

*H. C. Hoskins*

# MESMERISM,

WITH

## HINTS FOR BEGINNERS.

BY

JOHN JAMES,

FORMERLY CAPTAIN, NINETIETH LIGHT INFANTRY.

**Third Edition.**

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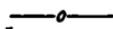
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## P R E F A C E.

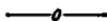


THERE being a demand at the present time for a Text-Book for beginners who are inquiring into Mesmerism, I asked Captain James to allow me to republish, in book form, some articles he had written on the subject for a newspaper of mine. He was diffident. He said that, as a soldier, his literary experience had been small; he had been in the habit only of writing brief notices of *séances*, in which he said what he had to say in the plainest words, and then laid down his pen. I replied that that was exactly what the public wanted; there was too much book-making nowadays, and that if a few soldiers would but take up the pen, and briefly popularise scientific subjects in plain words, so much the better would it be for everybody. Finally he gave way, and this useful little work, which is a great enlargement of his previous articles, is the result.

WILLIAM H. HARRISON.



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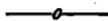
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Called into  
P. Chemistry

# MESMERISM,

*WITH HINTS FOR BEGINNERS.*



## CHAPTER I.

### HINTS FOR BEGINNERS.

MANY English and French writers have given valuable instructions for beginners, but as most of their works are out of print and difficult to obtain, it possibly may not be considered a work of supererogation to offer the experiences of one who has devoted many years to a study of the subject. It may, however, be useful to inquirers to draw their attention to two books lately republished, viz., the invaluable work of Dr. Gregory, late Professor of Chemistry at Edinburgh University, and the lectures of Dr. J. Bovee Dods.

In the following observations on some of the methods used by practitioners for the production of the mesmeric sleep, it should be understood that the writer merely gives the results of his own experience when he recommends any particular procedure.

A

Other methods, used by other mesmerisers, have been found equally successful, and it is probable that the real *desiderata* or requisites for a successful operator are patience, perseverance, and an earnest desire to succeed; the best frame of mind on the part of the patient is, if possible, a state of perfect passivity.

The beginner will probably soon find that he must occasionally vary his method of mesmerising, according to the habit or idiosyncrasy of each patient, and that any particular formula, however efficacious in the generality of cases, sometimes requires to be supplemented by other methods.

It is recommended that the mesmeriser should direct his patient either to place himself in an easy-chair, or to lie down on a couch, so that he may be perfectly at ease. The mesmeriser then, either standing or seated opposite his patient, should place his hand, with extended fingers, over the head, and make passes slowly down to the extremities, as near as possible to the face and body without touching the patient, taking care at the end of each pass to close his hand until he returns to the head, when he should again extend his fingers and proceed as before. It is also useful after making several of these passes to point the fingers close to the patient's eyes, which procedure, in many cases, has more effect than the passes. This simple process should be continued for about twenty minutes at the first *séances*, and may be expected to produce more or less effect according to the susceptibility of the

patient. Should the operator perceive any signs of approaching sleep, he should persevere with the passes until the eyes close, and should he then observe a quivering of the eyelids, he may be pretty certain that his efforts will be successful.

Many experienced mesmerisers have come to the conclusion that the will plays an important part in the production of the sleep and in relief of pain. Whether this be the case or not, it is recommended that the operator should concentrate his energies, and earnestly will, or wish, that his patient should derive benefit from his exertions. Some very susceptible subjects, in the course of ten minutes, or even less time, will suddenly fall back, apparently insensible, in which case the following tests will prove whether or no the real mesmeric coma has been produced. Raise the patient's hand, and should it fall immediately as a dead weight, it is a good sign; then raise one of the eyelids, and should the eyeball be observed to be turned upwards and wandering in its orbit, there can be little doubt of the operator's success. In some rare cases the eyeball will be found in its natural position but with the pupil much dilated, no contraction taking place on the approach of a lighted candle. Even at this early stage the patient may bear the prick of a pin on the back of his hand without betraying any symptom of pain.

Sometimes slow breathing, or placing the hand on the forehead, will deepen the sleep, but the beginner should, as a rule, avoid concentrating the mesmeric

force on the head or region of the heart, and confine himself as much as possible to the passes, "*aux grands courants*," as the French writers term them, *i.e.*, the long, slow passes from the head to the feet. Should the above described signs of mesmeric coma not declare themselves at the end of twenty or thirty minutes, the mesmeriser should ask the patient whether he felt any peculiar sensations during the process, and if so, whether they were more apparent during the passes, or when the fingers were pointed at the eyes. By these inquiries he will soon learn the best method of mesmerising applicable to each particular case, and he should not be disheartened if he does not succeed in producing marked effects at the first or even after many successive *séances*. Pain may be removed and diseases cured or greatly alleviated without the production of sleep, and many patients succumb at length, who have for many weeks been apparently unaffected and proof against all the resources of their mesmerisers.

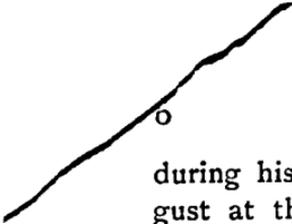
Supposing sleep to be at length induced, the next and very important question is, how to awaken the patient. With most sensitives this is a very easy process, for merely blowing or fanning over the head and face with a few transverse passes will at once dispel the sleep. Should, however, the patient experience a difficulty in opening his eyes, then with the tips of his thumbs the operator should rub firmly and briskly over the eyebrows from the root of the nose outwards towards the temples, and finish by blowing or fanning, taking special care, before leav-

ing the patient, that—judging from the expression of his eyes and other signs—he has evidently returned to his normal state; as a rule, the patient should not be left until the operator is perfectly satisfied that he is wide awake.

There are certain cases, however, where the sensitives should be allowed to sleep for two or three hours or even more, and particularly when the lengthened sleep has been prescribed by the patients themselves. Care must be taken to ascertain that they can be left alone with impunity; the majority may be, but there are cases where the operator should not be absent during the sleep. With a little observation the mesmeriser will soon be able to distinguish between such cases, and learn to adapt his treatment according to the peculiar temperament or constitution of each patient.

Should there be a difficulty in arousing the patient, the mesmeriser may frequently bargain with him as to how long the sleep is to last, and should he promise to awake in the course of one or two hours, he will generally fulfil his promise by awaking almost at the very minute named; the mesmeriser may also insist that his patient should awake at a certain time, and will in most cases be obeyed.

This power of acting on or impressing the patient's mind may be carried into and continued in the normal or waking state, and might be used with good effect in the treatment of dipsomania and other morbid habits, so that the patient would in many cases, in consequence of impressions made



## *Mesmerism.*

during his sleep, be led to entertain an actual disgust at the mere smell or taste of any alcoholic liquor.

The patient during his sleep can frequently give valuable directions to his mesmeriser, both as to the best method of mesmerising him, and the most effective means of terminating the sleep. In some rare cases the sleep is so prolonged, in spite of all the operator's efforts to dispel it, that he is alarmed, and the patient becomes infected by his fears. Above all things, the mesmeriser should preserve his presence of mind, and he may be assured that the longest sleep will end spontaneously.

It may as well be observed in this place that the patient should not be touched by any one but his mesmeriser, unless he wishes it, or at least gives his consent. He can, perhaps, bear the touch of certain individuals, and may express a repugnance to be touched by others, and this quite irrespective of attachment or repulsion with regard to those individuals in his normal state. With most sensitives it is quite immaterial who or how many people touch them; but there are occasionally cases when by so touching them a very distressing state, called "cross-mesmerism," is produced, and the more particularly in the cases of patients who are naturally highly nervous, and, perhaps, hysterical. It is in these cases of cross-mesmerism that we most often find a difficulty in determining the sleep.

The best plan for a beginner or investigator is to witness the procedures and practice of some experi-

enced mesmeriser ; it is much better than relying on written instructions. Before I tried to mesmerise anybody I observed what others did, then closely imitated them, and had many successful cases before I opened a book on the subject.

The treatment of patients during the different stages of the mesmeric sleep must be learnt by practice and observation, and such treatment is almost impossible to be taught solely by books, although certainly many valuable hints may be gleaned from them. The fact is, that scarcely two cases are exactly alike in every particular, and each patient is more or less a separate study. This it is that makes it so difficult to lay down any arbitrary or direct rules to be followed in all cases. For instance, slow breathing on the top of the head, or on the forehead, in some cases produces a most beneficial effect ; in other cases it may produce excitement, to be relieved by fanning or blowing over the head, and by passes drawn from the head down to the feet ; the same is the case with breathing over the heart, a most valuable treatment in the majority of cases where there is palpitation or other disorder of that organ, but in some instances it may produce rather distressing symptoms, also to be dissipated by the fanning or demesmerising process. Should there be pain, or spasmodic contractions, rigidity, or catalepsy, steady breathing at the junction of the head with the back of the neck should be tried ; in most cases the relief is almost instantaneous. But the long passes to the very ends of the fingers

and toes are likely to be the best. Passes at right angles from the seat of pain are often excellent, as if the operator were extracting the pain out of the part into the air.

It is not, however, to be supposed that the unto-ward effects above alluded to are by any means of common occurrence; but it is the duty of any one pretending to give advice on this subject, to caution beginners to be as careful as possible in their treatment of patients who place themselves under their care. The patients themselves can in many cases act as guides to their mesmerisers, by telling them the immediate effects of the different methods employed, and this, quite irrespective of the natural shrewdness or dulness of the sensitives, or whether they be educated or uneducated.

From my own experience, and that of the majority of practitioners with whom I have consulted on the subject, it has been found that the slow passes from the head to the chest, occasionally extended to the feet, are the most soothing and effective, and it is recommended that the operator should not be too anxious to produce sleep or other immediate marked effects.

In cases of pain, spasms, &c., slow breathing over the parts affected is frequently a most useful treatment, and when the breathing is required over the face or neck, a folded cambric handkerchief might be placed on the part, through which the breathing could be applied without lessening its effects.

Slow persistent breathing over an affected part is

a most valuable adjunct to the ordinary process of mesmerising by passes. It is, perhaps, at first rather fatiguing to the operator, but by practice he would soon be able to afford much relief to his patients, without any serious inconvenience to himself. Dr. Elliotson was the first person who recommended me to try the effects of breathing, and from my subsequent experience I have had every reason to acknowledge the wisdom of his recommendation. The doctor was always ready to afford the benefit of his advice to any earnest investigator, and from his vast experience in the employment of mesmerism as a therapeutic agent, and his acknowledged talents as a physician, his instructions were simply invaluable.

It may be observed, that when a mesmeriser fails in affording relief in any particular case, it does not necessarily follow that another practitioner should be equally unsuccessful. There is more or less sympathy between certain individuals, and antipathy between others, and a patient may find the mesmerism of one person agree with him, and that of another not only inefficient as a curative agent, but actually disagreeable and even distressing in its effects. This is more particularly the case where the patient is of a highly nervous temperament and of a weakly constitution.

As a general rule, a mesmeriser when treating a serious case of disease should not attempt to elicit any of the higher mesmeric phenomena, but content himself with exerting all his energies to benefit his patient. Should, however, the faculty or power of

“introvision” declare itself, then he may enlist the assistance of that faculty, as frequently very marked and extraordinary benefit has been derived from the sensitive’s lucid description of the nature and seat of his disease, and his clear instinctive knowledge of the best remedies to be applied.

It is, however, strongly recommended that when serious disease exists, the patient’s ordinary medical attendant should be consulted before mesmerism is employed. All the important medical cases I have attended were undertaken with the consent or at the express desire of a medical man.

There are certain other methods of producing the mesmeric coma, the most common of which may be called “the thumb-pressure and staring process,” employed by Monsieur Lafontaine, a well-known French mesmeriser, who came to this country many years ago on a lecturing tour. He seated himself opposite the patient, and taking his hands, pressed the tips of his thumbs with his own, at the same time gazing fixedly into the patient’s eyes, a method which frequently produced a powerful effect. Mr. Braid, a surgeon then practising at Manchester, having observed the effects produced by Monsieur Lafontaine, tried a series of experiments, the success of which led him to believe that he had discovered the secret of mesmerism.

Mr. Braid found that by fixing the patient’s gaze upon an object above the level of vision, a pencil case held up, or a cork fixed on the mid-forehead, he could induce a peculiar condition which he called

“hypnotic, or nervous sleep.” During this state he elicited many wonderful phenomena, and had great success in the treatment of disease. In my opinion—and I have witnessed many experiments exhibited on public platforms by the followers or imitators of Mr. Braid—the hypnotic state is not identical with the mesmeric coma, and, in fact, Mr. Braid himself is said to have acknowledged afterwards that his was a new discovery, and not merely an explanation of mesmerism. There are many phases of the hypnotic condition that widely differ from mesmerism; for instance, Mr. Braid observed that all the senses, with the exception of sight, were wonderfully exalted; so much so, that he found by measurement that the hearing is about twelve times more acute than in the natural condition. “Thus, a patient who could not hear the ticking of a watch beyond three feet when awake, could do so when hypnotised at the distance of thirty-five feet, and walk to it in a direct line without difficulty or hesitation. Smell in like manner is so wonderfully exalted, that a patient has been able to trace a rose through the air when held forty-six feet from her.” Now, every experienced mesmeriser knows that during the true mesmeric sleep the functions of the different senses are, as a rule, temporarily suspended, and that the sensitive only smells, feels, and tastes in sympathy with or through his mesmeriser, and that in most cases he is completely deaf to all sounds save that of his mesmeriser’s voice. Again, during the hypnotic state it is easy to infect the patient with

any delusion the operator may wish, so that he may fancy a pocket-handkerchief to be either a child or a serpent.

During that phase of mesmeric sleep, called the sleep-waking state, such delusions could seldom if ever be produced, for during that condition the mind of the sensitive is remarkably acute; but, of course, if by touching the phrenological organs, or by other means, a state of suggestive dreaming is induced, the sensitive may then be persuaded that the glass of water he is drinking is wine or brandy, and he will soon be as tipsy as if he had really imbibed so much strong alcoholic liquor.

Probably, however, both these states, induced artificially, together with natural somnambulism, cataleptic trance, and other products of disease, are all intimately connected, and it is a great desideratum that medical men should study the subject, because, from their education and training as physiologists, they should be able to turn it to good account in their treatment of many forms of nervous disorder. Of course, it cannot be expected that medical men should themselves be operators; that is quite out of the question; they could not afford the time; but, as is the practice in some of the northern countries of Europe, they might superintend one or more mesmerisers, who could act under their directions.

Dr. Esdaile, who was so successful in the Government hospitals in India, employed a staff of native operators, as he soon found that in that climate his own health could not stand the fatigue of mesmerising.

In his report to the Government he stated that "out of 261 operations, 215 of which were extirpations of tumours of all sizes, varying in weight from ten to one hundred and three pounds, not one patient had died from the direct effects of the operation. The deaths that took place amounted to five per cent., and happened days and weeks after the operation, from fever, dysentery, and exhaustion."

The Governor-General, Lord Dalhousie, marked his sense of Dr. Esdaile's services by promoting him to the rank of "Presidency Surgeon." It is evident that Dr. Esdaile could never have achieved such remarkable success had he not employed a large body of assistants.

There can be little doubt that after Dr. Esdaile's triumphant success, and the numerous and well-authenticated cases of successful operations performed under similar conditions, both in England and France, that had it not been for the discovery of the use of ether and chloroform in surgical operations, mesmerism would at this day be in general use, not only as an anæsthetic, but also in the treatment of all forms of disease. There is still one great advantage which the mesmeric coma possesses, in comparing it with the effects of ether and chloroform in severe and difficult operations, and that is the power of the mesmeriser to prolong the state of insensibility to almost any length of time without danger, and that all the subsequent dressings can be carried on during the sleep, without pain or exhaustion, or inconvenience to the patient.

The majority of the members of the medical profession appear to have hastily and erroneously concluded, that because chloroform can be used in all cases—except where there is heart disease—and that the use of mesmerism as an anæsthetic is limited to a comparatively small number of patients, who can by its means be rendered absolutely insensible to pain, therefore, as some of them express themselves, “there is no further use for mesmerism now we have got chloroform.” They have completely ignored the fact that numbers of their professional brethren have recorded cases of almost every form of disease cured or greatly relieved by means of mesmerism, and that if people would only devote a portion of their spare time to the practice of what, without exaggeration, may be called “the medicine of nature,” the same success would undoubtedly attend their labours.

A collection of all the cases of cures and alleviation of disease recorded in the volumes of *The Zoist*—many of them reported by Dr. Elliotson and other well-known medical practitioners— together with the numerous cases of operations performed during the mesmeric sleep, to which might be added Dr. Esdaile’s operations in the hospitals of India, would form a most valuable book of reference, and perhaps draw public attention to a science which has of late years been unfortunately much neglected.

It is greatly to be regretted that many investigators are much too anxious to obtain what they call “the more interesting and wonderful phenomena,”

and care comparatively but little about the curative effects of mesmerism. This is a great mistake, for they may be assured it is often the case, that during the treatment of almost all forms of disease, particularly those of the nervous system, that the higher phenomena are developed and so to say present themselves, as if to reward the operator for the labour and anxiety he may have experienced in endeavouring to relieve his suffering patients. There can be little doubt that mesmerism would have made much greater advances in public estimation, had its practice been almost entirely confined to the alleviation of pain and the cure of disease.

If such had been the general aim of practitioners, the "*cui bono*" question so generally asked by sceptics and scoffers would have been satisfactorily answered, and the answer would most certainly be appreciated and endorsed by the vast number of sufferers who have been cured by this "gift of God," after having in vain sought relief from what is called the orthodox practice and resources of medicine.

Many ingenious, but perhaps not ingenuous people, are accustomed to assert that, all that is true in Spiritualism is nothing else than mesmerism, and it is really quite surprising to find the number of individuals who avow their belief in the latter, when they wish to depreciate the claims of the former science. They are in the habit of exclaiming, "Oh! we always believed in mesmerism;" but it is to be suspected

that, in former days, when the hostility to mesmerism was almost as bitter and unscrupulous as it is to-day against Spiritualism, that at least some of these *soi-disant* believers were amongst the most active of its opponents.

## CHAPTER II.

ON CERTAIN MISCONCEPTIONS REGARDING  
MESMERISM.

IN treating of the study and practice of mesmerism, it may be useful to notice certain misconceptions frequently entertained by beginners. A tyro has often felt disheartened because, after several trials, he has failed in producing sleep. Now, the fact is, that many a severe pain may be alleviated or altogether removed, and many a disease cured, without the patient experiencing the slightest inclination to sleep.

When sleep *is* produced, it should be welcomed as a proof of the susceptibility of the patient to the mesmeric influence promising some substantial benefit, and naturally encouraging the mesmeriser to persevere. But the mesmeric coma is not absolutely necessary, except in cases where an operation is to be performed and complete insensibility to pain is required, or when the patient has been deprived of natural sleep for any length of time; in the latter case the mesmeric passes, even if they do not produce any immediate and marked effect, will often

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tranquillise the system, assist nature, and lead to the patient's enjoyment of a good night's rest.

In fact, one of the most remarkable and valuable virtues of mesmeric treatment, is this very power of inducing a sound and healthy *natural* sleep, and probably medical men would be the first to acknowledge that in the majority of cases, whether of fever or nervous disorders, or, in fact, of any form of disease, that a few hours of refreshing sleep without the use of opiates, would do more for their patients than half the drugs named in the Pharmacopœia.

Beginners are sometimes afraid of producing bad effects on their patients, in fact, of doing them more harm than good, and when they have succeeded in entrancing them are anxious, and even alarmed, if they cannot easily awaken them. Now, I never heard but one opinion from the most experienced mesmerisers, with Dr. Elliotson at their head, and it was that they had never met with a case where any mischief could have been fairly attributed to mesmerism, and that the longest and deepest sleep will always pass off spontaneously. For my own part, I should not hesitate to mesmerise a patient suffering from the worst form of heart disease, and that is about the strongest illustration of my opinion as to the safety of the treatment of which I can think.

At the same time I should not venture to undertake the treatment of any severe form of disease, without the express sanction of the patient's ordinary medical adviser. As a rule, I have found members of the medical profession to be remarkably liberal

on this subject, and have frequently been asked by them to try the effects of mesmerism on their patients, when the usual resources of medicine had failed in producing natural sleep or the alleviation of pain.

They were evidently determined to give the sufferer every possible chance of relief, whether the treatment was or was not in the Pharmacopœia, or whether it was popular or unpopular. Of course there are exceptions to this liberal feeling, and there have been many instances where medical men have bitterly opposed the practice of mesmerism—though entirely ignorant of the subject—simply because it appeared as a trespasser on their domain, and they evidently thought it a piece of gross impertinence that it should cure when they had failed.

The most troublesome cases that I have met with have been where the patients were naturally highly nervous and excitable, and where symptoms of hysteria had declared themselves, mixed up with the mesmeric sleep; and in these cases the mesmeriser often finds it difficult to establish and retain his control. But after a very little practice the mesmeriser will discover methods of tranquillising the patient, such as breathing slowly over the region of the heart, or at the back of the neck, just at the junction of the head with the back of the neck, and sometimes by passes from the region of the heart carried down to the extremities.

It is in those cases mixed with hysterical symptoms where we generally find the greatest difficulty

in determining the sleep, and restoring the patients to the normal state.

The most obstinate case of prolonged sleep I ever met with in my own practice was that of a lady who was a great sufferer from hysteria, whose sleep on one occasion lasted seventy-two hours. All the usual methods of demesmerising were employed, but with no effect. At last she told me to have a pail of water by my side, and that I was, in the course of an hour or two, to suddenly dash the water over her head. This was done, and her eyes immediately opened, and by degrees recovered their natural expression. This patient was seen during her long sleep by Dr. Newnham, of Farnham, who told me that he had been requested to write a pamphlet *against* mesmerism. The doctor, however, was so much impressed with what he witnessed in this case that he wisely determined to study the subject before writing on it; *O si sic omnes!* and eventually wrote a book in *favour* of mesmerism.

The above described heroic treatment, however, I should not recommend to others; there was no occasion for such extreme measures, for the sleep would have worn itself out in time, but the fact was, that patient, being of a highly nervous temperament, had become frightened at not being able to open her eyes, and I chose what appeared to me to be the less of two evils, and I may add that at the time I was comparatively a novice.

Another common mistake is to suppose that women have little or no mesmeric power. On the

contrary, many women are powerful mesmerisers, and they have these advantages over men, viz., that they have more patience, and as a rule, more sympathy for the suffering. It is, indeed, very desirable that women should more generally exercise their mesmeric powers, as there are many cases where, for evident reasons, female patients should be treated by female practitioners, and thus the chief objection to which mesmerism is open would be done away with. In the present day, when so much is said and written about the difficulty of obtaining suitable employment for women, I cannot imagine a more useful occupation than that of alleviating the sufferings of their own sex, by using those healing powers with which nature has endowed them. The field is large, and there cannot possibly be real occasion for jealousy, for were the mesmeric practitioners multiplied a hundredfold, human suffering would still afford a wide field for their exertions.

With regard to the mesmeric power of women, there is the well-known case of Miss Harriet Martineau, who had been a great sufferer for many years from a painful internal complaint, when at length she had recourse to mesmerism.

Her principal mesmeriser was a lady who, at the request of Mr. H. G. Atkinson, undertook the case, and the following extract, from the notes of the operator, will show with how much effect an energetic and sympathising woman can employ her mesmeric powers.

“At the request of Mr. Atkinson I undertook the

case, now nine weeks ago. At that time the poor invalid could only crawl from one couch to another, her only sleep procured by opiates, which were her only relief from the most distressing nervous irritation, physical and mental. Within a week I beheld my patient walk around her garden, she, who, for four years and a half before, had not left her couch. From the commencement of the mesmeric treatment her improvement has progressed without a single drawback. At the end of a month, I had wholly discarded the opiates, and from that time we got on even more rapidly.

“Now, and for some time past, and at the precise period in which one of my Cheltenham somnambulists predicted I should cure her, her appetite has become good and healthy, her digestion perfect, her sleep calm, sound, and natural, she walks from three to four miles daily, in all weathers and without fatigue, has dismissed her sofa, and sits up all the evening writing and reading for two hours at a time.”

The following extract from a letter I received from Miss Martineau, and dated December 1845, fully corroborates the above account of the great benefit she received from mesmerism :—

“I am happy to tell you that all reports of my having changed my opinions about mesmerism, and of my health having again given way, are entirely false. I am in the most robust health, not having had one day’s illness in the whole of this year, and being in the habit of taking long walks every day,

while as closely engaged in literary labours as at any former time.

“I am also constantly practising mesmerism, with a degree of success which must have established my faith in it for ever. One of my patients has been my excellent servant from Tynemouth, who has been again restored from a state of fearful illness by mesmerism alone.

“I am so strongly impressed by a sense of the duty of declaring the truth in regard to mesmerism, that I have no hesitation in authorising you to make any use you may think proper of this letter.”

Miss Martineau's case is one of many, showing that sensitives are occasionally endowed with mesmeric power, and are able to afford the relief to others which they have themselves experienced.

It has been often said in my hearing, “Oh! no doubt it is very easy to mesmerise women, they have so much imagination, and are so nervous, anything that has an air of mystery would be likely to affect them!” If it were really the case that women only could be affected by mesmerism, and cured of many of their complaints, as well as relieved from severe pain, would that be a trifling boon? It certainly has always appeared to me a somewhat eccentric and rather whimsical reason why mesmerism should be relegated to the limbo of useless discoveries because women only can be benefited by it!

But the fact is that the susceptibility to mesmeric influence is not confined to women, many men of all ages, of every class, educated and uneducated, have

been mesmerised, the severest operations performed on them without pain during the mesmeric sleep, and a long list of their diseases cured or alleviated.

The best cases I have met with, as regards extreme susceptibility to the influence, have been amongst boys. My first patient was a soldier boy about fourteen years of age, who was so easily affected that one pass down his back, even without his knowledge, would throw him into a deep sleep, and slow breathing on his forehead for less than a quarter of a minute would produce the same effect. At the request of a medical friend, I mesmerised this boy from another room, through closed doors, my friend engaging the sensitive's attention by showing him a book of pictures; but in a very few minutes the lad fell back as if he had been shot, and was found to be deeply entranced. Every precaution had been taken in this case to prevent the boy suspecting that I was about to try this experiment, and on leaving the room, I said that I was going to visit an invalid, who was in another part of the house.

This patient had a comrade, about the same age, who was almost as susceptible. The first boy mentioned was once lying down in a deep mesmeric trance, and his friend was sent for and told to awaken him. He shook the sleeper and called him by name, but could not awaken him; he then by degrees became affected himself; the influence proved contagious; he rocked to and fro for a few seconds, and fell fast asleep across the body of his comrade.

Of course, these are exceptional instances of such extreme susceptibility, though many practitioners have occasionally met with equally remarkable cases.

There is the case of a stout healthy man being easily entranced at the first trial. A recruit in my own regiment, twenty-one years of age, who had never heard of mesmerism, and did not know that he was expected to go to sleep, was mesmerised and entranced by the brother of one of the officers, who then sent for a musket, when the Sergeant-Major put the somnambulist through the manual and platoon exercise, which he performed in far better style than he could have done when wide awake.

In this case the sleep was so profound that when standing at ease and his attention not aroused, his limbs would suddenly relax, and his musket fall to the ground.

I may remark that at the time these soldiers were mesmerised, even their officers were ignorant of the phenomena, so there was nothing for them to imitate, no appeal to their imagination, yet the phenomena produced were of much the same nature as those exhibited at the University College Hospital, London, and in other parts of England and in France.

I have also successfully mesmerised elderly men and women, but have found that very young people are much more easily affected than the elderly or very old.

A well-known London dentist told me, many years ago, that he had mesmerised his father every day for several weeks, before he could produce

sleep; he succeeded in curing his patient; but strange to say, as soon as the recovery was complete, he could no longer entrance him. The same correspondent in another letter stated that, during the mesmeric sleep, he had extracted ten teeth and stumps from the mouth of a lady in three successive days; his description of the operation is worth recording as a proof of the great value of mesmerism as an anæsthetic, and although the case is not quite relevant to the subject of this chapter, its introduction may probably be excused on account of its general interest. He wrote :—

“Some of the teeth—the molars—were tremendous fellows, with large hooked fangs, the stumps much decayed, and deep in the jaw, but that was of no consequence to the patient, she laughed and joked during the operation, of which she has not the slightest recollection. The patient is a very fragile being, and simulation is out of the question. I shall have to write up, ‘Tooth drawing a luxury!’ The lady has not experienced the slightest pain in the gums from the operation, and I consider it very extraordinary that the gum was as firm in twelve hours as it would have been in a week under ordinary circumstances.”

The higher phenomena, when they do occur, are generally developed in patients between the ages of about fourteen and forty, and I have never met with a case of clairvoyance in a sensitive younger than twelve or older than fifty. The experience of others may possibly be different.

The following extract from a letter written to his sister, many years ago, by the commanding officer of a regiment quartered at Jersey, shows that a very young girl can successfully mesmerise, and how an infant was affected by the passes. The writer says—

“I have been mesmerising my servant’s child, a young girl, but have not yet succeeded in putting her to sleep. The child, however, one day tried to magnetise her brother, a little boy aged four years, whom she was ordered to take care of, and succeeded so well that the infant was found in a trance on the floor. The girl says, ‘he tumbled over as if he had been shot, after she had just done for about five minutes what the master was in the habit of doing to her.’”

Many people suppose that mesmerism is only of use in certain nervous disorders; there cannot be a greater mistake. It may safely be asserted that there is scarcely any form of disease which may not be cured, or at least relieved by a judicious and persevering use of the mesmeric process. The volumes of *The Zoist* abound with such cases, and most of them were contributed by medical men. Dr. Elliotson published a case of true cancer cured by mesmerism, and Dr. Ashburner, in his valuable and scientific work, recorded the cure of several cases of typhus fever by the same treatment. No doubt the cures of nervous complaints treated by mesmerism have been very numerous, and very remarkable have been those of epilepsy, paralysis, and chorea, as those

diseases being notoriously of an intractable nature the cases have been more frequently, as a last resource, handed over to the mesmeriser, than others which run a more regular course.

The following extract from a letter, received by me many years ago, is here quoted, because it was written by a well-known London medical man, now very high in his profession, who at the time was an investigator as to the alleged curative effects of mesmerism. It also bears testimony to my assertion that it is what may be called "a vulgar error," to confine the use of mesmerism to nervous diseases. He wrote:—

"A patient of mine was suffering from a severe bilious attack, and requested me to mesmerise her. I did so, and allowed her to remain under the influence for half an hour, at the end of which time I awoke her perfectly well in mind and body, all traces of the bilious attack gone.

"I may here remark upon the wonderful power mesmerism exerts in persons rendered previously susceptible to its influence, during any sudden attack from a bad cold, entirely destroying it at one blow, leaving no trace of its existence, so much so as to cause the patients to pause and think what were their sensations previous to being mesmerised; this I have seen most strikingly in several cases lately. I should feel great confidence in being able thus to cut short a very formidable and dangerous attack."

Now, I take it for granted that neither a bilious attack nor a severe cold can be classed under the

head of nervous disorders, and therefore my medical friend's experiments bear me out in my assertion that mesmerism is efficacious in many other forms of disease. In my own practice I have found mesmerism produce very beneficial effects in cases of severe colds, accompanied by inflammatory symptoms, even where the patients had not previously been rendered susceptible of the influence.

I think it very probable that most, if not all people—particularly if out of health—may be affected by mesmeric treatment, and that the very young and weak may occasionally be successful operators.

But it is earnestly recommended that none but those who are in the enjoyment of good health themselves, should undertake the treatment of any severe form of disease; this advice is given in the interests of both patients and operators.

## CHAPTER III.

## ON CERTAIN ANOMALIES IN MESMERIC PHENOMENA.

AT first sight it might appear to be rather out of place in an elementary work on mesmerism, to notice the anomalies so frequently observed in the phenomena. But it should be remembered that one of the chief arguments against any belief in the science, is grounded on the very existence of what may be called the *capriciousness* of its phenomena, for variations are not only to be found between different individuals, but also not unfrequently in the same sensitive.

Were all human beings fashioned exactly alike physically, with equal mental and moral endowments, living in the same climate, partaking of the same food, in short, existing under precisely the same conditions, we might reasonably expect something like uniformity of results. In fact, the same conditions prevail in mesmerism as in medicine, neither can ever become an exact science, because of the constant and multitudinous changes in living organisms.

The Rev. G. Sandby, in his work "Mesmerism and its Opponents," remarks, "When we reflect that the

circumstances of constitution, of custom, of food, of disease, admit of as many varieties as the human face divine; that these varieties form the habit of body; and that it is upon our bodies, so modified, that mesmerism acts, common sense must see that perfect uniformity of result is hardly probable. For instance, with one patient the mesmeric sleep is obtained at the first sitting; with another, not for several days or weeks. One patient recognises the hand of the operator, and cannot endure the touch even of a relative; with another, to be touched by either is a thing indifferent. One only hears the voice of the operator; another, without preference, answers any speaker. Nay, with the same patient, the symptoms vary at various sittings. Still, in spite of all this, we say, that in main, essential points, the resemblance or uniformity is very remarkable; that the properties, as thus developed, have an evident affinity; but if mesmerisers are not able to lay down broad general rules, predictive of positive results, the fault is to be found in our imperfect acquaintance with a new study, in the difficulty of the science, and the delicacy of the human frame which is its subject."

Most investigators of the phenomena of mesmerism must have occasionally observed certain remarkable anomalies exhibited during what is called the sleep-waking state. More particularly are these anomalies displayed when experiments are made in which the different senses play their part, but perhaps the most remarkable deviation from rule

occurs in the sense of hearing. A sensitive during the mesmeric sleep may be apparently deaf to the loudest noises, and yet hear a whisper from his mesmeriser or other person placed *en rapport* with him.

Many years ago, at the request of a medical friend practising at Dover, I attended one of his patients who had been confined to her bed for some years. She had lost the use of her limbs, with the exception of the right forearm, of which she could make some use, although unable to move her hand to her head. The eyes, distorted by an upward and double squint, were kept constantly bandaged, and she had entirely lost the use of her voice. Any sudden loud noise, such as the slamming of a door, would immediately throw the patient into a state of insensibility; the whole body then became perfectly rigid, and had more the appearance of a statue than of a living person. This state would sometimes last for several hours. The mere raising of her head from the horizontal position would produce the same effect.

I succeeded at the first attempt in producing the mesmeric sleep, and to the great surprise and delight of her friends she was able to answer my questions put in a low whisper.

The family always dreaded the occasion when a salute was to be fired from the heights, for at the sound of the first gun the sufferer was instantly thrown into the cataleptic trance already described.

I attended daily for some time, until one morning I heard from the patient's friends that a salute was to be fired at a certain hour. Here, I thought,

would be a test indeed of the depth and value of the mesmeric sleep. I accordingly attended and mesmerised the sensitive about half an hour before the time appointed for the salute, and waited with intense interest for the great guns to speak. At last the firing commenced, and was finished without the sleeper taking the slightest notice of it by start or shudder, or by a quiver of a muscle of the face. She conversed with me the whole time, deaf to the loudest and most startling sounds, alive to my lowest whisper. Any one who has ever heard a salute fired from Dover heights can appreciate the value of this test.

How can this insensibility to sound be accounted for? The first gun made me start, but evidently there was no sympathy of the sense of hearing between the sensitive and me. On the other hand, there was decided sympathy of sensation, for if any one pricked my hand with a pin, or pinched my arm, she would instantly feel it. This patient eventually recovered her health, strength, and use of her limbs, and is, I believe, still alive.

Another of my sensitives, who during the sleep could not hear the voices of people conversing in the room, would complain of the creaking of a person's boots as the wearer was walking up and down stairs, and in this I sympathised most heartily, that sound being especially irritating to me.

During experiments with a clairvoyant patient in my own family, I always requested my friends to avoid making any remarks, even in a whisper, as to

the nature of the tests they were about to try, for I judged that although the sensitive might bear the report of a pistol fired close to her without flinching, it did not necessarily follow that a whisper might not convey an impression to her brain. In fact, it would appear that sensitives may be deaf to some sounds, and alive to others, like any man of absent mind.

The same anomalies have been observed with respect to the sense of touch or feeling. With some sensitives, some parts of the body are found to be insensible to pain, the other parts retaining their sensibility, and mesmerisers are able in some cases to deprive one limb of sensation, and retain it in other parts of the body. The general rule, however, is that when a person has been often mesmerised for the express purpose of rendering him insensible to pain—for instance, in view of a pending operation—the whole body becomes insensible. Some practitioners have observed that the head and face are the last portions of the frame to lose their sensibility; this has not been noticed by me.

The following curious results once occurred during some experiments on sympathy of taste, which I was trying on a clairvoyant patient. A very experienced mesmeriser was staying with me at the time, and at my request he had placed on a tray a very miscellaneous collection of articles, both liquids and solids. Standing behind the sensitive's chair, he first put a tumbler of water to my lips, and I took a mouthful, but the sleeper declared she could not taste anything. My friend then gave me some wine, when the sensi-

tive said it was water; sugar was put into my mouth and declared to be wine, then ginger being tasted by me, pronounced to be sugar, and so on with various other articles, the patient always being as it were behindhand, but never naming any article that I had not previously tasted. This was the only occasion on which this peculiar phenomenon appeared; in general, she was not only marvellously correct in naming substances tasted by me, but also with those tasted by strangers. With certain investigators she appeared to have no sympathy, and I observed, as a rule, that with most of those with whom she failed in exhibiting sympathy of taste and feeling, she also failed when her clairvoyant powers were tested, but there were exceptions even to that rule. A possible explanation of the above phenomenon is, that sufficient time was not allowed the sensitive to reply to one question before the next one was put. At the outset, it will be noticed, she tasted nothing. The sensation required time to travel to her consciousness through some unknown channel.

The following case may be cited as an example of one of the caprices of clairvoyant phenomena, and the patient in whom the peculiarity was exhibited was the one just mentioned in the case of sympathy of taste; the *delay* of the phenomena in both instances, illustrated in the same individual, has always appeared to me to be very remarkable. This case was quoted by Dr. Elliotson, in an article entitled "Clairvoyance after the Fact," *vide* "*Zoist*," vol. xi. p. 78. The doctor observed—"The curious circumstance of clairvoyants

communicating a knowledge of things as now occurring which had occurred just before is well established. What is stated in No. xxiii., page 357, as having happened on June 6th, is similar to what was noticed by Captain James at Dover in one of his clairvoyants. I recollect being informed of it by Captain James at the time; but wishing for minute particulars, I requested him to give me an account in writing, and he did so upon the 17th of the present month. He says:—

“With respect to the case of clairvoyance to which you allude, I will endeavour to give you as correct an account as possible of what occurred.

“About three years ago, a servant in my employ exhibited, during the mesmeric sleep, very extraordinary clairvoyant powers. Some friends having one day desired to witness my experiments, the servant was mesmerised, and after giving various proofs of the possession of the faculty of clairvoyance, I suggested that two of the party should withdraw to another room, in order to prove whether the patient could describe what they were doing.

“After the lapse of a *few minutes* I desired the patient to look into the room in question, and to tell me what she saw. After a *short pause* she said, “I see a gentleman and a lady in the room; the gentleman has got a bonnet on his head.” Another pause; she then exclaimed, “Oh! now the gentleman has got upon the table with a candle in his hand.”

“Soon after this my friends returned to us, and I asked them what they had been doing. Their ac-

count agreed in every particular with the patient's, except as to the time. It appeared that the gentleman had actually put on a bonnet *on first entering the room*, but took it off again *immediately*; and after some *considerable delay* at length got on the table with a candle in his hand. I perfectly remember that, on comparing notes, we found there must have been a lapse of nearly five minutes, from the moment my friend removed the bonnet from his head and the moment my servant declared she saw it on him.'"

An extract from a letter which I lately received from Mr. H. G. Atkinson, the well-known and experienced authority on mesmerism and its various phenomena, will no doubt interest those who have studied it either on account of its value as a curative agent, or merely for the sake of its other remarkable and interesting results.

The peculiarity he has recorded may be fairly classed under the head of "anomalies," for it is a case where a powerful mesmeriser appears, as it were, to change conditions with his patient, and to exhibit in his own person the susceptibilities of a sensitive.

Mr. Atkinson says—"I have often felt heat and pain the same as in the patient, could take the pain into my hand and plant it in another part of the patient's body, and in abstracting pain know the instant it was removed, and often in sympathy with the patient, on entering the room, feel in myself the state and changes in the patient's ailment, and

by casting my hands—without touching—over the patient, feel where the pain was.”\*

I have lately heard of other practitioners who possess this remarkable faculty of feeling in their own persons the pains and sensations of their patients, and I am inclined to think that persons so endowed are likely to be very powerful operators, and successful in their treatment of disease, whether they call themselves “mesmerisers” or “healing mediums.” Dr. Elliotson noticed, many years ago, in the “*Zoist*,” and in his letters to me, the fact that the operator occasionally takes the symptoms of his patient, but I never heard of any serious results; it is only a temporary inconvenience, and confined to comparatively but few practitioners.

Sympathy of taste, of sensation, and of smell, is common; sympathy of hearing and of sight I have seldom observed; and all these sympathies may possibly be greatly assisted by what is called “mind or thought-reading.”

Dr. Engledue, of Southsea, near Portsmouth, published many years ago, in a local journal, the following case of sympathy of feeling, the case being the more remarkable from the fact that the mesmeriser at the time of the experiment was not near his patient. He says:—“During my patient’s sleep a gentleman requested me to accompany him into the library, which adjoined the drawing-room. He closed the doors and then said, ‘I wish to tickle your ear

\* “For further instances of Mr. Atkinson’s remarkable peculiarity, *vide* Appendix A.”

with the end of a pen.' My right ear was tickled for one minute. We then returned to the drawing-room, and found the patient rubbing her left ear upon her shoulder. Will it be believed that the experiment was considered a failure by the originator, because the patient did not exhibit sympathetic sensation in the right ear ? ”

Perhaps if Dr. Engledue had quoted Dr. Marshall Hall, and referred his patient's mistake to “reflex action,” his friend might have been amused, if not convinced.

As a proof that sympathy of taste as well as of feeling may exist between the mesmeriser and his patient, although they may not be in immediate contact, I may here relate the following experiment :—“ I formed a chain of six or seven persons, the sensitive being at one end of the chain, and the person tasting at the other end and outside of the door ; the patient then named the substance tasted. This experiment, however, rarely succeeds, and success or non-success apparently depends upon the peculiar constitutions of the different individuals forming the chain ; perhaps the presence of one or two of what are called “ positive persons ” might prevent the transmission of the sympathy of either taste or feeling.

I have often heard opponents of mesmerism assert that such and such mesmeric phenomena were unknown to physiologists, and therefore that the so-called sensitives were impostors. In a letter which I received many years ago, from one of the best-known physiologists of the day, are the following remarks,

which appear to me to be quite *apropos* to my present subject. My correspondent says :—

“ Medical men make much of the apparent contradictions or anomalies met with in mesmerism, and, for instance, seem surprised at the fact that patients sometimes feel pain during sleep, and sometimes are insensible to all feeling. Why should they wonder, though insensibility to pain in the mesmeric state is sometimes continuous, it should be sometimes intermittent? In fits we have sometimes continuous stupor; sometimes the patient will open his eyes and speak from time to time, and from time to time relapse into unconsciousness. In spontaneous somnambulism and spontaneous catalepsy patients seem quite deaf or blind; and yet if the patient be a mother, she will give proof of hearing or seeing her infant.

“ Nothing is more common in disease than for one thing to make an impression, and another none. Palsied patients who will bear pinching and cutting feel warmth or cold so acutely as to cry out. There is not a single point in mesmerism that is not analogous in all its particulars to points familiar to medical men, independent of mesmerism.”

There is also a different class of anomalies in cases where there is a transposition of the senses from their natural organs to other parts of the body. For instance, cases have been published both by French and English writers on mesmerism, where the senses of hearing and sight were transferred to the stomach, and a medical friend assured me that he had seen

one case where the transposition of sight was observed in a patient who had never been mesmerised. In this case the patient would place a letter just received on the pit of her stomach and read it, all light at the time being excluded from the room.

My friend Major Buckley had a sensitive, a young man, who would place printed or written matter under his foot, and thus read it. Other mesmeric sensitives have in my presence placed books and written sentences at the back of their heads and on their foreheads, and have been equally successful. Dr. Teste, a French physican, and author of a useful and interesting work on mesmerism, mentions a case where his patient heard, saw, read, and tasted by means of the hands and feet.—*Vide* Dr. Teste on "*Animal Magnetism*," translated by Dr. Spillan, page 126.

I am well aware that these observations on mesmeric phenomena must appear comparatively uninteresting to some of my readers, who for so many years past have been frequent observers of the more exciting phenomena of spiritualism. Still it may be the case that some spiritualists are likely to be interested in any facts which may seem to throw light upon the possible, or even the probable, connection between some of the phenomena of mesmerism and some of the phenomena of spiritualism, and also as regards the respective conditions of mesmeric sensitives and physical and trance mediums during their state of unconsciousness. However, these matters are more within the domain of the physiologist. I

do not pretend to understand the *modus operandi*, the why and the wherefore of such apparently contradictory phenomena.

I merely relate some of my own experiences, and the observations of more experienced mesmerisers, leaving it to those who have been scientifically trained, to account for what I have termed "Certain anomalies observed in mesmeric phenomena."

## CHAPTER IV.

## SOME REMINISCENCES OF MESMERIC PHENOMENA.

DR. GREGORY, in his excellent work on "*Animal Magnetism*," observes that it is often difficult for a clairvoyant to give the name of a person or thing, and in some cases it may be called an unwillingness, as when they have to allude to "dead bodies," and certain other subjects. One of Dr. Gregory's sensitives, to avoid the expression of "dead body," would speak of it as "shelled," and Dr. Elliotson observed the same repugnance in his patient Elizabeth Okey, who always avoided the obnoxious expression. This peculiarity I have also observed in some of my own patients, but Mr. H. G. Atkinson, in a letter published in a weekly paper about two years ago, said he had never met with a similar case. Mr. Atkinson has had perhaps as much experience in mesmerism as any other person living, and I am therefore surprised that he has never observed the fact, that sensitives are frequently unable or unwilling to call things by their proper names.

Mr. Atkinson's testimony is another proof to me that different mesmerisers produce different effects, and that the marked and sometimes minute pecu-

liarities observed in different patients, are not always due to the different idiosyncrasies of the sensitives themselves.

One of my sensitives—my cook—many years ago presented the phenomena of sympathy of taste and sensation, and a facetious friend once observed to me, that it was quite right and proper that a cook should have sympathy of taste with her master.

This sensitive could describe so graphically the nature of anything I tasted, without being able to say what it actually was, that every one in the room, except herself, could tell the name of the substance I was eating, and by placing her *en rapport* with other people, she was often equally successful with them, but sometimes failed with certain individuals. For instance, a lady put something into her mouth, and holding the hand of the sensitive, asked what it was she was eating. The girl replied, "I don't know the name of it, but it is made of flour, is sold by the baker, has holes in it, and master eats it with his wine and sometimes with cheese." Of course every one in the room knew that it was biscuit. Again another visitor put something into his mouth, and the girl said, "It is something very nice ; I always flavour 'Charlotte Russe' with it, and Mrs.— (my housekeeper) has taken some of it to Littlebourne. I cannot tell the name of it." When she awoke I asked her what Mrs.— had taken to Littlebourne. She immediately replied, "Only some Vanille, sir." On another occasion, an officer quartered at Dover attended one of my *séances*, and before entering the drawing-room he

went down into the kitchen, where he cut a small piece of meat off the joint roasting at the fire. On taking the sensitive's hand she tasted and said, "You are eating roast beef." Now it happened to be roast mutton, which the girl herself had placed before the fire.

At other times she could readily give the names of things tasted, however little flavour they might possess.

I always took the precaution of requesting my friends to stand behind the sensitive, and to turn away their heads when they tested sympathy of taste, so as to preclude the possibility of the substance tasted betraying itself by the scent.

I have observed in other sensitives an apparent inability to guess, or to combine their ideas. Alexis Didier, the famous French clairvoyant, a few days after his first arrival in England, gave a *séance* at my house in Dover, and during his sleep a young lady, a stranger to me, was introduced by a mutual friend. She asked Alexis to tell her Christian name. He replied, "You have two Christian names. I will try and give you the first. There are nine letters in it. I see H, E, N"—he then stopped, and said he could not make out the remaining letters. I need not say that every one present knew, that if he were correct as to the first three letters, the name must have been Henrietta, and so it was. He was then asked to try the second name. He said he saw two C's, an I, and an L, and then complained of being tired, and gave it up. The second name was Cecilia.

I fancy I hear the sceptic exclaim, "What nonsense! If Alexis could make out three letters, why could he not make out the whole word; and if one word, why not a whole sentence?" All I can say in answer to this profound question—which in fact has often been put—is, "I don't know;" but if I could *satisfactorily* explain any one of these apparently contradictory phenomena, I should not only consider myself, but probably would be considered by others, to be a remarkably clever individual.

It will be observed that in the above experiments with Alexis, there was evidently "mind reading;" indeed he constantly requested his visitors to *think* of the word or words they had written, and his favourite exclamation was, "*pensez-y-bien*," and then he would sometimes say, "*Ah! maintenant vous pensez bien*," and seizing a pencil would write the word required.

It must be remembered, however, that Alexis frequently read through the cover of books, fresh from the publishers, and with the leaves uncut.

I have played billiards with him at the Dover club, when he was asleep, and after his eyes had been carefully bandaged by sceptical investigators, who, to make assurance doubly sure, filled up the interstices formed by the projection of the nose with jewellers' cotton wool. I have also played at *ecarté* with him when he was in the mesmeric sleep. A fresh pack of cards was sent for, and on its arrival he eagerly tore off the cover, and without looking at their faces began to throw out the small cards, occasionally discarding a seven, but instantly rectifying his mistake.

He then dealt the cards, naming beforehand the turn-up card, told me my cards before I had looked at them, and played his own with the faces downwards. Surely these feats could scarcely be set down to "mind reading."

The fact is, that certain sensitives have the power of reading the minds of those *en rapport* with them, and also give numerous proofs of the possession of pure clairvoyant powers, where "mind reading" cannot possibly account for them.

Most people, after witnessing and accepting the facts of, to them, a new science, naturally seek an explanation of them, and form for themselves a more or less rational theory. This is what might be expected from all thoughtful investigators, and the only danger to be feared is, that they may become too much enamoured of their own hypothesis; they may also begin to dogmatise, and to be impatient with the theories of others. Should they happen to appear in print, and thus, as it were, commit themselves to one particular set of ideas, it will be all the more difficult to convince them that their pet theory will not cover the whole ground.

This appears to me to be the case with those who attribute the *whole* of clairvoyance to what is generally termed "mind reading," whereas there can be little doubt that a vast number of facts, recorded in mesmeric literature, prove that numerous cases have been observed where "mind reading" could not possibly account for all the phenomena.

It is somewhat amusing to hear people occasion-

ally trying to explain the faculty of clairvoyance, by asserting that "it is only thought reading." *Only* thought reading! as if it were an everyday and easy feat for a human being to read the inmost thoughts of his fellow-creatures.

The following case, taken from Dr. Gregory's work on "*Animal Magnetism*," is one which will probably be accepted as an instance of what is called pure clairvoyance, which the most ingenious mind could scarcely refer to "mind reading":—

"Mr. Atkinson had mesmerised a young lady, the daughter of a medical man who resided many miles from London, where the young lady was. She became clairvoyant, but her father, who came to see her, would not believe in her clairvoyance. Mr. Atkinson then requested him when he got home to do anything he chose, not telling any one, at a certain hour, and in a certain room. At the time appointed Mr. Atkinson mesmerised the young lady, and requested her to visit her father's dining-room. (It was at dinner time.) She did so, and saw her father and the rest. But all at once she began laughing, and said, 'What does my father mean? He has put a chair on the dinner-table, and the dog on the top of the chair.' Mr. Atkinson sent by the first post an account of what his patient had seen, which was received next morning, and in answer he was informed that she had seen correctly, for that her father, to the amazement of his family, had put the chair on the table, and the dog on the chair at the time agreed on."

Many practitioners have observed that different

mesmerisers frequently produce different effects, and I consider that the peculiar types of phenomena exhibited in different cases, are quite as much due to the distinctive idiosyncrasy of the operator as to that of the patient.

Dr. Law, formerly Chaplain to the Embassy at St. Petersburg, wrote to me to say that although he was very successful in the treatment of various forms of disease, such as gout, palsy, rheumatism, and epilepsy, he *never* produced decided coma.

A barrister, in London, wrote to me many years ago that *all* his patients remembered, when awake, what had passed during the mesmeric sleep. On the contrary, my patients remembered nothing of what had passed, the two states being perfectly distinct. My friend wrote: "I can safely say that when a fair trial has been given me, I have not failed to mesmerise seven out of eight patients. The phenomena I have produced have been *catalepsy* in all; the phrenological manifestations in many, traction—by the hands—in most cases by 'the 'Will,' so as to force the patient to rise from his chair and follow me; but in *no* case have I witnessed *sympathy of taste*, or other of the senses, or clairvoyance, though others who have experimented on the same patients, have declared themselves satisfied that in two cases that faculty existed. One singular fact has invariably followed in *my* cases, and that is, all my patients remember on awaking all, or nearly all, that has been done or spoken whilst they were in the trance. Not but that at will I can deepen the sleep

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so as to produce a total oblivion, and release the party to whatever condition, as regards the intensity of the sleep, I please. On the contrary, none of my friends have had a case of *after-consciousness* in those they mesmerised for the first time.

“ You will gather from the above that I concur with you in the opinion that certain phenomena result from certain mesmerists, and more, I think it probable that he who first mesmerises a person, leaves behind an impression which prevails and shows itself afterwards, when others experiment on the same patient.”

One of my servants, a young woman about two and twenty years of age, was one of the best clairvoyants I ever met with. Amongst the many successful proofs of her clairvoyance I select the following, because the tests were of such a nature as to preclude the idea of guessing. At a *séance* held at my house at Dover in the year 1845, a lady came in after the clairvoyant had passed into the sleep-waking state. The lady went *behind* the sleeper and said, “ Captain James, if your servant can tell me what I have got in my left hand, I shall certainly become a believer.” She then took hold of the patient’s hand and asked, “ What have I got in my other hand ? ” The girl instantly replied, “ A dead bird ” (correct). “ What have I got in my pocket ? ”— answer, “ A brooch with a quantity of white spots on it.” The lady then produced a brooch studded with small pearls. I may here remark that I never would allow any one to tell me what the objects were

which had been chosen as tests. I was determined that should there be any suspicion of collusion, it should not be between my patient and myself, but between her and the numerous visitors who tried the experiments.

On another occasion, an officer of the 77th Regiment; then quartered at Dover, stood *behind* the sensitive, and putting something into his mouth asked the girl to tell him what it was. She replied, "A half crown" (correct).

Now, in these two cases, it seems difficult to determine whether the success of the experiments was due to pure clairvoyance, or to sympathy of sensation, in the latter case to sympathy of sensation and taste; for it appears to me quite possible that the sensitive, who was continually being tested by experiments on the sympathies of the different senses, might have *felt* in her own mouth the size and shape of the half-crown, and ascertained the nature of the metal through sympathy of taste.

As these cases of clairvoyance occurred many years ago, I may state, for the satisfaction of my readers, that I have not relied on my memory in the narration of the facts, but have now by me the notes taken at the time of their occurrence.

## CHAPTER V.

## ON THE CLAIRVOYANCE OF ALEXIS DIDIER.

IN the last chapter I had occasion to allude to the clairvoyance of Alexis Didier, the famous somnambulist, who created so much sensation and controversy more than thirty years ago.

I shall now make a few remarks on some of the peculiarities of Alexis' powers, which may also be applicable to the powers and peculiarities of other clairvoyants.

It may be as well to preface my observations with an account of three or four experiments tried to test his clairvoyance, which have never before been published. To these cases I shall add two or three remarkable *séances* taken from the "*Zoist*;" but were I to attempt to chronicle all the experiments made by other investigators in my presence, there would be a veritable *embarras de richesse*.

On one occasion at my own house, he succeeded in reading a short sentence enclosed in several pieces of paper, and placed in an envelope; this he did immediately, and without any hesitation, merely squeezing my hand. At the same *séance* I presented another packet, carefully prepared, so that

neither by candle light nor daylight could the word be deciphered by ordinary vision. This packet Alexis placed on his forehead, and suddenly exclaimed in French: "Ah! it is the name of a woman," and taking a pencil he wrote down, "Virginie," which was correct.

On another occasion I laid before him a seidlitz powder box, containing a bronze medal of the young King Louis XVII., packed in jeweller's cotton wool to prevent the medal shaking and betraying its metallic substance.

The box was enclosed in paper, and the envelope was sealed. He pressed my hand, and said, "*Pensez-y-bien*," and then in French described what he saw in the following broken sentences: "The object is made of metal. It is neither gold nor silver. It is brass; it is a medal; I see the head of a king; of a French king; on the other side is a broken flower." He was quite correct, for on the reverse of the medal was a broken lily. He could not name the king, although the name was in my own mind. His observations were made piecemeal, accompanied with nervous twitchings of the features.

In the above experiments he was not assisted by any remarks.

Much harm is done by kindly-disposed persons correcting the mistakes of a clairvoyant, for by so doing they lead him to contract a habit of *guessing*, which would soon destroy, or at least injure, his lucidity. The person trying the experiment should neither say "Yes" nor "No," but wait patiently until

the sensitive has finished his attempt. Should he succeed, well and good ; when he fails, try again.

No remark should be made, either to lead or mislead, one is quite as bad as the other. I have heard investigators put their questions in so careless and unguarded a manner, that I could pretty well guess what the answer ought to be, and I have heard others make remarks with the evident intention of leading the sensitive into error.

This is particularly reprehensible during tests in Phreno-mesmerism, for the patient is then in a dreaming state, and the slightest hint may alter the whole current of his ideas, and completely spoil the experiment ; in the sleep-waking state the sensitive is not so easily deceived.

I was present at a *séance* held by Alexis in 1844, at the house of a lady residing in Montague Place. In the course of the evening a medical friend of mine, who at the time was a sceptic, tried an experiment, the details of which, at my request, he sent to me a few days afterwards. He wrote :—

“ Having heard a great deal of the faculty of clairvoyance in the young man Alexis, I was extremely anxious to see him in the mesmeric sleep, that I might test his power most severely. On the morning of the day that I was to see Alexis, I folded a five-pound Bank of England note, and put it into a piece of paper just sufficient to cover it on both sides ; on one side of the paper I wrote, in French, an account of what it contained, and on the other side I wrote the letters A : W : and placed the whole

in a flexible *leather* card-case, wrapping it up in paper, folded it over at both ends, and sealed it. What the packet was or what it contained nobody knew but myself, and it was not for one moment out of my possession. Upon putting this into the hand of Alexis, he took my hand in his and squeezed me very tightly, and commenced by saying, 'that the packet contained two sorts of paper, that there was both writing and printing in it.' He then took a pencil and wrote on a piece of paper, the letters A : W : which he said were written inside, and which he wrote with a colon after each letter, as I had written them. To these remarks, of course, I assented. He then said the packet contained a small miniature ; but as the recollection of the figure of Britannia on the corner of a bank-note did not occur to me, I denied his assertion ; he repeated it, and said, 'it was a picture of the Queen, that it was round, and that it had flowers around it, and that it was not done by my hand.' The fact of the engraving at the corner then occurred to me, and I again assented by telling him he was partly correct. He then wrote the word 'England,' and said 'he could not make out any more.'

"Subsequently, I was told that Alexis could rarely decipher any writing that was folded over and over, which accounted for his not being able to read more of what my paper contained."

|| The fact that Alexis often found a difficulty in reading any writing folded over and over, is, I think, a proof that it was not always "mind reading" that

enabled him to decipher words and sentences. This difficulty was once illustrated when he insisted that the word enclosed in an envelope was 'Mesmer,' and when told he was wrong, on examining the enclosure, the word 'Mesmerism' was found, but the *ism* was folded under the two first syllables.

Alexis, when trying to read any word or words, would sometimes read them off without hesitation, but at other times when the power was not so strong he would think aloud, giving letters and words as they appeared to him, then would correct himself, much like any individual straining his eyes to perceive some distant or very indistinct object. It was the same with any article enclosed in a box and presented to him for description; he would sometimes at once declare the nature of the article and any history connected with it; and at other times would work out his task with painful efforts, accompanied by distortion of the features. Sometimes his power seemed to come in flashes and then suddenly depart; at other times he was lucid and successful all through a *séance*, his condition probably varying according to the state of his health, the surrounding conditions, or even the state of the atmosphere.

I remember being present at one of his *séances* at Dover, when for about the first half hour he appeared dull and spiritless and even unwilling to play at his favourite game of *écarté*, when suddenly a violent thunderstorm broke over the town. When the storm ceased, Alexis seemed endowed with fresh life: he recovered his spirits, and was remark-

ably successful with all the experiments. At some *séances* I have seen him succeed in nearly every experiment, and at others make many mistakes. At a *séance* in London at which I was present, Alexis was surrounded by a number of hard-headed sceptics; some of them of the legal and medical professions, and two or three belonging to the Stock Exchange. The latter are not generally considered to be the least acute members of the community, and yet he succeeded in every test. From that party he proceeded to the house of one of the members of the Government, where he failed.

This fluctuation of power I have observed in my own clairvoyant patient, and shall always expect to find an alternation of success and failure in a genuine case; in cases of jugglery and collusion the imitators never fail.

The following instance of Alexis' clairvoyance is taken from the "*Zoist*," vol ii., p. 508; it was contributed by the Rev. G. Sandby, the author of "*Mesmerism and its Opponents*:"—

"An officer,\* of long standing in the army, who was severely wounded at Waterloo, and is well known in military circles, was one of the company present. He was an unbeliever, and knew nothing of mesmerism, and had never seen or scarcely heard of Alexis; but having been accidentally invited to join the party, and been told that the young man had the power of reading through opaque objects, he determined to bring his talent rigidly to the test.

\* Colonel Llewellyn.

“He produced a morocco case, eight inches long, and an inch and a half broad, looking like a small jewel case. It was placed in the hands of Alexis, who held it for a short time in silence, and then gradually and slowly gave the following description:—

“The object within the case is a hard substance.

“It is folded in an envelope.

“The envelope is whiter than the thing itself.”  
(The envelope was a piece of silver paper.)

“It is a kind of ivory.

“It has a point (*pique*) at one end.” (Which was the case.)

“It is a bone.

—“Taken from your body.

“The bone has been separated and cut, so as to leave a *flat side*.”

This was true; the bone, which was a piece of the colonel's leg, and sawed off after the wound, is *flat* towards the part that enclosed the marrow.

Here Alexis removed the piece of bone from the case, and placed his finger on a part, and said, “The ball struck here.” (True.)

“It was an extraordinary ball, as to its effect.

“You received *three* separate injuries at the same moment.” (Which was the case, for the ball broke or burst into three pieces, and injured the colonel in three places in the same leg.)

“You were wounded in the *early part* of the day, whilst charging the enemy.” (Which was the fact.)

The next case is also taken from the “*Zoist*,” vol.

iii., page 392, but being too long for this part of the book, is placed in the Appendix.\* It is the famous case of Colonel Gurwood's interview with Alexis, and was written at the colonel's dictation by a French gentleman, M. J. S. De Gosse; published in the "*Journal de Havre*," and translated for the "*Zoist*."

Colonel Gurwood always declined to publish any account of his experiences in his own name; he was a very reticent man, and probably would much rather have headed another "forlorn hope" than have paraded himself in print.

I was acquainted with the Colonel, and can state that once on meeting him in London, he assured me that the account of his famous interview was perfectly correct.

The career of the French officer, and the episode in his life—as described by Alexis—when he was summoned to the Rue Richelieu on the 18th February 1820, could not have been in the mind of Colonel Gurwood, who did not know even the name of the man whose life he had saved.

The above are some of the numerous proofs of Alexis' remarkable gifts, which with those furnished by other clairvoyants in the present day, establish clairvoyance as a fact in nature as demonstrable to our reason, and as patent to our senses, as are the facts of many sciences which we unhesitatingly accept on the evidence of other men.

Alexis when in London was overworked, sometimes giving three or four, or even more *séances* in

\* *Vide* Appendix B.

one day, and occasionally the treatment he received might be described as barbarous and eminently unscientific, although perpetrated by so-called scientific men. The crowded rooms, people pressing around him, each man anxious to try his own experiment, the tight bandaging of his eyes with handkerchiefs tied over cotton wool, were all unfavourable conditions. At times his eyes were covered over with leather gummed to his forehead and cheeks, so that on one occasion, on taking off the leather, several hairs were torn from his eyebrows and eyelashes. This treatment, and the constant working and excitement of the brain, must have caused so great an expenditure of nervous energy—the wonder is, not that he should have sometimes failed, but that he should have so often succeeded in quite a number of successive experiments.

I am aware that these instances of clairvoyance in mesmeric sensitives may appear tame and trivial, in comparison with the wonders we hear of in the present day as manifested by spiritual mediums. It would be interesting, however, if psychologists would turn their attention to both classes of phenomena, compare them, and see whether there be any relationship between what is called mesmerism and what is generally understood as spiritualism; also what resemblances and what differences may be found between the psychological and physiological states of mesmeric sensitives and spiritual mediums.

## CHAPTER VI.

## PHRENO-MESMERISM.

PERHAPS, of all the mesmeric phenomena, the most generally interesting to witness are those elicited in what is called Phreno-mesmerism, *i.e.*, the power of the mesmeriser to excite the different phrenological organs of the sensitive.

The experiments, when successful, go far to prove the truth of Phrenology, as well as the abnormal state of the patient.

An uneducated man, for instance, may, for the first time in his life, be thrown into the mesmeric sleep-waking state, and the operator, by touching, and sometimes even by merely pointing at, the organ, say, of "Benevolence," may cause the sensitive to exhibit marked signs of that particular sentiment, so that he may appear to fancy or dream that he sees before him some pitiable object, which at once awakens his interest and compassion. If "Combativeness" be touched, he will immediately show symptoms of anger, fancy he is quarrelling with some one, evince a desire to fight, and may even strike his mesmeriser; fan or blow over the excited organ, or touch "Benevolence," and his anger

immediately subsides. Should "Combativeness" and "Destructiveness" be very small, the excitement of these organs will often lead him to imagine that some one is trying to quarrel with him, neither the expression of his countenance nor his actions betraying any feeling of anger.

On the organ of "Veneration" being touched, the sensitive will clasp his hands together, and kneel down in the attitude of prayer, the expression of devotion on his countenance, so beautifully depicted, that the observer is forced to acknowledge that the patient is either in an abnormal state, or that he is one of the finest actors he has ever seen. If "Veneration" and "Tune" be touched at the same time, the sensitive will probably sing a hymn; touch "Mirthfulness" and "Tune" only, you may have a comic song. Touch "Philoprogenitiveness," and the sleeper will probably imagine he is caressing a child; touch "Combativeness" at the same time, and he will appear as if clasping the child with one arm, and with the other he will strike out as if defending the little one from injury. Take away the finger from "Philoprogenitiveness," and he will probably act as if he were dashing the supposed child to the ground. Excite "Acquisitiveness," and the sensitive will probably take any object he can reach from the bystanders; then touch "Conscientiousness," or even "Benevolence," and he will show signs of contrition for his conduct, and hasten to restore the stolen articles to their respective owners; and so on with many other organs, the manifestation being some-

times faint and sometimes strong, according to the idiosyncrasies of the sensitives; with some, only a few of the organs respond, with others, the experiments completely fail.

The most interesting results in these experiments take place when two or more of the organs are simultaneously excited, when you will probably observe such beautiful combinations of graceful attitudes and facial expression, as would be well worthy the observation and study of a first-rate actor.

That these experiments tend to prove the truth of Phrenology is almost certain, but after many experiments on different sensitives, I am led to believe that in some cases the excitement of the different faculties, sentiments, and propensities, may be attributed to the power of the mesmeriser's Will, which so often plays a part in the production of many other mesmeric phenomena. And here I may observe, that when I use the word "Will," I have in my mind the often proved subjection of a sensitive to the thoughts or minds of those *en rapport* with him, so that he then unconsciously obeys the will or wishes of his mermeriser; or it may be that the mesmeriser's thoughts produce in the sensitive a state of suggestive dreaming, which leads him to carry out in pantomime the unuttered suggestions of his mesmeriser.

I once had a patient whose phrenological organs would at once respond when I merely pointed at them; and so instantaneous and so marked were the

effects that at last I began to suspect my constant success. It occurred to me that it was very remarkable that I never made a mistake as to the exact locality of an organ, although at that time quite a novice in the study of phrenology—a plaster of paris head, marked with the names of the different faculties, being my principal guide.

These suspicions led me to try the following experiment, which was carried out with the assistance of a friend interested in the subject. We agreed that my coadjutor should mark down on a piece of paper a list of the principal organs, and that he should first indicate the name of an organ for me to point at, and then another organ for me to excite by the will. In this case the sensitive was not only ignorant of phrenology, but her eyes were always bandaged. After I had placed the patient in the sleep-waking state, my friend, by signs, desired me to point at "Benevolence" and to will "Combative-ness." I did so, and immediately strong signs of anger and repulsion were exhibited, and so on with several other organs, my will proving more powerful than the pointing with my finger.

Great, however, would have been my mistake had I hastily concluded from these experiments that *all* the manifestations in phreno-mesmerism are due to thought-reading or will-power.

Numerous experiments of my own, and of others to whom I related the above case, particularly some very interesting facts communicated to me by Mr. Vernon, the editor of the "*People's Phrenological*

*Journal*, most satisfactorily proved that the organs can be excited in cases where it appears impossible that the will can have anything to do with the results. It appears to me that both hypotheses may be true, the power of the will on some occasions, and the power of exciting the organs without any exertion of the will in others, in the same way that in clairvoyance, though mind-reading frequently plays a part, it also frequently has nothing to do with the production of the phenomena.

Here occurs to me the recollection of a rather curious experiment tried on one of my own sensitives. One day I was mesmerising one of my servants, a country girl, who, I need scarcely say, had never studied phrenology. A lady was seated next to her, and I touched the sensitive's head on the right side, on the spot marked by phrenological writers as the organ of Adhesiveness. The girl immediately clasped the lady's hand, and showed by signs very strong attachment to her. I then touched with the fore-finger of my other hand the organ of Combativeness on the left side of her head, without withdrawing my finger from the organ of Adhesiveness, and the results were very remarkable. The sensitive, still holding the lady's hand in her own right hand, struck out violently with her left hand; at the same time the right side of her face wore a most amiable expression, whilst the left side was distorted with anger. Any one who has seen the picture of David Garrick standing between tragedy and comedy, may imagine the effect produced in

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this case, where each side of the face exhibited the play of a different passion.

Perhaps, according to the law of reflex action, the sensitive ought to have struck out with her right hand, and the other manifestations to have been reversed, but the girl was no physiologist. When the famous case of the amputation of a leg at Wellow, during the mesmeric sleep, was read at the Royal Medical and Chirurgical Society of London, Dr. Marshall Hall considered the case to be one of imposture, because the poor man's sound leg did not start or contract when the diseased one was cut, *i.e.*, did not "enact the reflex motion." Unfortunately for the interests of science, Dr. Marshall Hall had neglected to inform himself, by repeated experiments, as to whether a human being during the mesmeric sleep, and a horse struck on the head with a pole-axe, are in precisely the same condition.

The same patient of mine, on another occasion, had the organ of Imitation touched. A lady *en rapport* with her then spoke a long sentence in German, which the girl repeated without making a mistake, and, I was assured by the lady, with good pronunciation. Dr. Braid, in his work on "*Hypnotism*," mentions that two of his patients, country girls, on the organ of "Imitation" being touched, spoke five languages correctly. I presume it is meant that they repeated the words after hearing some one recite them; but that was an extraordinary feat, as any one may judge by trying the experiment even on an educated person wide awake, provided he be not a good linguist.

I was once asked to mesmerise the servant of a friend, for the purpose of rendering her insensible to pain, previous to having a double tooth extracted during the sleep. I succeeded in producing the desired effect, and the operation was performed. On the instrument being placed in her mouth, as soon as the cold metal touched her gums, there was a slight quiver of one of the muscles of the face, but when the wrench was made and during the extraction of the tooth, the patient showed no more signs of feeling than if she had been a stone.

The patient during her sleep, after the phrenological organs had been excited, always imagined that I was her fellow-servant, who happened to be an elderly negro from Jamaica, and as the *séances* always took place in the presence of her mistress and another member of the family, I was obliged to be constantly on the watch to prevent the somniloquist from betraying all the secrets of the pantry and kitchen.

During the ordinary mesmeric sleep the patient generally recognises his mesmeriser, but as soon as the organs are excited a state of dreaming ensues, and then he will often take his mesmeriser for some other person, perhaps for some intimate friend, and by a few suggestive words he may be led to fancy that he is conversing with any particular individual the operator may suggest.

Of course the most decided and convincing cases as evidence of the truth of phrenology are those where the mesmeriser himself—as well as his patient—has no knowledge of even the localities of

the several organs. In such circumstances, should the mesmeriser, for instance, touch the organ of Cautiousness, and the sensitive immediately exhibit strong symptoms of terror, we may be pretty certain that the result is quite independent of will or of mind-reading.

One of the most interesting effects of the excitement of the phrenological organs is to be observed in the various and rapid changes of expression exhibited in the patient's countenance and attitudes, as the different organs are touched, when the play of the different passions is depicted with such marvellous accuracy, that those who are totally unacquainted with phrenology can easily perceive the nature of the sensitive's dream.

The very finest display of this phenomenon that I ever witnessed was in the case of Mr. Atkinson's patient, Anne Vials, recorded in the Rev. G. Sandby's work, "*Mesmerism and its Opponents*," and I remember seeing a well-known actress studying the expression and attitudes of that poor one-armed factory girl with as much interest and attention as she could have bestowed on a Siddons or a Pasta. Noticing one of these *séances*, Mr. Sandby says:—"In fact I cannot describe the effect better than by adding, that one of the spectators, a poet whose name on matters of taste is of the very highest authority, after witnessing the scene walked from the house down several streets preserving the most profound silence; and, upon his companion at length inquiring of what he was thinking,

'Thinking,' he answered, 'of what could I be thinking, than of what grovelling creatures we are, —while that poor girl seems a being of another world!'

An experienced mesmeriser and phrenologist wrote to me many years ago, as follows, by way of proving that the will did not act in his experiments:—

"I send you something new. Get some one to entrance your patient; *you* then excite the organs of the mesmeriser, and you will get the usual effects exhibited in double force by the sensitive, the mesmeriser holding his hand. Or, mesmerise the patient yourself, form a chain of a dozen or more persons; you hold the patient's hand and turn your back upon the last person of the chain; let any one touch the organs of the last person, and the same results will follow. Where is the will here!"

This experiment, however, in my opinion, is not quite conclusive, for if the person manipulating the phrenological organs of the last person be able to transmit any influence at all through a chain of twelve persons, why should not his will be thus transmitted?

Mr. Braid, a surgeon practising at Manchester, many years ago wrote a work on "*Hypnotism, or Nervous Sleep*," in which he narrates a case of phrenomesmerism, so extremely curious and interesting that I venture to insert it. Mr. Braid says:—

"I was informed that a child, five years and a half old, who had been present when I exhibited some experiments, the same evening had proposed to

operate on her nurse. The nurse had no objection to indulge the child, never suspecting any effect could take place. However, it appeared she speedily closed her eyes, when the child, imitating what she had seen me do, placed a finger on her forehead, and asked what she would like, when the patient answered, 'To dance;' on trying another point, the answer was, 'To sing,' and the two had a song together; after which the juvenile experimenter roused the patient in the same manner she had seen me do.

"The above circumstances being related to me, I felt curious to ascertain whether there might not be some mistake, as there had been no third party present, and I depended entirely on the statement of the child, which induced me, when visiting the family next day, to request permission to test the patient. This was readily granted, and, to my astonishment, she manifested the phenomena in a degree far beyond any case I had tried; indeed she did so with a degree of perfection which baffles description.

"However frequently she was tried, the same expression of countenance, the same condition of the respiration, and similar postures of the body, have been evinced when the same points were touched.

"Indeed, so highly susceptible was she that after a few trials, when I pointed a finger or glass rod over the part, without contact, similar manifestations resulted."

This case of Mr. Braid's is of double interest; first

of all, as proving that even a young child can mesmerise, and, secondly, that a child can excite the phrenological organs—perhaps one of the best proofs we can have of the truth of phrenology.

It is not to be supposed, however, that good cases of phreno-mesmerism are by any means common; some mesmerisers are more fortunate than others in finding patients who exhibit the higher phenomena; the great majority only succeed in producing the sleep.

During the state induced by Mr. Braid's process, and which he calls the "Hypnotic state," it would appear that the phrenological organs are more sensitive than they are during the mesmeric sleep, which would account for his remarkable success. In all my practice, extending over several years, I have only had two cases of clairvoyance and about half-a-dozen cases where the phenomena of phreno-mesmerism were remarkably distinct.

In the first chapter of this book I alluded to the common error of devoting too much attention to what is called "the higher phenomena of mesmerism," at the sacrifice of its more legitimate uses as a curative agent. But I must except the practice of phreno-mesmerism, for it is evident that, in judicious hands, the power of exciting the phrenological organs promises vast benefits, both moral and physical. Dr. Elliotson, the late Dr. Davey of "Hanwell asylum," and other practical men, have recorded their opinion that much benefit might be derived from the use of phreno-mesmerism in certain

forms of mania, and in the correction of many morbid habits; for impressions made during sleep-waking may undoubtedly be carried into the normal or waking state.

To do justice to the subject of phreno-mesmerism would require great experience in mesmerism, and a considerable knowledge of phrenology and physiology. I can only lay claim to a certain amount of the first requisite, and should be truly glad if some one more competent for the task would fully treat on the subject in a future work.

## CHAPTER VII.

## WHY IS MESMERISM SO LITTLE HEARD OF ?

IT has often been asked, "If there be really any truth in mesmerism, how is it that we hear so little of it in the present day?" Several reasons may be given to account for the apparent falling off in the practice of mesmerism, or as some people prefer to call it, animal magnetism.

In former days the principal opposition to mesmerism arose from its claims to the production of certain phenomena which opponents declared to be far too startling for belief, and these were the wonders of clairvoyance in all its varieties, viz., retrovision, prevision, and introvision.

At the present day, however, thanks to the proofs of the reality of clairvoyance given by Miss Lottie Fowler, who returned to America about two years ago, by Mr. J. W. Fletcher, who is fortunately now in London, and several other well-known clairvoyants, that faculty is now (1879) almost universally accepted as an undeniable truth by all those who have honestly taken the trouble, without preconception or prejudice, to investigate the claims of this truly wonderful endowment, and many rabid

anti-Spiritualists, while declaring that Spiritualism "is the last thing they will give in to," accept clairvoyance as an established fact.

Mr. Fletcher's mediumship is of the highest order, and the marvellous tests he has lately been giving, both in public and private, have attracted the attention of numbers who had previously paid but little attention to the subject.

More than thirty years ago, before Spiritualism with all its wonderful phenomena had been heard of in this country, and mesmerism had no rival in its claims to our interest and attention, it was widely practised, and the columns of the "*Zoist*," the "*Critic*," and the "*Medical Times*" were full of remarkable cures effected by its means, and most of the cases recorded were reported by members of the medical profession practising in London, or in the principal provincial towns.

The various interesting phenomena also observed during the mesmeric treatment, such as clairvoyance, sympathy of some of the senses, and the excitement of the different phrenological organs, created general interest and curiosity; in short, it was a novelty, and to a certain extent became the fashionable topic of conversation.

Are we then to suppose that the human constitution has changed since those days, that severe operations can no longer be performed without pain during the mesmeric sleep, and that palsy, rheumatism, epilepsy, and a host of other diseases, can no longer be cured or alleviated by the same means?

Surely this cannot be the reason for the apparent decadence of mesmerism. There are still many successful practitioners who produce precisely the same good effects on their patients as their predecessors obtained, whether we call these practitioners mesmerisers or "healing mediums," which probably may be fairly considered as interchangeable terms.

At the period before-mentioned, many capital operations were successfully performed on patients during the mesmeric sleep, both in England and France, and these cases drew general attention to the subject, the only drawback to the value of its pretensions being the comparatively small number of patients who could be rendered absolutely insensible to pain. Then came the discovery of ether and chloroform as anæsthetics, which could be applied to any individual, the only objection to those agents being, that occasionally the patient died during the operation, a mishap which never occurred in a mesmeric case. Moreover, it ought not to be lost sight of, that the majority of the members of the medical profession still treat with contempt, if not with the active hostility of former days, the claims of mesmerism as a curative agent, and it is well known that their influence is very extensive. In many a country parish the doctor is considered to be an authority on all scientific subjects—whether he may have studied them or not—and he is looked up to by many a confiding patient as if he were a small parochial pope, whose opinion must be final as to the value of mes-

merism, or in fact of any new or old discovery that may promise relief to human suffering.

I have already referred in a previous chapter to the fact that the wonders of mesmerism have been more sought after, than what may be called its more legitimate uses as a curative agent, and this, no doubt, may be classed amongst the reasons why it has fallen into disrepute. ✓

Perhaps there is ~~no~~ quality on which the average Briton prides himself so much as what he calls his common sense, which remarkable endowment—provided he be treated *secundum artem*—occasionally leads him to prefer the prospect of death itself rather than to owe his recovery to some unorthodox remedy, which he has been dogmatically assured is nothing but quackery and humbug. It is also to be observed that there are still many liberal-minded medical practitioners who have not the slightest objection to mesmerism, who would in fact be willing to employ any means that held out the least promise of benefiting their patients, but who are deterred from having their names mixed up with the subject, from the consideration that it might create a prejudice against them on the part of their professional brethren, and in the minds of many of their patients, and with consequently a possible loss of practice. That this is no idle fear or fancy is evident if we refer back to the history of mesmerism more than thirty years ago, when Dr. Elliotson himself, with all his wonderful talent for diagnosis (and I well remember hearing another physician, immedi-

ately after a consultation with him, exclaim, "The accuracy of that man's diagnosis is something marvellous"), yet *he*, in spite of all his advantages, is well known to have lost half his practice, because—he dared to be honest.

One of the leading medical journals of that day actually uttered as a threat, "that any medical man practising mesmerism deserved to lose all his patients!"

The last, but perhaps the most probable, reason explanatory of the apparent decadence of mesmerism as a curative agent, is the trouble, anxiety, and fatigue entailed on those who would gratuitously devote their time to its practice; for, in truth, mesmerism may be shortly described as the action of one human being parting with a portion of his own health and strength in order to benefit another.

He who regularly undertakes the treatment of disease by mesmerism, must sometimes be prepared to give up his days and nights to particular critical cases, with occasional temporary injury to his own health from mere fatigue and want of sleep. ✓

Many years ago my friend Mr. H. G. Atkinson, a most experienced and skilful mesmeriser, at the request of two London physicians, undertook the case of a lady who was in a most dangerous state. The mesmeriser attended day and night for seven months, during which time his patient was kept almost constantly asleep, and he ultimately had the enviable privilege of restoring the sufferer to perfect health. I am convinced that were all the details of

this very remarkable case to be published, watched as all its phases were by two physicians, one of whom was perhaps the first physiologist of the day, they would form a most valuable contribution to medical science. It is evident that in such a case as this few people could be found able to devote the time necessary for such a lengthened treatment, and still fewer who could have borne the fatigue.

This is the grand difficulty in the way of the practice of mesmerism; the practitioner cannot treat a case by merely observing the symptoms, writing a short prescription to be made up by some one else, and then proceed to treat several other patients in the same manner; but he must confine himself to a few cases only, according to his health and strength, and the time he can spare.

These reasons appear to me to sufficiently account for mesmerism not being more extensively practised in the present day. It is no longer a novelty, and it is difficult to get people to devote their time and strength to its practice; but in answer to those who triumphantly assert that because mesmerism now is comparatively little heard of, therefore there can be no real efficacy in the treatment, I can confidently promise, that if they would only devote one-half the time they waste in doing nothing to the treatment of even one case a day, they would have reason to acknowledge at the end of the year that at least that portion of their time had been well spent.

## CHAPTER VIII.

## CONCLUDING REMARKS ON MESMERISM.

MESMERISM, like every other subject worthy of investigation and practice, requires, above all things, patience and untiring energy. Many beginners fancy that, if they try one or two experiments and fail in producing marked effects in about half an hour, the process is not worth continuing, and they conclude that either they have no mesmeric power, or that their patients are unimpressible. This is one of the greatest stumblingblocks in the way of a just appreciation of the powers and the blessings to be derived from a proper use of mesmerism—the want of faith on the part of those who commence their investigations in a half-hearted spirit, and who are disappointed and discouraged on the very threshold of their inquiries. Mr. Atkinson's constant attendance day and night on one patient for seven months, and the examples of Dr. Elliotson, Dr. Ashburner, Rev. G. Sandby, Mr. H. S. Thompson, and many others, prove that, if the mesmeric process be only carried on with patience and perseverance, there are but few patients who could not be eventually affected, and but few diseases that could not be

cured or relieved. Dr. Ashburner, in his scientific work on "*Animal Magnetism*," gives numerous instances, where in certain critical cases, in which it was a question of life or death, that he and those he employed as operators, frequently continued the passes for two or three hours at a time, their perseverance being at length rewarded by their patients falling into a deep mesmeric sleep, which lasted for several hours. Many of these patients were suffering from typhoid fevers, all the ordinary resources of medicine had failed, and mesmerism, as is often the case, was had recourse to as a last resource. If Dr. Ashburner, then in full practice as a physician, could spare time and strength for making continued passes for two or three hours, surely there must be hundreds and thousands of healthy and robust young men and women much better able to spend both time and strength in service of their suffering relatives and neighbours.

Dr. Elliotson, in his report of the cure of true cancer by mesmerism, in the "*Zoist*," vol. vi. page 232, says: "This case proves the necessity of perseverance in mesmerism. *Five years* and upwards was Miss Barber mesmerised, and for the greater part of the period *three* times a day, remaining in the trance some hours each time, the part being locally mesmerised in her morning and evening mesmeric sleep, which took place in bed, and in the night the mesmeric passed into the natural sleep. Most patients, and some mesmerists, have no idea of the necessity of perseverance. I have no patience with half the

people who make a trial of mesmerism, expecting it to act as though its powers were miraculous, and not natural. I know mesmerists who give up a case if there is not improvement or some sensible effect after a mesmerisation of a quarter of an hour for a few days, and who also mesmerise far too many persons. Greatrakes and Lutherburg committed these faults, and thus at length fell into disrepute."

In a former chapter, I remarked, that in order to benefit a patient it was not absolutely necessary that the mesmeric sleep should be induced, and that the passes have frequently a most beneficial effect, even when no immediate symptoms of their power are to be detected. Dr. Ashburner, however, who, with the combined advantages of being both a skilful physician and an experienced mesmeriser, naturally speaks with far greater authority than could the most experienced non-medical practitioner, expressly states that in cases of epilepsy, and in typhus and other fevers, the deep mesmeric sleep is absolutely necessary; and he gives some very striking cases in his "*Philosophy of Animal Magnetism*," showing the beneficial effects of the deep sleep in allaying the fever, in controlling the delirium, and in contributing to the cure of the disease. I have often been assured by patients that one hour's deep mesmeric sleep is as refreshing and invigorating as many hours of natural sleep, and it is a well-known fact that the mesmeric sleep during the day, instead of interfering with generally ensures a good night's rest. I am not aware that there is any drug known to medical men

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which can claim equally remarkable and satisfactory results.

As mesmerism has been found very efficacious in the treatment of epilepsy, I may remark, for the information of all new practitioners who may undertake cases of that distressing disease, that it is not at all uncommon for the attacks to increase both in frequency and severity during the first few mesmerisations. This fact has been observed by Dr. Elliotson and many other experienced practitioners, and is here mentioned in order that the operator may be prepared for what otherwise might not only alarm *him*, but also the patient and his friends, and the treatment might be discontinued, on the natural supposition that it was doing more harm than good. The cases of cures of epilepsy recorded in the volumes of the "*Zoist*" are very numerous, and the reports of those treated by Dr. Elliotson himself read like clinical lectures, so minutely does he describe every symptom and change in the disease. His patience and perseverance must indeed have been very remarkable, when we consider that his tedious duties were undertaken over and above his usual routine of practice, and without fee or reward except that of his own conscience.

Dr. Elliotson's consulting room at times presented a very curious sight, for three or four patients were frequently seen at the same time, and all fast asleep. The doctor seldom had recourse to his mesmerism until he found that medicine had no good effects in any particular case ; and I have known numbers of my

friends and acquaintances treated by him in what is called "the orthodox manner," to whom he never uttered the word "mesmerism." To him it was not "a panacea for all evils," but merely one of many remedies to be used according to the nature, symptoms; and progress of a disease.

I have frequently heard people boast that mesmerism could not affect them; they seemed to consider it rather a merit, nay a proof of strength of mind, that they could resist the passes of certain so-called powerful mesmerisers; but, on further inquiries, I have found that some twenty or thirty minutes were devoted to and wasted in the trial, and, as probably these people were at the time in the enjoyment of pretty good health, I, for one, am not in the least surprised that, at the end of the *séance*, they were about as wide awake as they were at the beginning. Mesmerisers should steadily refuse to waste their time and strength merely to gratify scoffers whose favourite challenge is something like this: "Mesmerise me, and I will believe."

I have not yet touched upon the subject of the use of mesmerised water and other substances. Mesmerised water I have frequently employed with good effects on my patients, both as a soporific and as a tonic; taken at night, it will often be found to encourage natural sleep, and in some susceptible cases will produce the mesmeric coma. Mesmerised gloves and flannel have also frequently been used with good effect and interesting experiments made, which conclusively proved that some peculiar virtue

was really imparted to such substances. To mesmerise water, take a tumbler nearly full, in one hand, and with the other make passes over the surface of the water for about ten minutes or a quarter of an hour. The same process should be used with other substances, with the addition of slow breathing over them, so as to fully charge them with the mesmeric fluid or aura. Marvellous effects produced by these mesmerised substances have been reported by credible witnesses, and certain individuals appear to be remarkably endowed with the power of imparting this specific virtue, although the power of mesmerising, like other gifts or talents, is probably shared in to a certain extent by a large proportion of human beings.

This consideration should encourage beginners to give their mesmeric powers a fair trial, and if they can only occasionally relieve some sufferer from a headache, a toothache, or rheumatic pain, they will be doing good, and have the satisfaction of remembering that they also have been of some use to their fellow-creatures.

I have no doubt that many people would laugh at the idea of a mesmeriser being able to impart any virtue to a glass of water, by merely making a few passes over it, and they would probably attribute the effects produced entirely to the influence of the imagination. As the imagination, however, has been so frequently credited with the production of the mesmeric sleep and its various attendant phenomena, beginners should be philosophically indif-

ferent to the remarkable and alarmingly long list of theories attempting to explain the *modus operandi* of mesmerism ; and whether the state induced or its phenomena be attributable to imagination, expectation, monotony, unconscious cerebration, psychic force, self-induced condition, dominant ideas, will-power, or some healthy healing emanation proceeding from the mesmeriser, I should say to all practitioners, " *Call it what you like, but persistently employ it for the benefit of the sick and suffering.*"

If, by the use of mesmerism, the operator can but remove a raging toothache, it will encourage him to undertake the treatment of more serious complaints, and he may rest assured that the sufferer will not be hypercritical as to how the pain may have been removed, as long as he finds himself relieved.

But there are an immense number of cases where the "imagination theory" would be totally at fault, and I may here notice a case in my own practice. I was attending a patient who had for some years been subject to sudden attacks of cataleptic trance, which generally were produced by any sudden loud noise, strong mental emotion, or even by merely raising the head from the horizontal position, and these trances would sometimes last for several hours. During one of these trances, and within a very short time of its invasion, I attended with a friend who was an experienced physician ; he tested the state of the patient, and pronounced her to be totally unconscious. I then proceeded to breathe slowly over the region of the heart, and, in the course of a

few minutes, was gratified by hearing faint sounds of returning animation, sounds of laboured respiration, and in less than ten minutes from the time I commenced the breathing, the patient passed into the sleep-waking state and was able to converse. This power of determining or ending the trance was afterwards made use of on the occasion of any sudden attack, and the treatment eventually wrought a complete cure. I am not aware that there is any drug mentioned in the Pharmacopeia which, even with the aid of the imagination, could have restored animation in so short a time. To avoid any misconception or appearance of exaggeration, I must state that I had frequently mesmerised this patient, who was remarkably sensitive to the mesmeric influence.

I am, however, convinced in my own mind that, from the peculiar habit or idiosyncrasy of this patient, mesmerism would have affected her during the trance even had she not previously been mesmerised, but of course in that case the process must have been carried on for a considerable length of time, to have produced an effect.

There are numerous other instances of the powerful effects of mesmerism on human beings when in a state of insensibility, or not aware that any one was attempting to mesmerise them. In some cases the patients were at a considerable distance from the operators; and experiments on very young children, and even on the brute creation, as recorded by Dr. Wilson, of the Middlesex Hospital, amply prove that there is some specific virtue inherent in mesmerism,

as marked and decided as are the virtues and properties of the most powerful medicines.

The interesting experiences of Mr. Atkinson as narrated in Appendix A, where he describes the effects produced by mesmerised gloves, and the valuable counter test when he sent unmesmerised gloves which produced *no* effect, has been corroborated by the experience of other mesmerisers. The writer of this work once tried a similar experiment, for, finding that a glove he had mesmerised in London and sent to Dover produced a deep sleep in one of his patients, he thought it possible that the imagination might have something to do with it, so he sent his servant out to buy a pair of gloves, which were enclosed in an envelope and posted without the mesmeriser having either touched or seen them. A day or two afterwards the sister of the patient wrote to say that the gloves had been received and worn, but to their surprise had not produced the slightest effect.

In the concluding paragraph of Mr. Atkinson's letter, he gives two remarkable instances of sympathy at a distance, very valuable in conjunction with the experiences of other mesmerisers, as proving that the imagination does not play that distinguished *role* attributed to it by so many critical opponents of the science.

On due consideration, it is not perhaps very surprising that the majority of the members of the medical profession should neglect or even oppose the practice of mesmerism. We should remember that

they, like the members of other professions, must live by their practice and calling. They have had an expensive education, studied the virtues and properties of different drugs, and the uses of other healing appliances, and as long as their practice is what is called orthodox, then, according to their skill and success, they will retain the favour of their medical brethren, and the confidence of their patients, without any risk of injury to their pecuniary interests by having recourse to an unpopular remedy.

But, I may observe, all the more honour to the noble-hearted few, who, in spite of obloquy and threatened loss of practice, have, when all the ordinary resources of medicine have failed, liberally welcomed the aid of any new and perhaps generally depreciated remedy which seemed to hold out one last chance of relieving a sufferer.

Fortunately, to the great credit of the medical profession, besides the honoured and well-known names of Elliotson, Gregory, and Ashburner, there have been many others who have devoted their time and strength to the alleviation of the sufferings of their patients, by a use of what may even still be called an unpopular remedy; the names of these liberal-minded men, and detailed accounts of the cases they treated, will be found in the pages of the "*Zoist*."

There are at the present time a considerable number of non-medical professional practitioners in London, and a few in the provinces, who are doing

a vast amount of good ; their names and addresses could be easily procured by any one anxious to try the curative virtues of mesmerism either on themselves or their friends, and it is satisfactory to know that many of these practitioners are recommended by medical men in cases where medicine has proved of no avail.

What appears to me as something truly marvellous, is the fact that the great majority of non-medical men should be so prejudiced or wanting in the moral courage to face ridicule, should they deviate from the common track, that, as long as those who are nearest and dearest to them have what is called the best medical advice, even as a last resource, when all ordinary means have failed, steadily refuse to try the effects of mesmerism, because they have been told that either there is nothing in it, or, that if true, it is to be attributed to Satanic agency! They willingly and liberally pay their fees, console themselves with the recollection that they had called in doctors A, B, and C, and helplessly ask, "What more could we have done?"

I was once applied to by a medical friend, who told me that he had a patient who was afflicted with an incurable disease, but that he thought mesmerism might relieve the severe and almost constant pain, as he had tried the passes, and the patient had proved susceptible. It was not a question of cure: mesmerism was suggested by the liberal-minded and humane doctor merely as a means of smoothing the passage to the grave. Will it be believed that the

parents of the patient objected on the score of religious scruples? Is it not wonderful that any sane human being should behold his child suffering agonies of pain, the skilled and experienced medical adviser totally unable to mitigate those sufferings, yet hesitate to have recourse to a trial of a remedy, which over and over again has been found to afford relief when all other appliances have failed? Is it that the parent is afraid of ridicule, that he dare not employ an unpopular remedy? or is it some superstitious dread that mesmerism may possibly owe its healing powers to Satanic agency?

✓ |  
Satanic agency has certainly played many parts in the history of discoveries, and the following extracts from the Rev. G. Sandby's work, "*Mesmerism and its Opponents*," may amuse or astonish my readers when they find certain blessings—at least so esteemed by ordinary folks—attributed to the agency of the "Evil One!"

"Satanic agency first comes forward in the character of an old woman, curing the sore eyes of a boy by the infusion of dock-leaves.

"Satanic agency next appears in the character of a Jesuit, scowling darkly around, and curing a tertian ague by the Peruvian cinchona.

"Satanic agency again appears in the character of Dr. Jenner, convulsing the College of Physicians with his novelties, and saving myriads of infants by the process of vaccination.

"Satanic agency lastly appears in the character of a modern mesmeriser, healing by his soothing power

some of the most distressing diseases, and expelling a whole train of neuralgic pains which had defied the skill of the faculty."

It certainly does seem a monstrous conclusion, that when a mesmeriser has succeeded in assuaging the agonies of a suffering child by means of the passes, the results should be attributed to the agency of the "Evil One." In this advanced period of the nineteenth century, when the schoolmaster is indeed abroad, it might surely be expected that a little more logic and common sense could be found, at least amongst what are called "the educated classes."

The Rev. G. Sandby, in his valuable and interesting work on mesmerism, has fully answered the religious objections; and perhaps the following lines, written by an accomplished lady, and published in a volume called "*Angels' Visits*," may be acceptable to my readers:—

ON HEARING MESMERISM CALLED IMPIOUS.

"Call not the gift unholy; 'tis a fair—a precious thing,  
That God hath granted to our hands, for gentlest minist'ring.  
Did Mercy ever stoop to bless with dark unearthly spell?  
Could impious power whisper peace, the soul's deep throes to quell?  
Would Evil seek to work but good—to lull the burning brain,  
And linger in some scene of woe, beside the bed of pain—  
To throw upon the o'er-fraught heart the blessing of repose—  
Untiring watch the eye of care in healing slumber close—  
And as the agony of grief fell 'neath the Spirit's will,  
O'er the wild billows of despair breathe tenderly—Be still?  
Speak gently of the new-born gift, restrain the scoff and sneer,  
And think how much we may not learn is yet around us here;  
What paths there are where *Faith* must lead, that Knowledge cannot  
share,  
Though still we tread the devious way, and feel that truth is *there*.

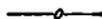
Say, is the world so full of joy—hath each so fair a lot,  
 That we should scorn one bounteous gift, and, scorning, use it not,  
 Because the finite thought of man grasps not its hidden source?  
 Do we reject the stream, because we cannot track its course?  
 Hath Nature, then, no mystic law we seek in vain to scan?  
 Can man, the master-piece of God, trace the unerring plan  
 That places o'er the restless sea the bounds it cannot pass;  
 That gives the fragrance to the flower, the 'glory to the grass'?  
 Oh! Life with all its fitful gleams hath sorrow for its dower,  
 And with the wrung heart dwell the pang and many a weary hour.  
 Hail, then, with gladness what may soothe the aching brain to rest;  
 And call not impious that which brings a blessing and is blest.  
 The gladden'd soul re-echoes praise where'er this power hath been;  
 And what in mercy God doth give, oh, 'call not thou unclean.'"

In conclusion, would it be deemed impertinent for an old soldier to remind parents, husbands, and wives—who, perchance, have hitherto treated with contempt the idea that a few passes made by a mesmeriser can possibly have any healing effect—that they will find in their Bible the sensible and practical appeal of Naaman's servants:—

"My father, if the prophet had bid thee do some great thing, wouldst thou not have done it? How much rather then, when he saith to thee, 'Wash, and be clean.'"

# APPENDIX

## A.



### EXPERIMENTS IN MESMERISM.\*

BY HENRY G. ATKINSON, F.G.S.

I WAS once requested by a physician to try the effect of mesmerism on a lady who was suffering fearfully from tic, a complaint to which she had been subject for many years. The trial was most successful, but before a cure could be effected, the lady was obliged to go to Paris with her husband. As my peculiar influence had so good an effect upon her, it seemed most desirable to continue the process, if possible; and as I had already tested the fact that mesmeric power could be conveyed by water, cotton, leather, and other substances, I suggested the plan of sending her mesmerised gloves by post to Paris. The experiment succeeded perfectly; the glove put on her hand always sent her into mesmeric sleep, and relieved her intense suffering, which all other means had wholly failed to do. The mesmerised glove by use gradually lost its property, and then failed to cause sleep after a third time, so that I had to send newly mesmerised gloves every week, and the old ones were from time to time returned, to be charged afresh. This led to the observation of a very

\* Extracted from Professor Gregory's "*Animal Magnetism.*"

striking fact. I found that, before I could renew the healthy power, I had to remove the unhealthy influence or contagion, which the glove had absorbed from the patient. I felt in my hand, on approaching the old gloves, the same unpleasant sensations that I have from touching a diseased individual, besides absolute pain from the tic. The sensations were as clear and unmistakable as those of heat from a flame, or of the roughness or smoothness of objects. The pain was the same in character as that of the patient. After I had mesmerised the glove for two or three minutes, the sensation ceased, and the glove was now cleansed from the influence it had absorbed and brought with it. The sensation now was the same that I have when I relieve pain by mesmerising, when I can tell at once that the pain is relieved. I was in fact a complete mesmerometer, and had within myself the most convincing proof of the mesmeric fact, and of its relation to ordinary contagion. It might be supposed that the influence of the gloves on the patient was due only to the imagination; but I tested this by sending sometimes unmesmerised gloves, and at other times such as had been used by the patient, without doing anything to them; and always found that the unmesmerised gloves had no effect, and the used gloves a most disagreeable one. I have made the experiment in a great many cases, and with the same results. The perception I had of pain and other states appeared at first very strange to me, as if it were a new sense; but I soon became familiar with it, so that it ceased to attract notice.

My patients used to try to deceive me as to their pains, but could never succeed, and they used to remark that I knew their sensations better than they did. When mesmerising nervous patients, I have felt a prickling sensation in my hand, but as soon as the sleep came on I felt a slight shock, as it were; all disagreeable feelings ceased, and I experienced an agreeable influence in their place. On the occurrence of any decided change in the patients, as from trance to somnambulism, I felt the same slight shock. I have found that one's own peculiar mesmeric power may be

in a measure conveyed to another, and also that the peculiar mesmeric state or sleep may be conveyed from one patient to another. This accounts for the occasional contagion of fits, and for such phenomena as the contagious preaching mania in Sweden. I have experienced the same sympathetic influence as in the case of gloves from letters, especially if the paper were glazed ; and I could thus tell the state of the patient before reading the letter. Sometimes the heat and prickling have been so strong that I have laid the letter on the table to read without touching it. The influence from a feverish state would cause my hand to feel hot and feverish, even to others, the whole day. On one occasion, on reading a letter from a distance, I had the sensation of tears. It was so strong that I felt sure the writer had been in tears while writing it, although nothing in the case, or in the letter, led to this conclusion. It proved, however, on inquiry, that the writer had been in tears, and that the tears had fallen on the paper. In one case, in which the patient, a lady, was too sensitive to be treated in the usual way, I gave her mesmerised water, which immediately caused her to sleep, and she was thus cured of sleeplessness. Once, when she sent for the water, I could not venture to mesmerise it, as I had just been mesmerising a diseased subject, so I sent ordinary water, without any remark. In a few days I received a note to say that the water had lost its power, and no longer caused sleep. On one occasion I breathed a dream into a glove, which I sent to a lady ; the dream occurred. One of the ladies above-mentioned, with her whole family, are sensitive to the approach of iron, which recalls the faculty possessed by some of discovering veins of ore, or springs of water under ground. I found that if, when engaged in mesmerising for pain, my mind was bent on what I was doing, I received little or no influence. I could at will either impress the patients or absorb their condition. In either case, if the will was active, the influence never affected me beyond the hand used ; but if I were thinking of other things, I experienced the whole symptoms of the patient so far as pain was concerned, and I thus approached to the

state of the somnambulist who detects the diseases of others.

The following is a remarkable instance of sympathy :—I had mesmerised a young lady who was living with my brother and sister, twenty miles from town. She proved an excellent clairvoyante. One Sunday I was walking with a lady, after church, in her garden, in St. John's Wood, when I found the dead body of a new-born infant, wrapped up in a clean cloth ; it must have been thrown over the wall. Next morning I received a note from my sister, telling me that my patient had on the Sunday, after church, insisted on taking her all about the garden to look for a baby, because she was sure she should find one. Once when I had been mesmerising the same young lady before a company, and was making a cross pass to wake her, a lady standing close by received the influence from my hand, and ran away screaming like one possessed. From that time, whenever I mesmerised my patient, which was at very uncertain times, when I could get away from London, this lady, living four miles off, fell into mesmeric sleep at the same time, and her case exhibited the same phenomena of clairvoyance.

Two of my patients once fell into a dead sleep or trance, so deep that I believe you might have cut them to pieces, and they would have felt nothing. No ordinary means could arouse them ; yet, if a drop of water fell, even on their dress, it immediately set them a-trembling ; the touch of a piece of silver convulsed them with laughter, which the touch of another metal instantly stopped. The trembling and laughing seemed wholly without consciousness, a kind of life in death, or merely spasmodic. I have seen and heard some patients writhe and groan and scream as if in agony, and yet on awaking declare they had had delightful dreams. Here a conscious and an unconscious state seemed to exist together, so that the persons may be truly said to be *beside themselves*. One lady whom I know suffers acutely from the contact of metals. She feels a prickling sensation, with general discomfort, and at times even sickness. A brass thimble caused her finger to swell,

and she was forced to leave it off. She is compelled to eat with wooden spoons, and to use her handkerchief to open the door when the door-handle is of metal. This sensitiveness is not uncommon, and should be carefully attended to, as it may be the unsuspected cause of much suffering. In general, medical men pay no attention to such things, and call them nervous or hysterical, and thus save the trouble of investigation. Sir C. Bell said that the eternal answer of the indolent is, "It is hysterical." But supposing them hysterical, what then? They are not the less real, nor the less interesting.

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## B.

COLONEL GURWOOD'S account of his interview with Alexis, translated from an article in the "*Journal de Havre*," and inserted in the "*Zoist*," vol. ii. p. 393 :—

"After several experiments, I seated myself by the side of Alexis, my hand in his, and there we were chatting.

"'My friend,' said I to him, 'I am incredulous, but I am so in good faith.'

"'Oh, I know that well! you have too much sense to deny evidence—and I love you much, Englishman as you are; I love you because you generously saved the life of a Frenchman.'

"Struck by this remark, I begged him to continue.

"'Yes,' continued Alexis, 'it is a long time ago! It is,' added he after a pause, 'thirty years! The affair took place in the south, during the winter. The country is wild. There, see, the night, and your troops, provided with scaling-ladders, appearing under the walls of a strong place. My God, what a noise! what a battle! Poor man, you were wounded,' said Alexis, placing his hand on my head; 'it was there that the blow fell—but your wound did not stop you. I see you farther on, mounting to the assault—on the

G

breach. Stifled cries come to your ears: some English soldiers surround a Frenchman whom they wish to kill. You lift up the weapons that menace his head, and you command them to respect his life. Oh! I love you, indeed. The officer follows you to a square tower, where several of his comrades are made prisoners. You traverse the town to find your general, to whom by your orders the French general surrenders his sword.'

" 'And what became of this sword?'

" 'Your general presented it to you—and you have it still in London, suspended to the wall of your room; the blade only is the same: the scabbard was changed in 1827.'

" 'And does the officer, whose life I saved, still exist?'

" 'Yes, he exists; and for a long time you have made useless researches to find him again. But have good hope, come again to-morrow and we will discover him.'

" Struck by what I had just heard, I went out from M. Marcillet's not knowing what to think or believe; for, in fine, Alexis had said what was the truth.

" Yes, the 19th January 1812, at the siege of Ciudad Rodrigo, in Spain, I was wounded in the head, and on the very spot Alexis indicated.

" Yes, on the same night I had the happiness to save the life of a French officer.

" Yes, I received from Lord Wellington the sword of General Barrie, after the assault.

" Yes, the scabbard of this sword was changed about the time fixed by Alexis.

" Yes, I have been making researches to find again the French officer, saved by my care, because General Napier (in his History of the Peninsula War) refuses me the honour of having conducted the assault of *Ciudad Rodrigo*, and designates Major Machis as having the right to the sword which was given me by Lord Wellington. Judge, then, of what importance it was to me to find again a witness who could certify the truth of facts already thirty years old! Unfortunately, I had no longer, as to the officer, the least notion which might aid me in my researches.

“On the morrow I returned to Alexis, whom I pressed with questions touching the French officer.

“‘I avow,’ the somnambulist replied to me, ‘that I feel some embarrassment in following him in all the changes of his military career; he is found mixed up in my mind with other officers who were present, as he was at the siege of which I have spoken. Let us search well, however. Yes, I see our man, about eight years later—at Paris, Rue St. Antoine—during the night.

“‘There! they remit to him a despatch of great importance—and, with a company that he commands as captain, he hastens to the Rue Richelieu, near the Royal Library, where I see a riotous crowd. Ah! there has just taken place a fatal event.’

“‘What has taken place, then?’

“‘A crime—an assassination—committed upon an illustrious personage.’

“‘Let us see, Alexis; follow the captain down to the present time, and tell me where I ought to seek for him.’

“‘It is in vain that I pursue him; my sight cannot attain to him. But, hark ye, address yourself to the colonel of the 42d Regiment of the line, in garrison at Valenciennes. However, you need not hurry; for, if you write to him to-morrow, he will not receive your letter immediately; he is at Maubege.’

“Curious to verify these facts I consulted *L'Annuaire*, and I addressed my letter to M. Husson, colonel of the 42d of the line, in garrison at Valenciennes. Five days after, I received from Colonel Husson a reply in which he excused himself for his *delay, occasioned by his tour of inspection*. It was not he who was at the siege of *Ciudad Rodrigo*, but his brother, whose address he indicated at Paris.

“I wrote then immediately to this brother, and the following is the substance of his reply. After having confirmed his presence at the siege of *Ciudad Rodrigo*, M. Husson continues thus:—

“‘It was reported to me that an officer of the company of sharpshooters, charged with the defence of the small

breach, was assailed by some soldiers, when an officer saved him and took the greatest care of him afterwards; he recommended him to his comrades on the route that the garrison followed, I believe, as far as Lisbon. It is without doubt you, colonel, who, in the midst of a sharp action saved the life of this officer, whose name I have never known.

“Signed ‘HUSSON, *Retired Colonel of Artillery.*’

“‘PARIS, 17th January 1848.’

“‘The same day I communicated this letter to Alexis.

“‘Courage,’ said he to me, ‘we are on the right road. On your return to London consult the documents relative to the months of January and February 1812, and I answer for your success.’

“A month later I was in the Tower of London, hunting among the papers of Lord Wellington all the documents relative to the affairs of Spain of the above epoch.

“All of a sudden my eyes fell upon an endorsement thus worded :—

‘Bonfilh, 34th Light.’

“This name struck me, and I felt myself seized with an inexplicable conviction; I opened the letter, exclaiming, ‘Without doubt it is he!’

“By this letter, signed ‘Bonfilh,’ a French officer asked Lord Wellington to send his letter to the advanced posts.

“There was nothing in that which served to fix me; nevertheless, urged by an internal voice, I wrote to Colonel d’Artois, secretary to the committee of fortifications at Paris, begging him to make researches in the War Office.

“Colonel d’Artois replied that there existed no person of the name of Bonfith on the Army List, but he sent me a certificate proving that the Commandant Bonfilh, who served in the 34th Light, received his half-pay at Villeneuve-d’Agen, and lived at Villareal (Lot et Garonne).

“The 23d of April 1844, I addressed a letter to the Commandant Bonfilh, in which I made known to him my researches and my hopes, and on the 7th May following I received the following reply :—

“ VILLAREAL (Lot et Garonne), 1st May 1844.

“ TO COLONEL GURWOOD,

“ SIR,—I received from you a letter, dated the 23d April, in which I read with the warmest interest the details of the taking of Ciudad Rodrigo.

“ After the recital you have made, colonel, there is no doubt that I am the French officer whose life you so nobly saved, and for whom you have so long sought.

“ I recollect that when you arrived to my aid, I was down on the ground surrounded by six or eight English soldiers, some of whom held their bayonets to my body. You ran to me, colonel, and making the soldiers retire, you took me under your protection. We went to the square tower near the gate of Almeida where General Barrie surrendered to you, saying, “ Respect my soldiers.” This general offered you his watch ; but you replied, “ Preserve your watch, general ; honour brings me here, and not pillage.” He wished also to give up his sword to you, and you refused it, saying, “ You will remit it to General Lord Wellington.”

“ I shall add, colonel, that when they were conducting us prisoners towards Portugal, you made me enter a house in a little village, *El Codon*, where there was given me a cup of rum, and a ration loaf, for the route. In fine, you had the goodness to accompany me as far as the column of prisoners, which was in advance ; and without you, colonel, the Spaniards would infallibly have cut my throat before I could have joined my comrades in misfortune.

“ I have often reproached myself, colonel, for not having asked the name of my benefactor, but for which, believe me truly, I should have taken the advance in writing and testifying my lively and eternal gratitude. In fine, I pray continually for your happiness, and beg of you to sacrifice a moment of your leisure to write to me.—He who owes life to you,

“ ‘ BONFILH,

“ ‘ *Chief of Battalion on half-pay,  
Officer of the Legion of Honour.*

“ At length I received the price of my labours ! The letter of this brave commandant rendered me so happy, that I determined to go and see him on my first journey to

France, and I have now just returned from Villareal, where I have passed some days which were amongst the happiest of my life. Oh! that you had been present at our mutual recognition! You would have taken a lively part in the joy of all that family, whose benedictions I bring away. M. Bonfilh entertained me with an account of the events of his life, entirely conformable, by the by, with the narration of Alexis. Thus, for example, on the 18th February 1820, M. Bonfilh, captain of the 17th of the line, in garrison at Paris, was going the rounds in the evening, in the Rue St. Antoine, when they informed him of the assassination of the Duc de Berri. Immediately he repaired, with his company, to the Rue Richelieu, and passed the night at the post of the Royal Library."

In connection with the foregoing narrative, an extract from a letter dated June 25th, 1844, which I received from a friend in London who was an experienced mesmeriser, may prove of interest:—

"Colonel Gurwood \*—who brought two friends to the *séance*—placed a folded letter in the hand of Alexis, and requested him to describe the contents. Alexis placed the letter upon his mouth, his nostrils, and the top of his head; he then gave Colonel Gurwood the letter back, and immediately repeated every word that was in it, Colonel Gurwood stopping him every three or four lines, in order to read aloud to the audience the very words which Alexis had just repeated, and thus he went on to the end of the letter, and curiously enough he said when he came to the signature (Bonfith) that he could not read *that*, but he would *write* down the name as it *appeared* to him, so he did, the last letter of it an h looking like a double l."

\* Colonel Gurwood served through the whole of the "Peninsular War." When a lieutenant in the 52d Light Infantry, he led "the forlorn hope" at the storming of Ciudad Rodrigo (wounded), he also led the storming party at Fort Renaud, was wounded at Sabugal, and severely wounded at Waterloo. At the time of Colonel Gurwood's interview with Alexis he was Deputy-Lieutenant of the Tower.

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