

# SUGGESTION

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DEVOTED  
TO  
The Study  
AND  
ADVANCEMENT  
OF  
SUGGESTIVE  
THERAPEUTICS.



WM. C. DOBSON, M. D., C. M., HARRISVILLE, O.

ALSO  
TO THE  
Scientific  
INVESTIGATION  
OF ALL  
OCCULT  
PHENOMENA.

HERBERT A. PARKYN, M. D.

## HYPNOTISM

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## CONTENTS FOR APRIL, 1900

|   |                                       |     |
|---|---------------------------------------|-----|
| Nervousness .....   | W. Xavier Sudduth, M. D. . . . .      | 77  |
| Planners for Home .....   | .....                                 | 82  |
| Manual Suggestion .....   | S. F. Meacham, M. D. . . . .          | 83  |
| Suggestive Anaesthesia; How to Induce It .....                                  | Herbert A. Parkyn, M. D. . . . .      | 86  |
| Scientific Versus Occult Suggestion .....                                       | Arthur Foster .....                   | 90  |
| A Case of Misplaced Confidence .....  | .....                                 | 92  |
| The Suggestive Condition: Its Induction, Aided by the Use of Anaesthetics ..... | George Bieser, M. D. . . . .          | 93  |
| Paracelsus .....  | Mary Scott Fielding .....             | 99  |
| Biographical Sketch of Dr. William Cochrane Dobson .....                        | .....                                 | 102 |
| A Clinical Report .....   | William C. Dobson, M. D. . . . .      | 103 |
| The Power of the Soul .....   | E. H. Corson, D. S. T., M. D. . . . . | 104 |
| EDITORIAL—  |                                       |     |
| The Hypnotic Sleep .....  | .....                                 | 106 |
| ENQUIRY AND EXPERIENCE DEPARTMENT—  |                                       |     |
| JOTTINGS—   |                                       |     |
| Our Premiums .....  | .....                                 | 109 |
| McIntosh Batteries .....  | .....                                 | 109 |
| Second Edition of the Mail Course .....   | .....                                 | 109 |
| Smith Premier .....   | .....                                 | 109 |
| Dr. Dinsdale's Apparatus .....  | .....                                 | 109 |
| A Watch for 25 Cents .....  | .....                                 | 110 |
| Vril Cordial .....  | .....                                 | 110 |
| Developing Will Power .....   | .....                                 | 110 |
| Polynice Oil .....  | .....                                 | 110 |
| Anti-Narcosine .....  | .....                                 | 110 |
| Dermapurine .....   | .....                                 | 110 |
| Sanmetto in Chronic Orchitis .....  | .....                                 | 111 |
| Etiopathy—Way of Life .....   | .....                                 | 111 |
| How to Relieve Pain .....   | .....                                 | 111 |
| The Handiest Antiseptic and Healer .....  | .....                                 | 112 |
| Allison Surgical Table .....  | .....                                 | 112 |
| Chicago & Alton Railroad .....  | .....                                 | 112 |
| The Magnetic Healing Cup .....  | .....                                 | 112 |

# SUGGESTION.

*"Man's whole education is the result of Suggestion."*

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## NERVOUSNESS.

W. XAVIER SUDDUTH, A. M. M. D., 100 STATE ST., CHICAGO.

In remote times, and even at the present day, we hear the exclamation: "He seems at times to be fairly beside himself." Perhaps no form of incorrigibility is less understood than that which includes a lack of emotional control. Children of both sexes are equally affected. In fact, emotional prodigality is not a respecter of age, sex or condition in life.

Hysteria, in all its varied manifestations, is to be found in the palace of the rich and the hovel of the poor. In ancient times the victim was said to be possessed of a devil, and treated accordingly, with the almost invariable result of fixing the habit instead of relieving it. If demon possession be the explanation of hysteria, then their name is legion, for hysteria presents as many different aspects as there are phases of emotion. In one instance the child may, without the slightest provocation, burst into a fit of uncontrollable weeping, sobbing as if its little heart would break, and upon being closely questioned, its only explanation, if it has any, is that "so and so hurt its feelings"; and the general opinion is that the child is very "tender-hearted."

Again, lack of emotional control may express itself in the form of a tirade of abuse, and the little offender will give his fellow playmate a "tongue-lashing," or it may manifest itself in a fit of uncontrollable anger and manual dexterity be resorted to in order to relieve the pent-up feelings; at other times it loses consciousness, and in extreme cases may present an epileptoid condition, if not typical epileptic convulsions. It is well known that these varied manifestations differ in degree, and not in kind; and that the milder manifestations, if they are not early recognized and successfully treated, are very apt to end in true epilepsy.

Nearly all epileptic children have been humored by reason of their infirmity—are, in fact, what are called "spoiled children"—and in many instances make use of their affliction to gain their own way. I cannot do better in illustration of this point than to cite a case that came under my care recently. From the time the child was three years old it had shown a willful disposition and a determination to "run the house." At the age of four it had brought its mother under subjection, until she was afraid to punish it, and under dire threats was pre-

vented from telling the father of its cruel behavior toward the other children of the family and the neighborhood. The method employed by this precocious youngster was to feign convulsions. He would fall in a fit of rage, scream at the top of his voice, and turn black in the face. Under such conditions all thought of punishment was abandoned, the attention being turned to restore him to "consciousness," with the invariable demand upon his part when he was "better" than he should have his own way in the particular thing the denial of which had led up to the attack.

Things progressed in this manner until, at the age of seven, his treatment of his playmates became so atrocious that the neighbors made complaint to his father. This extorted a confession from the mother as to the conditions that had existed for several years past. The father then attempted punishment, whereupon the boy fought him "like a tiger," finally falling into a fit of ungovernable rage which presented all the symptoms that had so terrorized the mother, and which had prevented her from following out a systematic course of training. The matter was then laid before the family physician, who pronounced it a case of epilepsy, and began a course of therapeutic treatment. The boy was allowed in the meanwhile to have his own sweet (sic) will in everything. Matters went from bad to worse until it became necessary to remove the child from the family circle on account of his evil influence upon the other children.

He was next placed in a large sanitarium, in which he soon succeeded in establishing "his own conditions" with the attendants, with the result that no lasting benefit was derived from his residence there. After this he was taken in charge by a relative, who for several

years devoted his entire time to his care. The lad was the terror of the neighborhood. He fought with everyone who thwarted him, and failing in thus obtaining his way would fall in a fit of unconsciousness. Up to the age of fourteen, however, he had never frothed at the mouth nor bitten his tongue. His temper was, however, steadily becoming more and more ungovernable, and his attacks of loss of consciousness more frequent. The least provocation was sufficient to throw him into insensibility, such seizures numbering now as high as eight or ten a day. His whole being seemed bound up in the idea of getting his own way in everything; in fact, he was insane on this point; it had become a "persistent idea." Such was the state of affairs when he came into my hands, and I enter closely into detail, as his is typical of a number of similar cases, though perhaps the most extreme one that has come under my care. This willful element is predominant, though in less degree, in a large majority of the cases which I am called to treat.

CASE No. 2.—Two children, a boy and a girl, brother and sister, were taken by a Western society from an Eastern city and placed together in a good home in this state. They were pleasing children to look upon, being bright and comely, and great hopes were entertained by their foster parents for their future. The girl, by reason of her more intimate relation with the mother, developed into a source of comfort, but the boy has gone wholly to the bad, mentally, morally and physically. He early showed marked egotistic tendencies, morbidly craving and later demanding attention, which, when denied him, threw him into a state of melancholia. His teacher said he was incorrigible, and his parents called him

sullen and disobedient, but he himself felt that he was misunderstood and sadly mistreated. He never was what might be called a bad boy, such as described in Case No. 1, but from first to last made apparently earnest religious professions and, at the time he ran away from home, was an efficient acting secretary of the Sunday-school he was then attending.

It developed that his fits of moroseness were due to the practice of masturbation, which gradually weakened his mental and physical condition, until his mind was more or less unbalanced and his body a wreck. At the age of fourteen his foster father had him adjudged incorrigible and sent to a reform school. Here he improved physically, but the bromide treatment, so generally used in institutions, further unsettled his reason, as is always the case where it is persistently administered. He was, however, still a "bright boy," notwithstanding his intense egotism, which had now become a fixed mental disease.

About this time an editor became interested in him and took him from the reform school on parole—only to be sadly disappointed, however, for he remained with his new-found friend but a short time, when he ran away again, coming to Chicago with the avowed intention of following a life of crime. He was arrested and on account of his epileptic attacks was sent to Dunning. He ran away from the latter institution, only to be apprehended and, on our advice and the boy's consent, was taken to the detention hospital, adjudged mentally unbalanced and sent to Elgin, where he now is.

Case No. 3.—The study of Jacksonian epilepsy, in which the nervous explosion is localized instead of being general, has done much to throw light on the

whole process of pathological nervous impulse. The central nervous system may be regarded as a reservoir for nervous energy, to be disseminated gradually as needed under normal conditions, but discharged as from a Leyden jar under pathological conditions, such as asthmatic attacks in adults and laryngismus stridulus in children. In the latter the child suddenly becomes pale, ceases to breathe, and later gets blue in the face. A case came under my notice in which a boy would hold his breath when being punished until he was black in the face, and unless the punishment ceased would fall into convulsions.

This child grew up to be a musical prodigy, and his lack of emotional control manifested itself in the production of sweet sounds. At nine years of age he played a cornet in a local band and wrote orchestral music. He also played the piano with marked skill. At the age of sixteen he was the leader of the local band and instructor in several others. His musical productions were well received and published by prominent music houses. He was genial and loving and the favorite of the whole community—going "headlong" into everything that interested him or struck his fancy. He mastered two professions—viz.: Pharmacy and medicine, and was establishing himself in a lucrative practice when he fell hopelessly in love with a talented young lady who fully reciprocated his passion, which now, as at all other times in his life, was marked by a decided lack of emotional control. The young woman's mother, however, remonstrated and stepped in to prevent the marriage. His character was outwardly irreproachable in every respect and his prospects for the future were bright. When pressed for the cause of her objection the mother

could give none, save that her intuition impressed her that happiness for her daughter did not lie in the direction of matrimony with the object of her choice. The sequel was a tragic one, for the young people died in each other's arms, by the emotional hand of the lover, thus braving death rather than suffer separation in life. I cite these cases to show to what extremes lack of emotional control may go in wrecking the lives of its victims.

In the study of every nervous malady importance must always be attributed to the investigation of the moral causes. The vivid impression of a strong emotion may produce the same effect as a blow on the head or other physical shock. *Mosso* speaks of several cases where grown men had lost consciousness, sight or speech; others, still more sensitive, have remained for a long time paralytic, unable to use legs or arms, and have lost all sensibility; some have remained for a long time sleepless, others have fallen into a sort of exaltation resembling the outbreak of a mental disease. Many lost their appetite or were afflicted with auricular disease, and in some the nervous system suffered such a shock as to cause a violent fever.

Three such cases came under my notice in Minneapolis. Three children, a boy and two sisters, were frightened by two tramps, who did them no bodily injury, only taking away from them a bucket of milk which they were carrying to a neighbor after dark. As a direct result of the fright one of the girls died of brain fever within a week; the other survived, but remains to this day a nervous wreck; and the boy has permanently lost sight and hearing.

*Mosso* says that children should not be allowed to witness an epileptic fit, for the fright and emotion which they suffer

may prove dangerous, causing later a similar attack in themselves. However difficult it may be to comprehend such things they are yet admitted by all. Quite recently *Eulenberg* and *Berger* saw two old men, one seventy and the other sixty-five years of age, who had an epileptic fit immediately after a bad fright, although they never had fits before and were not predisposed to them.

A patient came to me recently for relief from night fears. When they developed she was living in such home surroundings as to keep her in perpetual fear of undeserved punishment, and the nervous dread finally culminated. She had an apparition one night of a huge black spider crawling over the counterpane toward her—a spider larger than is ever found in this country. Without awakening, recognized as such, she "came to herself" as she expressed it, turned cold and weak with fright, and it was some time before self-possession returned, although she knew it was all visionary. Since then, for a period of over twelve years, these experiences have been repeated, ranging from a simple undefined sense of fright which awakens her suddenly, to fully developed apparitions of different kinds. These always come apparently before sleep and the realization, which is the awakening, is followed by an utter collapse of strength, palpitation, slight spasmodic condition, and chills. The day following such seizures the patient describes her mental force as below grade, memory poor, preceptions dulled, hands nerveless, and a general depression prevails. Sometimes this condition is experienced in the daytime; the patient feels her strength suddenly ebbing away, and only by a strong effort of will does she retain full consciousness.

*Hare* also lays particular stress on

"night terrors" as an etiological factor in the production of epilepsy, even when these do not present the gravity of epileptiform seizures. He holds that if they prevail for any considerable length of time "the final history of all such cases ends in epilepsy proper, preceded by lack of vivacity or momentary clouding of the intellect during the day, as the disease extends from the night to the daytime." In such cases the child generally wakes up gasping for breath and shows all the symptoms of Jacksonian epilepsy. On this point *Mosso* says: "It is thus that the phenomena of fear, which may be useful to us when manifested in a lesser degree, become morbid and fatal to the organism as soon as they exceed a certain limit. For this reason fear must be looked upon as a disease." *Pinel*, one of the greatest celebrities in the domain of mental diseases, always began the examination of a patient by asking him whether he had not experienced some fright or some great vexation.

Considerable work has been done with the view of explaining the chemical phenomena presenting in the system as a result of emotional prodigality. Deranged function has long been known to result from excessive emotion, but it is only within the last few years that any steps have been taken to investigate the causes and the relation they bear to physical changes in nutrition. Every mother is conversant with the influence of intense anger on the character of a mother's milk, and the danger arising from permitting a child to nurse soon after she has experienced such emotion, but it remained for Prof. Elmer Gates to scientifically demonstrate the effect of the several emotional states upon the bodily secretions. All intelligent physicians realize the possibility of intoxication arising

from fermentation in the alimentary tract, and it is only extending the theory a little further to hold that many of the functional nervous derangements presenting are due to the same cause; and not only this, but I am free to admit that there is ground for belief in Professor Gates' theory of autointoxication from toxins developed in the system as the result of intense emotional activity. It seems to offer a reasonable explanation for many of the hitherto unexplainable phenomena of the convulsive state in nervous affections.

The *modus operandi* by which emotional states are converted into physical conditions is still a *terra incognita*. Some little light has been thrown on the subject by recent experimental studies in neuro-pathology, which may be summarized as follows:

The nerve-cells of the cortex are a source of nervous energy. So unstable are the relations in the cells that in some instances slight stimuli are productive of very grave results. When once these impulses are set up, they tend to repeat themselves with increasing intensity. That which may have been only a slight tremor, a passing fright, or a bad dream with its concomitant convulsive attack, may in a few repetitions develop into a day-dream presenting epileptiform phenomena.

In arousing normal nervous impulses certain well-known physical conditions must be presented. Much depends upon the rate of vibration established. If the stimulus be electricity it is known that a low rate of vibration or current of low tension may fail, while a higher tension or rapidly interrupted current will succeed in establishing positive results. The same law applies where physical force is used. The rate of vibration necessary

to set up responsive nervous impulses and the corresponding reflex activity has been carefully measured, but there remain very many awkward gaps in our knowledge regarding the phenomena of pathological nervous explosions.

Instances might be cited in endless number and variety of the baneful influence of fear on the organism, but such is not our immediate purpose. Those who desire to follow the subject further will find in *Mosso's* recent work on "Fear" an excellent hand-book.

Successful treatment invariably involves the development of moral hygiene on a rational and persistent basis. A regular system verging on military discipline must be established—regular hours for rising and retiring, regular times for meals, which should be more frequent than is ordinarily the rule (about two hours apart during the waking hours), regular times for study, exercise and sleep. All the activities of the patient should be as regular as clock-work, and no interferences to such activities ever be permitted. Nothing serves to establish emotional control better than regularity in occupation, which should be varied as frequently as is necessary, not at the caprice of the child, but by the direction of the attendant, who must be keen to anticipate fatigue of attention on the part of the patient. In one extreme case I found it necessary at first to change the occupation every fifteen minutes, gradually extending the time as the power of attention was developed.

Methods of relaxation should also be taught and put into practice whenever it is observed that the child is becoming nervous and shows a lack of emotional control. I find that this is best accomplished by a system of breathing exercises, together with certain intoning breaths on a key that will bring the bod-

ily vibrations to a normal tone. This may be accomplished by permitting the child frequently to accompany the piano in song, choosing selections written in the desired key, or by following certain intoning exercises on a single note, especially prescribed at the time for the condition in hand.

If possible the child should be placed in an entirely new environment, and should have thrown around it the restrictions of altogether new associations, which for a time will occupy its attention and materially assist in diverting its mind. It is much easier to establish correct dietetic and hygienic rules in a new environment than in the patient's own home, where, in many instances, marked lack of emotional control and gross infractions of proper rules of diet are apt to exist.

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### MANNERS FOR HOME.

What strikes one as an odd thing is that many are able to exercise patience and common sense abroad, but find it an impossible task at home. With them everything is done at large, and at the expense of their own circle. In other people's houses they have a face like a benediction, whilst in their own it is disfigured with frowns. Of all follies this is one of the greatest. As if it were not their interest, let alone their duty, to do exactly the reverse. If anybody has a mind to be cross, snappish and disagreeable, let him choose a field for giving vent to his ill humor as far removed from home as possible. Our best side should be turned not to strangers, but to those with whom we dwell, and whilst it is right to wish for a good opinion of everybody, we should be anxious most of all about the favorable impression we make on our own folks at home.



## MANUAL SUGGESTION.

S. F. MEACHAM, M. D., OAKLAND, CAL.

### ARTICLE IV.

"Create a belief and the facts create themselves."

This sentence should have immortalized its author, but I am sorry to say that I do not know who said it. It embodies a complete history of all our contention and strife in every department of life. We never quarrel over demonstrated truths, but over things we dream of, and then imagine we know. We start at the wrong end of the road. The first hunt should always be for facts. Most of us, however, believe first, then hunt. We assume some school of politics, religion or medicine to be true, and then study that. We should first study subjects, always holding judgment in reserve till we know something to judge by. We should do as the ancients did with children. They waited till the child grew old enough to manifest his peculiarities of mind and disposition, then named him to suit. We should study treatment of disease first ere we name the process. If impracticable to study all or many, look as widely as possible, and keep in mind that we know in part only. If impossible to investigate but one creed, do so, but know how limited that one guess is compared with truth. Do what good we can with our narrow means, and keep out of the way of all others who have other means, lest we obstruct progress. So-called scientific men, many of them, have started with the belief that Magnetic Treatment, or what I call Manual Suggestion, is not true, and then have looked for proof that *their belief* is true and of course

have found it. We can prove anything to be true to *our own satisfaction* that we wish to so prove, if we wish hard enough and long enough; for the attitude alone is a constant suggestion to our automatic natures, which will finally adopt it. Believe first, and all else is easy. We must have an hypothesis to work from, but we need not swear that it is a true one. We can, if we try, use it as a servant, then it will be a useful one. This is the mistake of so many great minds today.

We believe that drugs are necessary; that they are always poisonous; that there is a magnetic influence from the hands; that it cannot be anything but magnetic; that this influence must be a therapeutic agent of more than ordinary power; that we have no diseases; that all is mind; that truth must come by some of the well-known routes, etc. We look at the budget of guesses, make our choice and swear it is true, then call the other fellow a fool because he constantly refuses to get into our wagon and ride. We know we are right and he could know so, too, if he only were not so stubborn.

"Create a belief and facts create themselves." Put notes to it and sing it. I was called some time ago to attend a lady who would not take drugs; she believed in magnetic healing and would have no other. The husband, on the other hand, believed in nothing but medicines. After treating the wife one evening, we were talking when suddenly he

broke into the conversation with this remark:

"You talk as if you had common sense. Have you been a practicing physician?" On being assured that I was still so he remarked: "I haven't a — bit of faith in this business. How did you ever commence it, anyway?"

Evidently he felt his question from the depths, too, and while his wife got along nicely he probably still wonders just the same old wonder. He is not alone. It is a common attitude. They don't see you put anything into the bodies of the sick, hence you do nothing at all. If the patients recover they just do so themselves; but if some tangible measures have been adopted then it is different; they were cured. We say "Amen" to their first remark, but insist that they just got well in the latter case also. That does not mean that there was no aid given in either case, for there probably was in both. The most powerful things are unseen. In fact we see no force whatever, and we see no reality whatever. The reality is atomic, which is invisible. Let us change our attitude and face the truth which embraces all things and forces in its arms. Watch each other's methods and continued results, and grant an honest endeavor to all which are not known to be true. Remember that honesty need not wear any special label. Do these things and soon we shall see that what we have been in the habit of calling science has not been as useful in the real demonstration of facts as it has been in classifying and arranging them, thus spelling out what they mean, and giving a rational explanation of them and their use. While this would seem to be office enough, it is far short of what science could do and will do when it stops being an advocate

of a creed instead of a searcher on the broad gauge after truth and its uses. Truth has always used strange methods to advance her cause. She has persistently refused to come to us by some prescribed route. The unexpected has happened quite frequently, and will probably continue to do so despite all efforts at prescience. So in this matter of manual suggestion we should keep in mind, ere we condemn it, that there are many things that we do not know, that we should need to know to condemn absolutely, as well as to be able to make an absolute choice in any matter pertaining to disease and cure. We do not know what life is; its relation to organization; its relation to the so-called physical forces; how the organism is built, kept alive, or repaired. We do not know how heat, light and chemism are related, nor what the relation is between these forces and electricity, nor how they can be utilized to increase the effective action of vital force. We do not know the real nature of self, nor whether or not it can choose by its unaided effort. We do not know the real nature and extent of influence exerted by what we call heredity. We are not agreed as to what constitutes environment, nor as to whether we are able to determine what shall be the environment of each of us by selecting the things we attend to, and that shall affect us. What do we really know about life? When we come to look at it candidly we know very little save some of its manifestations. How then can we be so sure that this, that, or the other method of treatment must be effective? How long has it been since telepathy and all spiritistic phenomena were regarded as mere fancies of diseased brains, and how long since suggestion was hooted at and either denied

any place in medicine or claimed to be good for hysteria only. Today every well-posted man believes in suggestion, and we are contending for a wider field for it only, not for its respectability. It is no longer mere skepticism to deny the phenomena of telepathy or spiritism, but is absolute ignorance. We may contend as to the utility and real nature and source of these occurrences, but here only can there be any dispute by the well informed.

So manual suggestion will ere long be universally recognized and our dispute, if any, will be as to the nature of the curative power thus exerted. The life of each organism is a unit—a compound unit it may be, but a unit—working to a definite end, so that what affects it in part affects the entire manifestation. We cannot by any means change either the physical or mental aspects without affecting the entire outcome. We cannot talk or act in the presence of an individual without affecting him more or less. Our lives are really a continual suggestion to those around us, and it should be our aim to so direct them that they may exert a wholesome suggestion, tending to physical, mental and moral well-being. When I treat a case by manual suggestion, every move, look, tone, sensation and idea, and even every thought are important, and must be attended to if we are to get the best results. All this, however, does not prove that there may not be a force emanating from the hands, and that a curative force, but it simply shows that no one can eliminate his personality and its influence for good or ill when at the bedside of the sick. It shows also that every person who deals with disease should carry with him to the bedside the very best and highest atmosphere that

he possibly can, tending to joy, health and morality, else he is doing harm with a portion of his influence while trying to cure with another; he is a house divided against itself so far as curing is concerned. This explains why some have such a quieting effect on the sick, while others have only to enter the presence of those in distress to make them still more miserable. Their method of cure may be all right as to technique, but they carry unwholesome suggestions with them on account of the mannerism, telepathy or other influence from their personality. To do the best work with any method these details must not be neglected, and to do even good work with suggestion of the type I am considering, these are among the essential elements of success. We tend to manifest our true feelings and it is possible that these people are sensitive to these unobtrusive actions, expressions, intonations, etc., which show us as we are. It would be impossible at the present time to separate this type of influence from the telepathic influence; but the remarks made above apply in either case, so the results are the same. Keeping in mind that the organism is a compound unit, we readily see how internal organs and tissues are affected by external manipulation, or by anything that can influence any part. Change one part and the entire organism will sympathize. However, we are not confined to these generalities. The entire body is under the dominion of the spinal cord, and this is easily reached, especially as the nerves, or most of them, come close to the surface and enable us to get the reflex from them. As each section of the cord influences definite parts, all we need know is where these centers are that our work may be definite. The influence we exert and the attention

and blood current of the patient will be so directed as to reach the diseased area. Even if we are using medicines their effect will be rendered more certain and more forcible on these parts, as more blood will of course carry more drug, and

this being directed, we thus control the local action of the medicine by simply applying the hands, and suggesting, by this means, to the sub-conscious influences of the body.

## SUGGESTIVE ANAESTHESIA: HOW TO INDUCE IT.

BY HERBERT A. PARKYN, M. D., C.M., PRINCIPAL OF THE CHICAGO SCHOOL OF PSYCHOLOGY, 4020 DREXEL BOULEVARD, CHICAGO, ILL.

"Doctor: I find it is necessary to undergo a surgical operation, and I have called to learn if it would be possible for you to hypnotize me and if the operation could be performed under hypnotic anaesthesia. I have heard of others who have been successfully anaesthetized in this manner; and I don't see why it could not be accomplished in my case."

I am certain that everyone practicing suggestive therapeutics, at some time or another has been interrogated in this manner. Speaking personally, scarcely a day elapses without bringing a personal or written inquiry of this nature, therefore, I shall endeavor to answer the question as clearly as possible.

Many physicians have told me that while they could get good results in employing suggestive therapeutics for overcoming nervous and functional disorders, yet when it came to employing suggestion as an anaesthetic, it was not as satisfactory as they had anticipated it would be, after reading the glowing reports of others in the medical journals and magazines devoted to suggestive therapeutics. Many of them have said that, although very successful sometimes, they found too much time had to be con-

sumed in testing a patient; an hour or longer being spent at a time over the same patient on several different occasions without obtaining any result. To save valuable time the majority of these physicians have returned to the drug anaesthetics in preference to that which seemed to require so much time, and to be so uncertain in its action. The object of this article, therefore, will be to show how the test for suggestive anaesthesia may be made in a few moments; and to give reasons for the success and failure in the use of suggestive anaesthesia.

Believing that it is not possible to induce anaesthesia, unless a patient appears to be profoundly influenced, many operators do not test for the condition if a patient does not give evidence of being what they consider an excellent hypnotic subject. It is in this endeavor to make every patient a good hypnotic subject that so much time is wasted. I am glad to state, however, that a high degree of suggestibility is not an essential for suggestive anaesthesia; for if this were the case, its application would be limited, indeed, since it would necessarily be confined to hypnotic somnambules.

A hypnotic somnambule is an individual who will accept absurd sugges-

tions when his attention is concentrated on the suggestion given. An operator does not induce somnambulism by going through the absurd maneuvers generally employed by hypnotists, who do not understand the force they are handling. It is present in the individual at all times, and may be detected in him by studying his daily movements, and the operations of his mind, under ordinary conditions. He generally follows his inclinations, is easily led and persuaded, imaginative, and satisfied to hold subservient positions, preferring to be directed, rather than to direct others. The vast majority of criminals are found to belong to this type. Therefore, a patient of this kind accepts readily every suggestion received. When his attention is concentrated by an operator it does not denote that the operator is gifted with any special powers, or that a state is induced in the individual foreign to his normal condition. It simply indicates that the individual is highly suggestible at all times, and is one of the class I have described. If a subject be a good hypnotic somnambule, he will give evidence of it at once, but the average operator, not being aware of the facts I have just pointed out, strives to get all his patients into this condition, and frequently wastes hours in vain efforts over an intelligent patient who would not become a hypnotic somnambule if a thousand different methods were employed by as many different operators. Hypnotic somnambulism is indicative of a mind which operates slowly, and its phenomena are the result of acquiescence. (These facts are demonstrable, and I shall discuss them at length on a future occasion.)

The possibility of suggestive anaesthesia depends upon the auto-suggestion of the patient seeking an operation. It

may be induced just as readily in one who is not highly suggestible as in the hypnotic somnambule; for it depends upon a preconceived idea of pain. Many of the best hypnotic somnambules do not make good "anaesthetics" because, at heart, they are physical cowards. Stage hypnotists always bring forward their good hypnotic subjects, who are also anaesthetics with whom to demonstrate the possibilities of anaesthesia. Hence, the prevalent belief that one must first be "put to sleep" before an operation can be painlessly performed.

I find that almost everyone who consults me has this idea, and sometimes it is difficult to explain it satisfactorily to the patient. The old-fashioned way of dealing with such a person was to say, "Well, it will be necessary for you to come at least six times, till I see whether I can put you to sleep or not. If I can put you to sleep, the chances are that the operation can be performed without your knowing anything about it." At the present time I say to an inquirer: "Yes; it is possible to induce suggestive anaesthesia in a large percentage of the population when the suggestions are properly directed. It is not necessary that you should go to sleep. A man indulging in athletic sports or fighting in battle is not asleep, still he may be even mortally wounded without being in the least conscious of having received an injury. This has happened on innumerable occasions, as you are aware. Now, with your hearty co-operation, it is probable that I can employ suggestion to induce a mental condition in you identical to that of the man in battle. It will only take a few minutes for us to determine whether this is possible or not; and, if you will agree to give me your whole attention for that length of

time, it is probable we shall be successful."

Having obtained my patient's consent to undergo the test, I place him in a comfortable reclining position on my Allison surgical table, and ask him to relax every muscle in his body. I lift up one arm, and let it drop, to see that he is perfectly relaxed. If it does not drop "limply," I explain what I mean by muscular relaxation, and have him practice raising the arms and dropping them as though they were lifeless. Having secured this condition, and being satisfied that he is perfectly comfortable, I close his eyes, wait in perfect silence for about one minute, then, speaking in a firm monotone, I ask him to rivet his whole attention on his right hand, holding in his mind the thought that it is becoming numb and cold; that he feels the numbness creeping in at his finger tips, and extending up the arm gradually. I assist him to hold these thoughts by repeatedly suggesting that his hand is getting colder and colder, numb, very numb, etc. While giving the suggestions, occasionally I touch his fingertips, then the back of his hand once or twice, then his wrist, forearm, upper-arm, and shoulder. The touch is *very light*, but it assists in increasing the effect of the suggestions. Having kept up a continual stream of suggestion of "numb and cold" from two to five minutes, the mind of the patient is filled with the thought of numbness; and I tell him that he is in an excellent state of anaesthesia, although perfectly conscious; that he will feel everything I am about to do, but nothing will hurt him. I then say, "I shall pinch your hand hard. You will feel me do it, but it won't hurt you. It won't hurt you, for you are becoming numb and cold all over. Do you hear?

Numb and cold all over." While saying this over and over, I pinch his hand between the nails of my thumb and first finger, and act as though I were pinching very hard, when as a matter of fact *I only apparently pinch hard*. I admit this is done to deceive the subject, but if he says to himself, "Why, he did pinch me, and I didn't feel it," I have aroused some faith and confidence in him, and this increases the possibility of ultimate success. I then say, "That was splendid. Your hand is certainly numb, and we shall be successful; you will feel everything I do from now on, but your hand will be numb all the time. Nothing can hurt you, for you are nicely anaesthetized, etc." I then take a clean, sharp needle, and while still keeping up the suggestions, touch the back of his hand and wrist in several places with its head. Having done this, I say, "That was splendid. The condition is perfect; see, I can do anything with you. You are so numb." While saying this, I pick up a fold of skin on the back or side of his wrist, and deftly thrust the needle right through it.

To anyone who wishes to try this process, I would say: If the patient does not flinch, and says nothing, you may know he is a good "anaesthetic"; that it will be possible to perform almost any operation desired, without any other anaesthetic than suggestion. Leave the needle sticking through his wrist, and continue the suggestions of "splendid," "numb and cold," etc. Tell him the test was very satisfactory; that he will have no trouble becoming anaesthetic when the time for the operation arrives; that he will have no difficulty in inducing a similar condition in-himself at any future time, under your direction, etc.; then tell him to open his eyes and look

straight into yours. Look firmly but pleasantly into his eyes and say: "That was splendid. You are an excellent subject for suggestive anaesthesia. Now answer my questions. You felt me touch your hand, did you not"? "Yes." "I told you you should, but nothing I did produced any pain in you, did it"? (This should be said partly in the tone of a positive negative suggestion, and partly as an interrogation.) Usually the patient will answer, "No." If he says it did not hurt, I show him his wrist with the needle still sticking through it. Many will say they thought that was what you did, while others will evince surprise that you could do such a thing without causing pain.

The test, simple as it is, is sufficient to show that an operation can be performed under similar conditions.

When the time for the operation arrives, repeat the same experiment, and suggest that the numbness extend up the arm to the shoulder, and from the shoulder to the spot in the body that is to be operated on. Then suggest numbness of the part, and test the spot with the point of the needle. If the operation can be commenced without the patient giving evidence of suffering, it will be possible to continue and finish it without further trouble; no matter how long it may take. I once saw an operation for implanting teeth in the lower jaw performed under suggestive anaesthesia. This operation is considered very painful under ordinary conditions, but this one was painless, although four hours and twenty minutes were required for the process. The patient was fully conscious all the time, and even assisted by holding things, and rinsing out his mouth with water whenever it was necessary to clear away the blood.

During the operation the suggestionist should devote his whole time to suggesting to the patient, while someone else performs the operation. However, when this is not possible, the operator may suggest and operate at the same time; but the former plan is the more advisable. Children make good subjects for suggestive anaesthesia, especially if they have not previously suffered much pain. If a patient has suffered much during his life, and has a dread of the least injury, it is not likely that a good degree of anaesthesia could ever be induced in him.

If your subject should complain that the needle hurt him, or if he draws away the hand when you are pinching his wrist, or touching him with the point of the needle, you may make up your mind that he is not a good subject for suggestive anaesthesia, and any further time spent on him will probably be wasted.

Some children are brought up physical cowards. They are afraid of the least injury, and suffer greatly over little things which another would scarcely notice. A child whose parents or guardians make a great fuss over every pinprick or slight injury has the greatest horror of pain, and things which to another would seem but a slight sensation are interpreted by him as intense suffering. It is needless to say that such an one would never make a good "anaesthetic."

The *modus operandi* I have given is very simple, but its virtue lies in its simplicity and efficacy. On the face of things, I know it will even seem absurd to many, but I have personally induced anaesthesia for operations in hundreds of instances by this simple method, and I can only say: TRY IT. It will be found to work ad-

mirably in all classes, including the hypnotic somnambules.

Suggestive anæsthesia is always welcomed, and becomes almost an essential, when it is necessary to perform an operation on a patient, who, for physical reasons, cannot take a drug anæsthetic. When it is necessary to operate on a physical coward without a drug anæsthetic, much can be accomplished by giving him impressions through a number of his senses at the same time. In the same degree in which the attention is divided among the different senses, is it lessened in any one of them. This is

evident if you clap your hands in front of an infant who is suffering acute pain. As long as you can keep giving him new and marked impressions, his attention will be diverted from the sense of feeling. Similarly in operating on a physical coward, if his attention be diverted through several of the channels of his senses, his suffering will be greatly mitigated.

In another article I shall give some interesting reports of cases operated on under suggestive anæsthesia, and shall discuss them at length.

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## SCIENTIFIC VERSUS OCCULT SUGGESTION.

BY ARTHUR FOSTER, CHICAGO, ILL.

The tremendous power of suggestion is being recognized more fully every day; and the time is not far distant when a knowledge of its laws will be considered to be a necessary part of a liberal education. The advantage of that complete mastery over one's self that ought to result from this knowledge is in itself a sufficient inducement to take up this fascinating study. To go through this life without the knowledge and use of one's inherent powers is like performing hard manual labor with one's right hand tied behind the back. In this day and age we surely cannot afford to leave idle any resource that may help us in the battle of life, which present conditions seem to be making hard indeed for many.

It is comparatively easy to learn certain formulæ, which will produce some

degree of hypnosis, if earnestly repeated in a monotone to a subject whose attention is concentrated upon the expected and desired result; but the advertising medium can do as much from the fact that she is "the seventh daughter of a seventh daughter," through the instrumentality of Pharoah's spirit or some equally incredible process.

It may be taken for granted that comparatively few people believe in the occult as applied to healing, and yet the occultists make many cures. But, while the spirits of the mighty dead, or the influence of the magic sign of the five-pointed star may fail to affect certain subjects, scientific psychology, indifferent to vibrations or adverse influences, is as certain in its action as are food and water. It is, indeed, pretty well demonstrated by this time, that its results are



simply those of cause and effect: so that the prospective student of psychology should place more importance upon understanding these laws than upon getting immediate results.

Among the many cults that teach and practice mental therapeutics, there are none (outside of the medical profession, members of which occasionally use it in connection with drugs) that do not make a direct appeal to the patient's faith, the object of which ranges from the shadowy idea of some "essence of good" to the most childish superstition; saving and excepting always the system first brought to the notice of the public by Dr. Parkyn, and which he seems to be gradually perfecting to the dignity of an exact science. It may be well to look into the matter closely enough to enable us to determine whether or not this belief in the apparent supernatural is not more logical, and hence more helpful, in the scientific than in the occult schools.

It is a matter of history that the Christian church in the early ages taught and practiced mental healing. To this day the Roman church, dating as she does from St. Peter, has an office, the faithful use of which may obtain "the blessing of recovery"; and the Anglican church, with a history practically as old, right here in Chicago, a few weeks ago, instructed her bishop-elect to "heal the sick." The ancient book containing these instructions has been revised from time to time, and it is impossible to believe that so many generations of learned theologians should have let this clause stand as it is, by accident. Rather, is it an evidence that the church still clings to the belief that healing the sick is her prerogative, although, alas! she has let its practice fall into disuse. The theosophists, Hermetic brothers, and many

others seem to have largely the same general idea as the Christian scientists, viz.: that the one thing necessary is to get into harmony with the Divine mind, in which no evil nor sickness can exist. The horde of those who lay themselves open to the charge of being fanatics, if not frauds, direct their patients' faith to strange gods indeed. It is the magical gift that enables the clairvoyant to spy out and heal the disease, and it is the spirits of just men made perfect who are responsible for the spiritualists' cures, for they kindly return to earth to inform the medium where the lesion is located, and how it should be handled. And still all these, and even those who are wanton cheats, have many cures to their credit, but can give no explanation as to how these cures were effected; that is, no explanation that would for a moment satisfy an ordinarily intelligent man, much less a man of science.

Now the modern practice of psychology works in an entirely different way. Its exponents begin by diagnosing the case (and this assumes that some knowledge of anatomy and physiology is necessary) and then directing their suggestions toward actions or lines of thought which will restore the patient to health, at the same time, and as part of the treatment, instructing him in auto-suggestion, thus putting into his possession a curative agency, compared with which other methods of treatment are feeble indeed. And then, observing that certain results inevitably follow certain suggestions, they have found out what it really is that has made the cure; and this cause with them is not the spirit of some remote ancestor, nor the magical touch of some especially endowed operator. It is an infinitely more real thing than the vague and shadowy Divine

mind of the Christian scientist; and an infinitely more noble thing than that god who is supposed to work through the mouth of that mass of vulgarity and vituperation yclept, "Dr." Dowie. It is no less a thing than that which, for want of a better name, we call the subjective mind. While we know it only through its works; may we not say that it is a manifestation of that All-wise and All-good, the Ancient of days, who has declared Himself as living in the hearts of His people? A child believes the rolling thunder to be the voice of God; the scientist, who can tell us exactly how the vibrations causing the peal are made, also believes it to be the voice of God; inasmuch as He may be recognized in His works. And so the real power that performs the many cures that we hear of in mental therapeutics (call the system used what we may) may not be the direct act of a god belonging exclusively to any particular sect; but may very easily be the manifestation of gift of that God in whose existence the vast majority of thinking people believe; and upon whose attributes of omnipotence and omnipresence they are all agreed.

The Christian martyr slumbering at the stake; the hermit, who forsaking the world is rewarded with a vision of the treasures of heaven; the Yogi, who, lost in contemplation, becomes, for a time,

physically dead to the world; of the soldier who finds himself mortally wounded and dying only when the battle is over; are all instances of the power of the subjective mind. But the martyr must concentrate his whole mind upon no less a mystery than the world's greatest sacrifice; and the soldier's flag must be the ensign of that one particular country, his own dear fatherland that he fights for; or the subjective mind is not reached. Strange, is it not? Modern science can tell us exactly what takes place in the minds of these men to produce these apparently miraculous results; and yet, change but the name of the hermit's patron saint, or the color of the soldier's flag; and these men remain very men, capable of no such flights.

And so the scientific suggestor of today demonstrates to his patients the wonderful recuperative powers which lie dormant in all of us, irrespective of religious belief; puts these powers to work; and so effects his cures. And the enlightened patient of today, seeing and feeling the actual results obtained; recognizes the all-important truth, that he has within him a wonderful and God-like power—another manifestation of the greatness and goodness of that God, whom, darkly as through a veil, he adores.

### A CASE OF MISPLACED CONFIDENCE.

A physician describes a remarkable case of a patient's confidence in his medical adviser: "While I was a student in the medical college, I had a patient, an Irishman, with a broken leg. When the plaster bandage was removed and a lighter one put in its place I noticed that one of the pins went in with great difficulty, and I could not understand it. A

week afterward what was my astonishment to find that the pin had been run through the skin twice instead of through the cloth. 'Why, Pat,' said I, 'didn't you know that pin was sticking in you?' 'To be sure I did,' said Pat. 'But I thought you knowed your business; so I hit me tongue.'—*Collier's Weekly*.

## THE SUGGESTIVE CONDITION

ITS INDUCTION; AIDED BY THE USE OF ANAESTHETICS.

BY GEORGE BIESER, M. D.; 186 WEST 102D ST.; NEW YORK CITY.

For practical purposes we may define the suggestive condition as one in which the attention of the patient is focussed upon as few of the senses as possible, usually one, and that one hearing; the voluntary mind is more or less inactive; the patient reasons deductively, and suggestion has an exaggerated effect. Any method or agent which can bring about the above condition of mind in a patient is an aid in the induction of the suggestive condition. With the patient in the proper mental and bodily condition, its induction is simple; but it frequently happens that its induction when most desirable, becomes impossible by ordinary methods on account of mental excitement, environment, exhaustive diseases, or painful conditions. Here many doctors give up the attempt and resort to medical and surgical means of relief when the good effects of suggestion could still be obtained if these adverse conditions were removed by means of analgesics or anaesthetics. Before using any method for inducing the suggestive condition, the suggestibility of the patient should be carefully studied and tested; so that the suggestions to be given may be properly formulated, and acted upon willingly; and intelligently by the patient. The effect of suggestion will depend; no matter how intelligent the patient, upon his previous education, experience, environment, mode of life, habits, creeds, beliefs and convictions; for these stimulate his desires; which are really the motives for the exercise of

that will-function upon which all useful and cultivated actions depend. As the potency of the will depends upon desire; and the will-reaction takes place in accordance with the most ardent desire—or at least, that which consciously, or unconsciously, is most vivid—it is easily understood why the same line of suggestion and procedures do not produce the same effects in all patients. The degree of suggestibility can be readily judged by carefully taking the patient's previous history, including the patient's psychological characteristics of personality which latter is ordinarily neglected by physicians.

It is a common observation that facts are not readily accepted by many persons unless they are often repeated, and first compared with their previous education, experience, beliefs and convictions. Thus it is impossible in all patients, no matter how great their confidence in you may be, to suddenly change by explanation, argument or even by demonstration; the belief that relief can only be obtained or pain only inhibited; or prevented by drugs. This belief of our patients gives us a means of carrying to the patient's mind; as it were, suggestions to which there can be no opposition; thereby enabling us to induce the suggestive condition in many; where at first thought it seemed impossible that one could succeed. In agreeing with the patient we have aroused and augmented his desires, and he more readily allows us to direct these by suggestions. It is a fact that persons desire their convictions

to turn out true, and thus actually do all they can to aid the success of any demonstration that will apparently prove their convictions. Therefore, in cases where suggestion is indicated, and the ordinary methods for the induction of the suggestive condition will fail or do fail, I suggest that drugs or other agents be used locally, or given internally to quiet the sense of touch, thus, incidentally preventing distraction of the attention from this source, for pain conveyed by the nerves for touch sensation is the most frequent source of failure to induce the suggestive condition.

As a tight shoe, finger ring, garter, corset, collar, etc., distract attention, and especially so in the suggestive condition, so the presence of pain or discomfort from such slight ailment as ingrown toenail, corns, headache, stomatitis, pruritis, hemorrhoids and the like, may prevent the induction of the suggestive condition unless they are removed, or the pain relieved in some way. Local analgesic and anæsthetic agents can here be employed with the desired effect and often the suggestive condition can then be induced. In childbirth and surgical operations local means are often successful, but sometimes it becomes necessary to employ general anæsthetics, which not only calm mental excitement, but also pain, thus allowing the suggestive condition to be induced. Thus far I have not had the necessity of employing this method in any but this class of cases.

When from the nature of the case, the previous history, medical and psychological, it is decided that an anæsthetic be employed, I would make the administration of anæsthetics to induce the suggestive condition, the method of election, and their administration to induce nar-

cosis the method of necessity. As in ligation of the common carotid artery we have an inferior carotid triangle, or triangle of necessity, in which we must tie the artery, if the superior carotid triangle or triangle of election is inaccessible, so in an analogous manner, we have in the induction of narcosis by anæsthetics, a method of necessity which we must resort to in case the induction of the suggestive condition (with directed suggestion) by anæsthetics becomes impracticable, or fails to relieve the patient. What the ligation of the carotid artery in the superior carotid triangle is to the ligation of the same artery in the inferior triangle, that is the induction of the suggestive condition by aid of anæsthetics for analgesia (or anæsthesia) to the induction of narcosis for anæsthesia—a method of election *versus* a method of necessity. I would make this method of induction of the suggestive condition by aid of anæsthetics the method of election for the following reasons:

1. It is the simpler, more convenient and more rapid of the two methods.
2. It is more readily accepted by the patients and their friends.
3. It requires no special assistance, can be done under any surroundings, at any hour of the day or night (if chloroform is used), and without any special or elaborate preparation.
4. It requires a smaller quantity of the anæsthetic—an important consideration.
5. It allows a patient to help the doctor in various ways, as in turning about without assistance, holding dressings and the like, and thus minimizes the number of assistants—an important item in small apartments or where danger of infection is present.

6. There is less shock and less hemorrhage which can, furthermore, be more easily controlled, directed suggestion in the suggestive condition having wonderful effects in this direction in some patients.

7. This method inspires confidence, so that in the after treatment the ordinary method by verbal suggestion makes the after treatment simpler and convalescence more rapid.

8. There is less likelihood of after effects from the anæsthetics or dangerous effects during the administration in persons with lesions in which narcosis by anæsthetics is contra-indicated.

There are other minor reasons, but these are the most important.

The literature on the subject is not extensive, and most authors seem either to have observed accidentally the presence of the suggestive condition during the administration of anæsthetics, or to have used suggestion not only to render the administration of anæsthetics rapid and easy, but also to minimize the quantity of the anæsthetic employed; but few record a satisfactory method of facilitating the induction of the suggestive condition by the use of anæsthetics. Dr. John R. Rose, in the *Medical News* for July 1, 1899, page 21, says: "Those who have studied the practical side of hypnotic phenomena know that chloroform is a great help in producing hypnosis, where a simple focussing of the attention with proper suggestions has no effect, in fact the inhalation of a few drops of chloroform, with the simple suggestion of 'shut your eyes and go to sleep' repeated a few times, often has the effect at once, producing deep hypnosis with peripheral anæsthesia. If the anæsthetic is now withdrawn, the patient is in the hypnotic state, the muscles gen-

erally cataleptic, and under the control of the operator's voice; if the anæsthetic is pushed beyond this, the catalepsy disappears and the muscles become flaccid with absolute anæsthesia, so that there is not even a corneal reflex, but the patient is still in hypnosis, subject to the operator's control, remembering frequently everything that happened in this state on waking, and waking at once at the operator's command. If the chloroform is pushed beyond this stage, then results chloroform narcosis, and the subject is no longer under the operator's control." While I do not follow the directions given by Dr. Rose, still, I think they may be of service to many. I simply give the anæsthetic until the patient is relaxed. In some cases the patients are told to count slowly from the beginning of the administration of the anæsthetic, in other cases only after they are relaxed; then when the patient has great difficulty in counting, or stops counting, the anæsthetic is stopped or given in smaller quantities; the necessary suggestions are given and repeated until there is no doubt that the patient is in the suggestive condition, and acts upon the suggestions. This, I think, is the better way of inducing the suggestive condition by aid of anæsthetics, because in my hands it has so far been the simpler, surer, quicker and more successful. If the patient gets too much of the anæsthetic and does not respond to directed suggestion, just wait until he comes to, so that he can pay attention to you. It is just as easy to induce the suggestive condition while a patient is awaking from narcosis induced by an anæsthetic. All that is necessary is to place the hand on the patient and call him by name several times until you get a response, when proper suggestions will probably be

acted upon. By this method, just as by the ordinary methods, patients will necessarily vary in their response to directed suggestion. In some the anæsthetic need only be given until the suggestive condition is induced, in others it must be given continuously in small quantities to keep them in the suggestive condition, and in others again a handkerchief must be held before the face, even though no more anæsthetic is added. Some authors call the induction of the suggestive condition by aid of anæsthetics or narcotics; forced, or compulsory hypnotization, but in my observations, patients always had power to refuse absurd suggestion if they chose. A few cases will illustrate the application of the method in detail, and give a better idea than a lengthy description.

Case 1.—This case will show that the suggestive condition can be induced by verbal suggestions in a patient, while awaking from narcosis. It was an experimental case undertaken to demonstrate to a student, Dr. Ellis, that persons under the influence of an anæsthetic are amenable to control by suggestion if their attention can be obtained and concentration secured.

Annie B., a girl of eleven years, came to the surgical class at the Northeastern Dispensary suffering from an ingrown toenail, which we attempted to remove under cocaine anæsthesia, but the child refused to allow us to insert the needle again after the first attempt. Two days later ether was given, and the offending nail removed. As she was recovering from the narcosis, I placed my hand on her forehead and called her by name several times, and after getting a response, began to suggest: "You hear me; you are sleepy; you are tired; do not awake until I tell you; you hear all I say, and

you want to do as I tell you. How do you feel? Can you speak? Answer." "I am drunk and my head aches." Rubbing the forehead and suggesting: "Your headache is gone; your head feels comfortable," relieved it immediately. I then suggested, "You have not and you will not have, any pain in your toe. Your toe is healing quickly. You are now feeling so well that you will sing us a song;" whereupon she immediately began to sing loudly and clearly, the child's song:

"Oh! dear mother what a pain I've got,  
Take me to the doctor's shop,  
Doctor, doctor, shall I die?  
Yes, yes, yes, and so will I."

She then laughed loudly and was quieted by further suggestion. The character of the song shows the suggestive effect of the surroundings upon the child while in the suggestive condition. Testing for the degree of suggestibility showed her to be a somnambulist and suggestive catalepsy was easily induced.

She awoke on suggestion, still somewhat dazed by the ether, and vomited in spite of suggestion. Two days later on being questioned she stated that she remembered nothing about the suggestions and singing. There was no pain during the dressings, and the healing was painless as suggested.

Case 2.—This case shows how chloroform was successfully used to induce the suggestive condition after failure with the ordinary verbal methods.

Mrs. G. R., age 28, primipara, had been in labor from 2 a. m., May 16, to 2 a. m., May 18. The labor was a dry one, the cervix hard and yielding very slowly. Drugs were of little value in this case. Digital dilatation only in-

creased the suffering. Finally the labor pains ceased altogether, the patient became nervous, exhausted, refused nourishment and became unmanageable. I tried ordinary methods for inducing the suggestive condition without the patient's knowledge, but failed. On account of the condition of the patient, I decided to use chloroform to aid the induction of the suggestive condition, and then to apply the forceps.

Before commencing the administration of chloroform, I spoke to her substantially as follows: "Your labor is what we call tedious labor, and is due to the waters having come away too early; the pains, therefore, are ineffective, continuous and cramp-like; you have refused nourishment and have not slept for three nights, consequently, you are hysterical and exhausted, and on this account I propose to terminate the labor immediately. I am going to give you chloroform in a certain way so that you will require very little, and not feel any after ill effects at all. You will feel the child being born and feel whatever I shall do, but you will be comfortable and free from pain. If you should feel any pain, do not move about, struggle or scream, but remain quiet and tell me, for you shall hear all I say and be able to speak. I will stop when you tell me and give more chloroform. You will only awake when I remove the chloroform and tell you to awake. Do you agree to do all that I shall suggest for your relief?" Answer: "Yes, I will do everything you want me to do, if you only give me chloroform, for I know many women who got their babies without pain when the doctors gave them chloroform."

She was then told to assume a comfortable supine position in bed, to close her eyes slowly, and to keep them shut,

to relax her entire body, to listen only to me, not to speak unless requested to do so, or only if she had pain, and to try hard to do as I suggested. A small quantity of chloroform was poured upon a handkerchief and held about two inches from the nose and mouth and after waiting about a minute, it was suggested: "Take a slow, deep breath; take another, another, another, another. Breathe naturally. Your head is beginning to swim, swim, swim. You feel sleepy, sleepy, sleepy. Count slowly; before you get to forty you will be asleep." When she stopped counting I removed the handkerchief and suggested the next number until she responded, and after repeating this a few times the handkerchief was handed to the nurse and the necessary directions given to her. The patient then said: "I hear all you say." Immediately I suggested: "Yes, you do; but you feel comfortable and free from pain." I then passed my hand slowly into the vagina, dilated the cervix to the sides of the pelvis and thoroughly flexed the head whose position was left occipito anterior. The Farnier ax's traction forceps was then applied to the head engaged at the brim, and steady traction made intermittently, after telling the patient to turn upon the right side, which she did immediately and without assistance. I suggested during the traction: "You feel comfortable; you are asleep; you feel everything; you hear all I say and what I am doing does not hurt, though you feel it." She lay perfectly quiet and relaxed; and so the child was brought down upon the perineum, forceps removed and the patient told to bear down strongly, which she did, the child being born alive, and the perineum remaining intact. Time, about twenty minutes; amount of chloroform, about three

drachms. She then apparently slept on and the placenta was delivered by the Credes method painlessly.

To be certain that the suggestive condition was present, I requested the husband and then the nurse to arouse her, which they tried to do by calling her loudly by name and by shaking her, but in vain. She awoke immediately at a suggestion from me, being still inclined to sleep until I ordered that the chloroform bottle and the handkerchief be taken out of the room and gave the suggestions: "You are wide awake, eyelids are not heavy; your mind is not confused; the effects of the chloroform have all passed away;" when she immediately brightened up, looked surprised, began smiling, and asked if the baby was born all right. When asked if she had any pain she said: "No, but I remember everything." The evidence that the suggestive condition was present was first—the amenability to control by suggestion, and second the presence of what many writers call *rapport*. In this case we really had *analgesia* and not *anaesthesia*. As I gave no explanation, the patient, husband and nurse thought it a wonderful way of giving chloroform.

Case 3.—This case shows that while the patient was amenable to suggestion, and that the suggestive condition could be produced by verbal suggestion, still the pain was so severe that she still suffered in spite of her response to most of my suggestions.

Mrs. J. P., age 20, primipara, was in labor twenty-six hours. The head was upon the perineum, but still in the pelvis and remained so for three hours without any advance. The labor pains had stopped and the patient complained of continuous pain and exhaustion. Dr. A. E. Bieser had charge of the case, and

I was called to administer chloroform. Verbal suggestion easily induced the suggestive condition and directed suggestion removed the continuous pain and sense of exhaustion. But suggestion directed to contraction of the womb and the abdominal muscles and the efforts at bearing down, in spite of suggestions to the contrary, caused severe pain and aroused the patient. After talking to the patient in the waking state, much as in Case 2. I began the administration of chloroform, the patient taking deep breaths and counting slowly. When she stopped the next number was suggested until she repeated it, and this was done several times. Catalepsy was induced by suggestion. It was then suggested to her as follows: "You are now, under the influence of chloroform; you feel comfortable; you hear only me, feel only me, you have no pain, the chloroform has stopped it all. Do you feel comfortable? You can speak." Answer: "I do." Dr. A. E. Bieser then passed his hand into the vagina, lifted the head toward the brim, flexed it and turned the head from the left occipito-posterior position to the left occipito-anterior position. Then traction with the McLane forceps, brought the head through the pelvis to the vulva; the forceps were then removed, and the suggestion to the patient, "Now, bear down," completed the delivery of the child. Placenta was painlessly delivered. Patient awoke immediately and smiling at my suggestion, said she felt no pain and did not know the baby was born. Placing my hand on her forehead and suggesting, "You remember everything; did not suffer," removed the amnesia. Quantity of chloroform, about two drachms; time for delivery, about twenty minutes.

A report of more cases of this sort

would only be repetition. Statistics for practical family doctors are not as valuable as usually supposed, for the numbers give a sense of accuracy which is not so often realized. Remember we are called upon to treat individuals and not

their diseases alone. Remember the mind affects the condition of the body, and conversely the condition of the body reacts upon the mind; so treat both, and you will be treating your patient scientifically and properly.

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## PARACELSUS.

MARY SCOTT FIELDING.

The traveler in Bavaria, if he should happen to visit the city of Salzburg and turn his footsteps toward the famous church of St. Sebastian, would naturally have his curiosity aroused by a broken pyramid which stands in front of one of the little chapels which nestle around the mother church, under her sheltering shadow. It is the monument of Paracelsus, and the beholder—if he be gifted with even ordinary imagination—sees in this peculiar form of monumental architecture a singular fitness—a symbolic meaning which bears a striking relation to the life and work of him whose memory it perpetuates. The pyramid, though *broken*, stands firmly on its base. The work of Paracelsus, though superseded by more modern methods, had a firm basis in fundamental laws, and the value of his teaching is still appreciated. There is a Latin inscription on the monument which lauds his universal skill and his ability to cure diseases considered by many others incurable. The inscription also informs us that he left his property to the poor. His family coat of arms and motto—"Pax vivis requies æterna sepulchris" (peace to the living; the repose of eternity to those who slumber) are also inscribed thereon.

Born just one year after the discovery

of America, in 1493, Paracelsus was one of the most brilliant lights of his century. The influence of heredity and environment are manifest in his life, for his father was a physician, and his mother the superintendent of the hospital at the abbey of Maria-Einsiedeln. It was there, in the Canton of Schwytz, that Paracelsus was born and grew up to boyhood. The strength of the mountains was in the lad. He studied medicine with his father, and at the age of sixteen entered the University of Basel. Later he became a pupil of Tritheim, a bishop of Wurzburg, distinguished as an alchemist and philosopher. Alchemy at that time was a popular so-called science, and many of the brightest minds were engaged in the pursuit of the secret of transmitting the baser metals into gold. Evolutionists recognize this as a necessary step in the evolution of the science of chemistry, as astrology led to the science of astronomy.

It must be remembered that alchemy originally meant the extracting and mingling of the juices of plants; and the chemical changes wrought by fusion naturally led to the experimenting with metals. As these plant fusions were made for medicinal purposes, it is readily seen why alchemy should have been



a necessary study for physicians of that time.

Magic, a term whose meaning has completely changed since the days of Paracelsus, was also a part of the physician's education, and was regarded as a noble science. Paracelsus tells us that Christ and the apostles had magic power, and from this we infer that he meant spiritual knowledge, and a recognition of laws not commonly understood. In absolute fairness one should be familiar with the meaning of these terms at the time they were so much in evidence, in order to give due credit to the teachings of the earlier writers. Magic today is associated in our minds with conjuring, mountebanks, etc.; that it meant to Paracelsus intuition, and a knowledge of psychic processes, is very clear:

"The inner nature of everything may be known through magic in general, and through the powers of the inner sight. These are the powers by which all the secrets of Nature may be discovered. It is necessary that a physician should be instructed and become proficient in this art, and that he should be able to find out a great deal more about the patient's disease by his own inner perception than by questioning the patient. For this inner light is the astronomy of medicine; and as physical anatomy shows all the inner parts of the body, such as cannot be seen through the skin, so the magic perception not only shows all the causes of disease, but it furthermore discovers the elements in medicinal substances in which the healing virtues reside. That which gives healing virtue to medicine is its "spiritus" and it is perceptible only to the senses of the sidereal man."

The magic power is true faith, and here we come upon suggestion in an old form. Cures may be made by the lay-

ing on of hands and Paracelsus adds this is a wonderful but a natural method.

His attitude toward the then existing medical science was not friendly. He writes: "The best of our popular physicians are the ones that do the least harm, but, unfortunately some poison their patients with mercury, and others purge them or bleed them to death. There are some who have learned so much that their learning has driven out all common sense; and there are others who care a great deal more for their own profit than for the health of the patients. Medical science may be acquired by learning, but medical wisdom is the gift of God."

This denunciation naturally raised antagonism and made him many enemies. But he had started out to reform the art of healing and to put it on a philosophical basis, and he began by delivering his lectures in German instead of Latin, much to the disgust of his professional rivals. He was at this time a professor in the university at Basel. Later he was compelled to leave, and he sought refuge with the Duke Ernst of Bavaria at Salzburg; but the implacable hatred of his enemies pursued him even there, and he was murdered in the ear 1541 at the age of forty-eight.

It used to be the way to "put out the lights" in olden times. History teems with the records of the murder and martyrdom of many whose only offense was to bring more knowledge to the world. Heads came off easily in those days, and nearly all the knowledge of the fundamental laws of science have been bought with the lives of these faithful ones who dared to be true to their convictions.

Paracelsus was a psychologist, and many of his sayings may be said to have anticipated the theories of today in psy-

cho-therapy. We might re-echo the following without much change of wording or meaning:

"Medicine is not merely a science, but an art. It does not consist merely in the compounding of pills, plasters, and drugs of all kinds; but it deals with the processes of life which must be understood before they can be guided. All art, all wisdom, and all power act from one center toward the periphery of the circle, and whatever is included within the circle may be regarded as medicine. A powerful will may cure where doubt will end in failure. The character of the physician may act more powerfully upon the patient than all the drugs that may be employed. A physician without religion and firmness will be a failure. Blessed is he who knows the living medicine, and how to obtain it."

Paracelsus, in his efforts to restore vitality to diseased parts, attempted to attract the vital energy from living objects. Although he tells us that "Nature is the true physician," he does not seem to have realized that the healing force lies within man. He takes account of the influences from without which produce morbid mental states, such as grief, worry, etc. He lays much stress on the power of the imagination, and also on the power of directed thought. He evidently believed in telepathy although the word was unknown in his time. He voices a truth which applies equally to the mental or the physical domain when he says: "The less power of resistance for actual influences that a person pos-

sesses the more will he be subject to such influences."

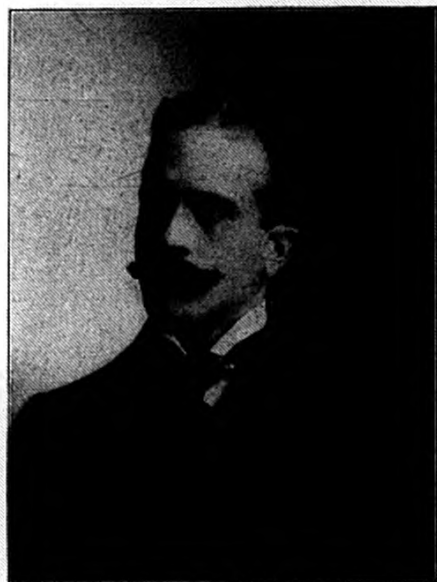
That he recognized and understood the power of auto-suggestion is evident on many of the pages of his works: "Imagination may create hunger and thirst, produce abnormal secretions, and cause disease; but a person who has no evil desires will have no evil imagination, and no diseases will spring from his thoughts." And what is this but suggestion when he affirms that the diseases arising from imagination may be cured by the power of faith? In extreme contrast to most of the earlier works in healing, those of Paracelsus teem with splendid common sense. As in that twilight time in the medical world, there is much that is of little practical value, but there is far more that is of value, and it still survives because it is true. There can be found nothing more up-to-date than the following: "Those who merely study and treat the effects of disease are like the persons who imagine that they can drive the winter away by brushing the snow from the door. It is not the snow that causes the winter; the winter is the cause of the snow. He who knows only the external form of man, and not the power by which it is produced, knows nothing but an illusion; his science is illusory, only fit to impose on the ignorant."

It is said there is nothing new under the sun, but all things must be perceived to be understood. Paracelsus was a beacon light to his own and later generations. All honor to his memory!

Of-repeated bathing of the body with either water or equal parts of water and alcohol, has a wonderful effect in reducing temperature and giving comfort to the patient. Do not forget to

bathe the double-heated back, and allow the water, etc., to dry without touching the skin with a towel. This treatment promotes sleep—nature's great restorer.—*Canadian Medical Record.*

## BIOGRAPHICAL SKETCH.



WM. COCHRANE DOBSON

Dr. William Cochrane Dobson was born in Newark, N. J., May 8, 1868. He attended the public schools and also Grace Church Academy of that city. Dr. Dobson is a graduate of the Medical Department of Hamline University, Minneapolis, Minn. He began the study of medicine in the office of Dr. Emary Austin Miller, of Newark, N. J., and after spending a year there he was under the preceptorship of Dr. W. J. Kransi, of Brooklyn, N. Y., after which he spent two years in the office of Dr. D. C. Jones, of St. Paul, then city and county physician, Ramsay County, Minnesota. After graduation from the Medical College Dr. Dobson had the honor of becoming instructor in physiology at the Medical Department of Hamline Uni-

versity, assistant gynecologist at Good Samaritan Dispensary, Minneapolis, Minn.; associate surgeon of St. Paul Dispensary, St. Paul, Minn.; assistant neurologist in charge of clinic of nervous diseases of St. Paul Dispensary, St. Paul, Minn.; visiting physician to Catholic Babies' Home, St. Paul, Minn.; examiner and camp physician to Modern Woodmen of America, at East St. Paul, Minn.

To Dr. Dobson also belongs the honor of being instrumental in making the Minneapolis College of Physicians and Surgeons, the Medical Department of Hamline University in 1896.

At the State Medical Board of Minnesota examinations, Dr. Dobson was credited with having prepared the best set of examination papers in a class of forty-five applicants for states certificates April, 1896.

While attending Hamline University Dr. Dobson was appointed president of the Students' Association.

In 1898 he removed to Irondale, Ohio, where he became township physician to Saline Township, Jefferson County, Ohio.

Dr. Dobson has been intelligently watching the cures of the different schools of healing, including Mental Healing, Christian Scientist, Faith Healing, etc., for some time, and continually reaching, as he says, for that "indefinable something" that was healing cases which were incurable according to the medical books. This naturally brought him to the study of psychology, and eventually led him to the threshold of suggestive therapeutics.

The doctor has been in great demand

as anæsthetizer to administer chloroform and ether for other physicians and surgeons, because he obtained and held a complete and satisfactory anæsthesia, there being an utter absence of fear or struggling on the part of the patient. This the doctor now attributes to an unconscious use of suggestion, of which he was totally unaware at the time, but

which he now recognizes, after study of the subject.

We are pleased to announce to our readers that Dr. Dobson will contribute some novel and interesting applications of suggestive therapeutics in the articles and clinical reports which he will contribute from time to time.

## A CLINICAL REPORT.

WILLIAM C. DOBSON, M. D., HARRISVILLE, O.

Mrs. T. F.—, aged 43. This is one of the most interesting cases that I have been called upon to treat. She consulted me during the month of November, 1899. This woman asked to be cured of the "coffee habit." She said that about ten years ago she began to eat a little roasted coffee every day, using a few grains several times a day, and presently she began to carry some in her pockets, when for any reason she left her home. No attention was paid to this matter by the other members of the family until they learned of its having become quite a habit with Mrs. F. They requested her to desist, which she promised to do, but after repeated attempts she found that it was impossible. Relatives and friends of the patient would hide the coffee, remonstrate with her, telling of the undoubted evil effects of the habit, and even threatening her in various ways, all to no purpose, however, for, when unable to find coffee about the house, she would walk to the village and purchase some, and when the family ceased to allow her any money she began to steal coffee whenever and wherever possible. Five years ago she was eating at least a pound

of coffee every twenty-four hours, while at the time she presented herself for treatment she was consuming about half a pound each day.

When the patient came to me for treatment she was upon the verge of collapse, so nearly exhausted when she reached the office that I sent her home, waiving examination until another time.

Upon her return to the office I found her suffering from melancholia, accompanied by loss of appetite, indigestion, constipation, frontal headache and insomnia.

Suggestive treatment was administered and after the fourth treatment the symptoms of melancholia began to disappear, appetite and digestion were stimulated, the organs of elimination were acting normally and the patient was enjoying a full night's rest for the first time in two years. Treatment by suggestion was continued for six weeks with most satisfactory results.

Mrs. F. gained in weight about twelve pounds. She has a rosy complexion and elastic gait and has not eaten one grain of coffee since the administration of the

first treatment and is enjoying better health than for many years past.

CASE II.

Mrs. C—, aged 40, called about the first of November last for consultation. She said that she had suffered from persistent headache during the past nineteen years.

Inquiry elicited the fact that she also suffered from indigestion, constipation and insomnia.

The headache, affecting the frontal and occipital regions, was almost constant, in fact, the patient declared that there had been but few days of the past nineteen years in which she had freedom from headache.

This woman informed me that she had consulted eight physicians during the past six or seven years, but had only obtained temporary relief. She dreaded the future and had given suicide serious thought as a means of disposing of an existence which had long since ceased to know any pleasure, ease or comfort.

Careful examination of this patient failed to disclose organic trouble of any sort.

Treatment by suggestion was begun at once, and before leaving the office this patient was free from headache and in a pleasant frame of mind.

The third treatment relieved the insomnia and improved the appetite, while the fourth treatment removed the constipation. Six weeks' treatment produced a marked change in this patient. From a pitiable sufferer she was transformed into a happy woman, free from any physical or mental ailment. The above case is one of a class which has puzzled the medical fraternity for years past. While these cases are especially amenable to treatment by suggestion drugs have never proven of any value.

Eight physicians were consulted and eight different diagnoses obtained; each

physician was given a fair trial, which resulted in failure in every instance.

These physicians, or at least four of them, with whom I am personally acquainted; do not lack medical education, but their ignorance of psychology and the laws of suggestion caused them to lose an interesting and profitable case.

### THE POWER OF THE SOUL.

E. HOOD CORSON, D. S. T., M.D.

Principal of Pine Crest Sanitarium and New Hampshire School of Suggestive Therapeutics and Medical Electricity, East Rochester, N. H.

Prof. Thomson J. Hudson, in his book, "The Law of Psychic Phenomena," says, in speaking of the subjective mind: "It must be acknowledged by all who have witnessed, under test conditions, any of the physical phenomena, that there is a dynamic force residing somewhere that is capable of moving ponderable objects without physical contact, and that this force, whatever it is, or from whatever source it emanates, possesses intelligence, often to a remarkable degree. "The writer can but fully coincide with this belief in the matter, in the face of certain facts that have come to his notice. It may be well to relate one of many similar cases, bearing on the dynamic power of the psychic force. A company of ladies and gentlemen were assembled for an evening's entertainment, and it was stated by one of the party that any one of the gentlemen could be raised when stretched at full length on the floor, by four persons simply placing the first finger of each hand under him. The subject selected for the test, who, by the way, stated in very positive language that it could not be done, was more than 6 feet tall and weighed not less than 170 pounds. The conditions were these: The

subject was to stretch himself at full length, making his muscles as rigid as possible; the four persons, two on each side, were to place only the first finger of each hand under him, and at the word "ready," the subject and the four who took part were to draw in a deep breath and at the same time the four (who were of course then in a stooping position) were to straighten up when the subject would be raised from the floor on the ends of their fingers without their using any strength. The trial was made. The first time they raised him on a level with their heads; and as there were still some doubts in the subject's mind, a second test was made, and they tossed him so high that his head struck the ceiling, which was about eight and a half feet from the floor. The four doing the lifting (two of them being ladies) firmly declared that they did not use any muscular strength, and that the subject rested on their fingers as lightly as cork. They simply willed him to rise, in connection with the other persons present, who were confident that it could be done, as they had seen it done before, and had lent the aid of their psychic force. This is quite a common test at evening entertainments, the persons participating seldom understanding how it comes about.

No doubt many of my readers have at some time of their lives played what is known here as the "willing game." The plan is to have some one of the party blindfolded and another to hide an object in some place known to all in the room except the person who is blindfolded. The latter is turned around several times to bewilder him as much as possible as to his location, and is then told to find the hidden article. The others, knowing where the object is, keep their minds concentrated on it, willing that the subject shall find it; and if he is a good psychic he will have very little trouble in doing

so. I have taken part in this many times before I knew anything about the power of the mind, and I now think it is a pretty good test of telepathy. I could relate more cases of this kind, but I do not wish to take up space in giving proof of a fact so evident. There is a force within man, other than physical force, that can be manifested in many ways to intelligent minds through the senses of feeling, hearing and seeing. I have witnessed much of this phenomena.

In a future article I shall relate some interesting experiences of my own in mind reading and thought transference, if such experience, in the estimation of the editor, would be interesting to the readers of this magazine. These experiences date from early boyhood, and long before I knew the causes or could account for them. There is hardly a day passes in which I do not get intelligence from my subjective mind, and I am now watching these communications with very great interest. If I had understood this in days past, as I do now, I could have avoided much trouble and loss. It makes me thrill with joy when I contemplate the grandeur of such a force.

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[We shall be pleased to have some of Dr. Corson's personal experiences in thought transference and mind reading, and also his subjective communications. It is seldom that the workings of the involuntary mind rise above the doorstep of our objective consciousness; when it does, the condition is usually an abnormal one. Perfect control of both the voluntary and involuntary mind would render the possibilities in many directions almost limitless. We should like to have the Doctor state as accurately as possible what mental condition, environment, etc., best favor these visitations.—Ed.]

# SUGGESTION.

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## EDITORIAL.

**X** When this paragraph is marked with a red and blue cross it shows our friends that their time has expired, and we shall be happy to receive a renewal of their subscription soon.

### The Hypnotic Sleep.

In glancing over some of our medical exchanges we observe that the articles devoted to the subject of hypnotism in connection with therapeutics are very misleading in their premises usually, even when coming from the pen of some intelligent physician. That such a state of affairs still exists in the face of all the research and experimentation that has been devoted to the subject, is surely culpable, to say the least. There is sufficient data available to place the disputed points once for all in the true and proper light; why this is not sought is not easily explainable—unless it be that preconceived opinion is more strongly in evidence than a desire to settle the question in a scientific way. We refer specially to that part of hypnotism known as hypnotic coma, or sleep, as it is erroneously called, for sleep is never present in its normal unconsciousness in cases of hypnosis, nor is the condition of insensibility

to the surroundings ever attained by the patient even in the cataleptic state.

A contemporary in a lengthy article on hypnotism, after giving directions for inducing hypnosis, remarks:

“Very susceptible persons will, in the course of ten minutes, sometimes fall back insensible. You may not be positive about the insensibility being real hypnotic coma. You test for this as follows: Raise the patient’s hand, and if it falls back immediately as a dead weight, it is a good sign. Raise one of the eyelids, and if you find the eyeball turned upward and wandering in its orbit, there is little doubt of your having induced true hypnotic coma. Sometimes the eyeball is in its natural position, and does not contract when a lighted candle is brought near it. Sometimes breathing or placing the hands on the forehead will deepen the sleep, but operators are warned not to produce too much brain hypnosis.”

That physicians should be ignorant of the true physical and psychical condition thus induced, is hardly excusable, especially if they use hypnosis in their work, and have an opportunity of testing for themselves. As a matter of fact, these “insensibles” may be made to relate everything said in their presence during

the time they were supposed to be asleep. The test in raising the patient's hand, if it falls back like a dead weight, indicates that the muscles are in a condition of relaxation.

The contraction of the pupil of the eye is owing to the involuntary action of the iris when subjected to strong light. Personally, I have no evidence that the eye of a hypnotized patient does not contract under the rays of a lighted candle. This is one of the absurd claims set up by stage hypnotists that would be easily tested by examination.

There is no special method upon which the depth of apparent sleep depends. It is owing to the preconceived ideas and education of the patient. There can be no intelligent divisions of

hypnosis, as no two people receive impressions exactly in the same manner, or interpret them in the same way. All cases in which sleep is simulated will be found to be those in which the patient acquiesces with the expressed wish or command of the operator. This readiness to accept suggestion, which we find alone in the class of patients called somnambules (the only class the stage hypnotist succeeds with), underlies all the phenomena of hypnotism, which creates the wonder of those who witness it but do not understand it. It is the duty of the physician to make himself familiar with a power that can be utilized in therapeutics with such excellent success, and to understand its possibilities and limitations in an intelligent manner.

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## ENQUIRY AND EXPERIENCE DEPARTMENT.

DENVER, COLO., Feb. 19, 1900.

EDITOR SUGGESTION:

Dear Sir: If subscribers are permitted to ask questions, I would be pleased to have you discuss the following through the columns of your magazine:

What are the physiological signs of deepest sleep capable of being produced by passes, suggestion, or both, and how produced from somnambulistic stage?

Very truly,

MARK G. EVANS.

There is considerable difference of opinion among physicians and stage hypnotists regarding the condition of hypnosis. Braid believed that the condition of somnambulism was one of sleep, while Bernheim defined hypnosis as a condition, not of sleep, but one in which suggestion has an exaggerated effect. Some

operators declare there are three divisions of hypnotic sleep, some six, some nine, and others upward of thirty. Sleep, we understand is a condition of unconsciousness, and from personal experimenting with hundreds of patients I have arrived at the conclusion that unconscious sleep is never present in hypnosis. This fact is easily demonstrated, for the patients who on being aroused say they were asleep, may be made to repeat every word said in their presence during the period when they were apparently asleep.

The class of patients known as somnambules are very highly suggestible and if the operator says they were asleep they will also say so, but if he insists that they were not asleep, and were aware of their surroundings, they will acquiesce in this statement just as readily.



I am well aware that my opinion is contrary to that of many in the work, but, almost every day I have an opportunity of testing the worth of my statements, and I have yet to find a case in which unconscious sleep was present.

The cataleptic condition which apparently is one of deep sleep is related to the automic muscular action, and does not depend on the degree of suggestibility as many suppose.—ED.

#### EDITOR SUGGESTION:

Dear Sir—The sample copy of your magazine which you kindly sent me came to hand, and I have read it with interest. I am not a novice on the subject, for I have given it occasional attention, by reading books, attending lectures, joining in experiments and investigations, etc., ever since the winter of 1844-45. In 1860 in college I defended Darwin and the evolution doctrine against the fallacious denunciations of the theology dogmatists then holding sway. Early in 1861 I evolved in public addresses the idea that in geological time there were first on the earth animal forms with only one sense, that of touch; then came others with two senses, touch and taste; next, with three, touch taste and sight; then with four, then with five. Man had the five animal senses, in common with all the warm-blooded animals. But I held that man had always been and is now evolving a sixth sense—the psychic or spiritual sense—and that all the phenomena of Mesmerism, magnetism, hypnotism, psychology, faith cure, prayer cure, metaphysical healing, spirit mediumship, clairvoyance, telepathy, etc., etc., were phenomena under a common law related to this psychic or sixth sense, just as all phenomena under visual law is related to the sense of sight, or of

acoustic law is related to hearing, or odor law to smelling, etc. I served about five years as executive secretary and topicist (writer of topical papers) of the State Academy of Sciences at Des Moines, Ia. —1878 to 1884—and made special researches, developments, public advocacy and popularization of the doctrine of evolution, which was at that time stoutly opposed by D. D.'s and church periodicals generally. I am glad to see that there are now reputable M. D.'s like yourself, Dr. Pitzer and others, engaged in reducing all psychic phenomena to a systematized and scientific body of truth; and are establishing regularly incorporated and reputable colleges for teaching these very important psychic laws just as thoroughly and freely as physical laws are taught in the older colleges. Go on, and God speed you. You are in the embryonic line of sentient evolution—in the central heart and living sap-flow of the tree of life. Your work is pioneer work, foundational and constructional work, in the now rapidly unfolding and incoming psychic age of life on the earth.

Inclosed find \$1, for which send me your monthly magazine, SUGGESTION, for one year, and a copy of Dr. Taber's book, "The Secret of Sex," in accordance with the offer printed on page 150 of your magazine for January. Yours fraternally,

H. A. REID, A. M., M. D.  
133 Mary St., Pasadena, Cal.

[The above letter, though not intended for publication, is too good to keep to oneself. It is encouraging when a veteran like Dr. Reid speaks so confidently of the work we are engaged in and the prospects for its future. Truly, the doctor is in the vanguard himself. We should like to hear from him often.—ED.]

## JOTTINGS.

How do our readers like the new spring dress of SUGGESTION? We have selected a color that will not fade so readily. Our subscription list is mounting towards 10,000. We hope to double that figure before 1901.

### **Our Premiums.**

See our premium list. We are practically giving away hundreds of dollars. Take advantage while you may of the liberal offers. "Suggestion, the Secret of Sex," is a very valuable book—one which should be in the hands of the heads of families. The edition is rapidly being sold, and it may never again be obtainable on such favorable terms.

The watches are splendid timekeepers and are all they are claimed to be. This is an opportunity of getting a good watch for a little expenditure of time. The magazine sells on its own merits when brought under the notice of those in sympathy with the work.

### **Second Edition of the Mail Course.**

The second edition of the mail course is now ready for mailing. It is in the form of a large and handsomely bound volume of nearly 400 pages. It is divided into thirty-eight lessons, each dealing carefully with the subject under deliberation. It contains a great deal of new matter, and the whole subject of hypnotism in all its bearings (including stage hypnotism) is exhaustively discussed. Besides, over a hundred methods for inducing hypnosis are clearly and

forcibly presented and twenty-two full page half-tone engravings are used to illustrate the practical work.

The mail course is the most complete and inclusive work of its kind ever published. It is the result of observations from the personal treatment of over 5,000 patients.

### **Smith Premier.**

The Smith Premier grows in favor with the public. A good thing is always popular. We would recommend a trial of this best of all machines before purchasing. It is eminently satisfactory, as we are proving daily in our own offices.

### **Dr. Dinsdale's Apparatus.**

The Dinsdale method of curing diseases of the eye and ear recommends itself to the intelligent reader. Its operation is certainly on a scientific basis—that of increased blood supply by massage to the affected parts. How many of our readers suffering from afflictions of the eye or ear have tried the apparatus?

### **McIntosh Batteries.**

The subtle and curative powers of electricity, so effectual in many cases of disease, can no longer be left out of the calculations of practical and up-to-date physicians. The perfection and reliability of the McIntosh Batteries make it a comparatively easy matter for the physician to use this form of treatment in his practice and thus enlarge his clientele. Write for circular.

**A Watch for 25 Cents.**

Persuade one of your friends that SUGGESTION is a "good thing," obtain a year's subscription from him and forward it to us with 25 cents. Your friend will receive SUGGESTION for one year, and you will receive a splendid watch, which is guaranteed for one year.

**Vril Cordial.**

How many of our readers have tried Vril Cordial? It is said to increase strength and flesh in a remarkable degree. Dr. Armstrong's daily experience with it in his sanitarium for twelve years was most satisfactory to himself and patients. Nothing could be fairer than his offer. (See advertisement.)

**Developing Will Power.**

The man who is able to overcome his inclinations is said to possess great will power. The man who is able to overcome his disinclinations and immediately carries out his desirable impulses also has great will power. Many of our readers may have the desire to possess one of the gold watches we are offering as a premium, but may never secure one unless they act upon the inclination to solicit a few subscriptions. As soon as you read this, act upon the impulse it creates in you and secure a few subscriptions among your friends. This will increase your will power, and incidentally bring you a handsome gold watch which is guaranteed for ten years.

**Polynice Oil.**

The splendid indorsement that Polynice Oil has received from leading medical hospitals of the United States should be a guaranty of its value in cases of rheumatism, lumbago, neuralgia, dyspepsia and inflammatory diseases. It is the

only proprietary remedy on sale that has been admitted and used in the hospitals, and bears the personal recommendation of leading physicians.

**Anti-Narcosine.**

We should like to have reports from any of our readers who have tried Dr. B. C. Thompson's Anti-Narcosine for the cure of morphine and other habits. The success the doctor claims in using it in his own practice is certainly encouraging to other physicians.

**Dermapurine.**

One of the finest disinfectants and gland stimulants is Dermapurine. We have used the soap personally and find it excellent. Unlike most antiseptic soaps, the odor of Dermapurine is very pleasant and makes an excellent toilet soap. Dermapurine is valuable as a skin and scalp remedy. The manufacturers will send a free sample to every reader of SUGGESTION upon application. Try it, it will repay you. Address the Derma Remedy Co., St. Louis, Mo. Mention SUGGESTION and you will receive a sample free by paying express charges.

**Sanmetto in Chronic Orchitis.**

J. A. Stothart, M. D., Savannah, Ga., reports the following case: "During November, 1898, a Greek fruit vender called at my office, suffering with chronic orchitis. The patient stated that the first attack occurred four years prior to this time. During the four years there had never been more than two and a half months between the attacks. He had been under treatment most of this time, and several times in the hospitals, and had been discharged as cured by several physicians. The testicle had almost arrived at the condition of ossification, but at no time had there been any pus forma-

tion. I prescribed Sanmetto, and directed that the treatment be continued for two or three months. My treatment was carried out to the letter, and there has never been any return of the trouble since beginning the use of Sanmetto. I have used Sanmetto in other urethral troubles with very satisfactory results."

#### **Etiopathy—Way of Life.**

The edition of Etiopathy is quickly being sold. All who wish to secure a copy of this valuable book on such remarkably favorable terms should send in their orders quickly. It is the work of a man of ripe judgment and experience.

#### **How to Relieve Pain.**

I am so frequently asked how to employ suggestion to overcome acute pain that I feel a few remarks on this subject will not come amiss.

Pain may be present in a patient from a variety of causes, but in nearly every case, unless due to actual injury, it is a warning that the circulation in the affected part is at fault. Occasionally we find it due to "pain habit," and in the highly suggestible it is often imaginary. In the two latter classes pain may be removed almost instantaneously by directed suggestion, but when it is due to disturbed circulation it is necessary to take measures which will insure a return to the normal condition. As a rule it takes some time to bring about the necessary changes, which may be reducing a congestion or increasing the nutrition of a part. When this has to be done it is always best to use some mild anodyne, which will make the patient comfortable and give a better chance to remove the cause at leisure. The best all-around anodyne for this purpose is ANTI-KAMNIA. It is sure in its operation,

pleasant to take, and may be purchased in bulk, or, better still, in nice five or ten grain tablets. It will relieve headaches or neuralgia like a charm, please your patient and enable you to take the necessary time to remove the cause without your patient becoming impatient. Even in pain habit and pains in the highly suggestible, it will be found to work well; for nothing operates more satisfactorily than "masked suggestion."

#### **Allison Surgical Table.**

We would like to call the attention of physicians and practicing suggestive therapists to the Allison Surgical Table. After trying others in the market, we find the Allison table to be the best. We are now using it in the Chicago School of Psychology. It is eminently satisfactory, easily manipulated, comfortable, and altogether complete in every requirement of a surgical table. A table of this kind is an absolute necessity for physicians, and not less a necessity for those who practice suggestive therapeutics, for it enhances and expedites the work in a large degree and gives the best conditions for manipulations. We do not know of any other arrangement so satisfactory in the work of the practical masseur; in fact it is a necessity for up-to-date work.

#### **The Handiest Antiseptic and Healer.**

"I cut my hand this morning, doctor, but it is better now, for I immediately poured some turpentine over the wound." This remark was made to me a few days ago by a patient who called to consult me. "Did it smart," I asked. "Oh, yes! But I made up my mind to stand it for awhile, for I knew my finger wouldn't fester after using it. My mother always used to make me use it when I cut myself." I said to her: "I suppose then

you bleed yourself whenever you have a headache simply because it was the fashion to bleed a patient for everything in your mother's day?"

Is it not strange how, in this year 1900 A. D., that people will snuff up salt water for catarrh; pour turpentine, salt water or alcohol over a fresh wound; will wash a wound with carbolic acid and water or some other equally malodorous and dangerous application, when such a harmless, pleasant, painless, healing and convenient antiseptic as Listerine is in existence? This is now put up in small bottles, and should be found among the toilet articles on everyone's dresser. It may be used pure, but the addition of a little water is generally preferable. It makes an excellent mouth wash, eye wash, etc., and is indispensable to one who has become familiar with its many virtues.

#### **The Parker Pen.**

This fountain pen is claimed to be one of the best in the market. This pen sells everywhere at one dollar and fifty cents. By special arrangement with the manufacturer we are able to offer it to subscribers of SUGGESTION at one dollar. Send us a year's subscription to SUGGESTION and twenty-five cents and we will send you, charges paid, one of these fine Parker fountain pens.

#### **The Magnetic Healing Cup.**

The Magnetic Healing Cup Company is receiving extensive patronage from physicians and others. This wonderful process, by which it is said liquid magnetism may be introduced into the circulation, appears to have solved a problem of great difficulty. Like all other excellent things, its use is simple, and it should not retard but rather increase the

efficacy of any other method of treatment. It is said most patients find its use alone to be sufficient in overcoming sickness, as it puts new life and vital force into the system and is never injurious in any case. Unsolicited testimonials indorse all that is claimed for the cup.

#### **Chicago & Alton Railroad.**

For perfect passenger service the Chicago & Alton Railroad is unsurpassed. The comfort of traveling is greatly enhanced by selecting the best line.

#### **What is Weltmerism?**

The following query appeared in the April issue of the *Alkaloidal Clinic*, a magazine which goes to 30,000 physicians every month. It speaks for itself:

"Query 1215—WELTMERISM. Do you know anything of Weltmerism, or magnetic healing as practiced by Weltmer? No medicine is used, but cures effected by the laying on of hands. Is the Chicago School of Psychology reliable? Would it be of any benefit to a physician to take their mail course?"

"W. H. T., Ind."

I know nothing more about Weltmerism than what we gain from the advertisements, and that shows it to be one of those suggestive methods which have succeeded each other very closely since Noah left the Ark. There is nothing new in it excepting the name. If you understand suggestion you are a master of this, as well as Christian Science and the rest of the fads.

The Chicago School of Psychology is perfectly reliable and their mail course of use to any physician. You would learn more, of course, by taking a term there.  
—ED.