. The psychological stages of hypnotism, although they may be divided into three—lethargy, catalepsy, and somnambulism—are variously classified by different observers.

According to Wetterstrand they reveal:—

1. Sleepiness and sense of weight.
2. Inability to move a muscle.
3. Unconscious automatic movements.
4. Consciousness only of the operator and obedience to his will.
5. Somnambulism and complete insensibility.

According to Haidenheim:—

1. Imitative movements.
2. Exaltation of special senses.
3. Illusions and hallucinations.
4. Loss of pain and of sensation.
5. Tonic spasms.
6. Spasms of the ocular muscles, dilatation of the pupils, accelerated pulse and respiration.

According to Liébault:—

1. Torpor of limbs and somnolence, the will power being still available if needed.
2. Retention by the limbs of any strained posture, the patient still remaining conscious.

3. Perception of the operator only.
4. Advanced automatism.
5. Oblivion.
6. Submission to the operator's suggestions.
7. Susceptibility to post-hypnotic influence.

The methods of operators vary. Some employ slow passes made at a short distance, some stroking, some ocular fixation, some orbital compression, some any weak, continuous, and prolonged stimulation of the nerves of sight, touch, or hearing, some verbal suggestion alone. Haidenheim invites the patient to sit down, tells him that sleep will cure him, urges him to concentrate his mind entirely on sleep, looking at him very keenly all the while; tells him he will feel weight in his eyeballs and limbs, and gradually be unable to move. And when sleep has been induced the desired instructions are suggested to him.

Liébault begins by reassuring the patient, telling him to banish all fear and extraneous thoughts, to concentrate his mind upon following the operator's words and suggestions. He then suggests the stages of sleep one by one as follow:—Your eyelids are becoming heavy; you can hardly keep them open. My voice sounds more and more distant. Your sight grows dim; objects appear indistinct. Numbness is creeping over your limbs. You cannot keep awake; your eyes are shut. (Here he closes the patient's eyes.) You are fast asleep. He then rubs any affected parts, suggesting that pain is to pass away; that disturbed functions are to be restored to normal action, and so on, concluding with the suggestion that no hypnotiser's influence except his own shall be obeyed. He arouses the patient by a word or a few passes across the face. The foregoing cannot fail to remind us of the reported procedure of American faith healers.

Charcot induces the stage of lethargy either by compressing the eyelids or by causing the patient to gaze fixedly at a bright point; that of catalepsy by lifting the eyelids during the preceding stage or by a sudden flash or shock, and that of somnambulism by gently rubbing the top of the patient's head.

Variety of opinion and of practice is accompanied by variety of theory. Among theorists Mr. Julian Hawthorne regards hypnotism as akin to the mental exaltation of the poet and the orator. Dr. Regnier finds in it nothing of this sort, not even the ecstasy of the martyr or religious devotee. The practice is not devoid of danger. Dr. Julius Lolow records how an amateur at a friend's house volunteered to hypnotise another visitor, and after two trials succeeded so well that the subject became extremely excited, lost the power of speech, and then passed into the condition of catalepsy. Subsequently he had severe convulsions. He had been hypnotised

by being made to look at a diamond ring, and afterwards the sight of anything glittering threw him into a state of violent excitement. The floor of the room in which the physician found him was covered with cushions, as he frequently threw himself from the sofa on to the floor. He performed various odd automatic movements, slept only in snatches, awaking in nightmare, and, in fact, was in a condition to which the French physicians would probably apply the term grave hysteria with maniacal excitement. He was treated with full doses of sedative drugs, but did not at first show any signs of amendment. After ten days the convulsive attacks were replaced by periods during which he sang persistently. He would sing over song after song, apparently every song he knew, and as long as one song remained unsung nothing would stop him. After about a fortnight of this sort of thing he had an attack of fever, followed by copious perspiration and asthma. A few days later he had another feverish attack, again followed by perspiration, after which he declared himself quite well. From first to last he was seriously ill for three weeks. The cause of the fever is not very clear. His physician believed it was probably due to inflammation of the anterior part of the brain. Instances similar to this have not been infrequent. It has therefore been resolved by the committee of the British Medical Association that public exhibitions of hypnotism are dangerous, and should be prohibited, a prohibition which has already become law in Belgium, France, Russia, and Portugal, the only result to State medicine of the study of hypnotism thus far.

I have hitherto been dealing with facts which appear to obtain general acceptance. Allegations are made as to further phenomena which require a good deal more patience in investigation. The power of raising a blister by means of an inert postage stamp or of causing a patient to obey commands given by letter shortly after leaving the hypnotiser is transcended by the alleged power to compel obedience after a considerable lapse of time. Induction of a condition of double consciousness, alternation of two separate mental states, lasting each for considerable periods, in which two different personalities, unconscious of each other, are revealed, is more extraordinary still, while the marvels of somnambulism, the display of faculties independent of the senses, reading with bandaged eyes, and description of simultaneous remote occurrences rival old legends of possession.

It will be useful to give you a brief sketch of the observations which preceded hypnotism. When we remember that this is not a new science, but only a new name, and that it is the habit of mankind to re-christen and adopt to-day many things which it rejected and reprobated yesterday, it should

make us tolerant of other allegations the truth of which is not yet established.

About 1670 a gentleman named Valentine Greatrex, the "stroker" who had acquired repute as a healer of disease by what was probably a combination of hypnotism and massage, was actually commissioned by King Charles II. to exercise his skill during the prevalence of certain epidemic diseases. In 1772 Anthony Mesmer, M.D., of Berlin, began to investigate the influence of magnetism, and is said to have effected many cures. On propounding his theory of animal magnetism he provoked a storm of envy and malice which overwhelmed him, many of his patients, even after their transports of gratitude had cooled, being so swayed by popular prejudice as to aver that their cures must have been effected by chance. He was ejected from Germany, and no University deigned to give his claims fair trial, though they have come down to us under his name as "Mesmerism."

Surgeons of reputation, Recamier in 1829, Cloquet, and others, made occasional use of the method. In 1837 Dr. Elliotson established in London a Mesmeric Hospital, where he performed serious operations painlessly, but as he persisted in proclaiming the superinduced phenomena of "clairvoyance," transposition of the senses, etc., etc., he evoked a storm of contumely which upset the balance of his mind, and led to the termination of his existence by his own hand.

At about the same time that Braid began his experiments Dr. Esdaile, in India, in ignorance of those experiments, and under very different conditions, arrived at similar results. After five years' practice he left a record in Calcutta of 261 painless operations of severe character. This direct continuation of the practice, from Mesmer down to Charcot and Liébault, ought to influence our tardy recognition of the source to which honour is due.

A view prevails among the modern differing from that of the ancient professors of hypnotism. The former generally consider the phenomena to be wholly subjective, whereas the latter tended to the belief that they were objective. It is noticeable, however, that the former are not ignorant of the passage of some influence from the operator to the subject, Liébault admitting that "there exists a relation" between them, and Haidenheim when hypnotising looking at the patient "very keenly."

The belief that there is some emanation from the operator resolves itself, in my mind, into a recognition of the telepathic force of will power; that there is a transference of ideas from brain to brain. This transfer of force seems, like the zymotic diseases, to require an incubation period, which incubation period in this instance is characterised by somnolence or lethargy.

The British Medical Association recognises that hypnotism cannot be considered a general remedy of reliable action, and lays down the rule that a stranger should never be hypnotised without a suitable witness. No satisfactory explanation having yet been given, I am justified in assuming that the medical profession has now got hold of something which we do not understand. My mind was a *tabula rasa* as regards this subject, when, fifteen years ago, finding myself possessed of means and leisure, I undertook to study hypnotism and allied phenomena. Attracted by an advertisement, I made acquaintance with an illiterate man named Ashton, proprietor of a sort of hospital for magnetic healing, and took from him a series of lessons in his art. He was able to alleviate pain and disease chiefly of joints, displaying diligent patience and manipulative skill. I was impressed that a force emanated from him. On one occasion when he was declaiming in front of me at some 6 feet distance the rise and fall of his arms (he was a vehement gesticulator) when directed towards me so affected my nerves that I had to ask him to desist. After twelve lessons I found that I could generally relieve slight neuralgias of my friends and family. My opportunities were few. I could not go about gathering patients. The faculty I had acquired became enfeebled and left me through want of use, in accordance with Ashton's doctrine that it could be acquired and cultivated only by constant practice in most instances. After this I went through the whole round of spiritualism that was accessible to me, finding it wholly unprofitable to the mind, until I obtained an introduction to a well-known old gentleman, a Mr. Frederick Hockley, a man of erudition, but apparently of great credulity. His claims to a knowledge and practice of the occult sciences, made to me in confidence, simply, modestly, and as a matter of course, were little less than those of the mediæval magicians. Thirst for knowledge led to my becoming his most intimate friend, to whom he bared his heart, his history, and his lore. I cannot too highly estimate his goodness and nobility of mind. A bibliophile and bookhunter, he possessed an extensive and very valuable library of books and MSS. (now in the British Museum by his bequest), but the series of his own minutely-kept diaries, ranged in handsome bindings on his shelves, inspired me with more interest than all. He had long abandoned all other occult practice to devote himself to what we call "divination" by mirrors and crystals, consideration of which, I believe, will be found to throw a side light upon hypnotism. The notes of his numerous experiences, or, as he called them, "actions," bore by turns upon the most interesting metaphysical discussions, revelations on past, current, and in some instances future events, and scenes and anecdotes like those of

an enthralling novel. The key to all the unexplained phenomena revealed by hypnotism and by all his studies is, he taught, to be found in concentration of will power by the operator.

Society has of late years been exercised in mind about thought transference and telepathy. We are familiar with drawing-room experiences of collective will power over one of a company who may thus be impelled to perform almost any incongruous act. I feel convinced that individual will power concentrated upon another by one who is able to use it, and under favourable conditions, must be reckoned remarkable, and in some cases irresistible. A sad case of the unintentional misuse of the influence is within my knowledge. About twenty years ago an officer in garrison at Malta found he thus was able to control the actions of a young member of the ancient nobility of that island, and was accustomed to amuse his brother officers at the expense of that gentleman. He carried it so far as to cause the victim to pick pockets. The officer returned to England, and some time afterward many small articles having been missed from the Club a detective was employed, who traced the thefts to the nobleman in question. The culprit was tried, found guilty, and sentenced, to the disgrace of his family and the ruin of his career.

Obedience by the subject in after days to suggestions given in the hypnotic state appears to be an extension of the influence which we are not able to explain. The supersensuous perceptions alleged to become manifest during the stage of somnambulism appear to be related to those recorded by Frederick Hockley from hypnotism by mirrors and crystals, and are equally unexplained. The evidence for this class of unexplained phenomena is becoming very strong, and rebuts dogmatism on the subject. Bearing in mind the slow stages of official recognition accorded to the simpler facts of hypnotism, we cannot be surprised at delay in the acceptance of its more advanced phenomena. These in former days always ruined the reputation of those who attested them.

A writer in the April number of the *Nineteenth Century* magazine, reviewing the claims of the advanced phenomena and urging them on the consideration of men of science, asserts "That it is possible for an experimenter to produce a hallucinatory image of himself in the perception of a friend at a distance without the friends having received any previous suggestion or anticipation that such an image would appear," and claims it as a fact "attested in several instances by trustworthy persons at each end of the chain." This claim, if it can be substantiated, may be found to correlate the admitted phenomena of hypnotism and telepathy with the astounding claims of the late Frederick Hockley.

Amongst instances where revelations received through his mirrors were confirmed by subsequent independent evidence is that which has been frequently quoted in spiritualistic literature of the minute description of a startling incident which occurred to the late Sir Richard Burton during his journey, in disguise, to Mecca, at a time when the world had given him up for lost. This vision, recorded in Hockley's diary simultaneously with the event, was verified and attested by Burton on his return. In the same diary stand recorded the ruin of the Tuileries and the attendant conflagrations in Paris years before the events of the Commune.

Amongst the array of extraordinary pretensions which the close of this century is reviewing we may detect much fraud, much collusion, imagination, and credulity, yet if anyone will devote three years, as I did, to their patient investigation, I say that he will be unable to deny the presence of some facts whose nature and relations to explained facts he will be unable to explain. And this is the attitude of the scientific world towards hypnotism.