

THE MIND IN DISEASE

SOME CONDITIONS CURED
BY SUGGESTION

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THIS BOOK IS DEDICATED
TO
MY WIFE, KATHLEEN,
WHO HAS BEEN
OF THE GREATEST ASSISTANCE TO ME
IN THE COMPILING OF IT

FOREWORD

I do not claim that the mind is omnipotent. Nor do I claim that suggestion will cure every disease. I do not even claim that it will always cure the same condition occurring in different types of patients.

But I do claim that, given average intelligence and a desire to co-operate on the part of the patient, suggestion can help in a vast number of diseased conditions.

When we realise that a multitude of diseases originate in the mind alone, it is easy to understand my contention here.

Fear states, anxiety states, obsessions, worry and depression, are all mental products. Many physical states such as nervous dyspepsia, nervous diarrhoea, nervous vomiting, blushing, frequency of micturition, psychical impotence and various (functional) paralyses, may likewise be mental in origin.

Obviously then if you alter the mental state you may cure the condition here.

And it is also recognised that in many cases of long-continued physical diseases the mind of the patient plays a part. He becomes obsessed with the idea that his condition is incurable, and the hopelessness of his mental outlook retards his physical recovery. The idea " I can't get well " prevents him

from putting forth his best efforts. That idea exists in his mind, and if *it* works—and it does—surely the inculcation of the opposite idea should produce the opposite result. In practice I have found that such an idea can be inculcated and *does* work. Get into his mind the idea “ I can get well,” and his physical body functions better.

There is a popular conception that if a patient responds to suggestion he cannot have a strong mind, he must be lacking in will-power. The very reverse is the case. Weak or strong, given average intelligence, the patient can be helped ; but I have found that the stronger the mentality of the patient, the better the response to the suggestions of cure.

And so, as the result of twenty-two years' experience, I have come to the following conclusions :—

(1) The mind is a factor in disease.

(2) It acts sometimes by virtue of will-power, at other times by virtue of the imagination.

(3) By combining these two factors, imagination and will-power, many diseases can be cured.

(4) Both the imagination and the will-power can be developed by suggestion.

My views are put before you in the following order :—

CHAPTER I.—The mind in disease—The relationship between patient and doctor in suggestion—Treatment—Mental pain, *e.g.*, worry—Physical pain and how suggestion acts in the relief of it.

CHAPTER II.—Conditions I cured in myself, physical and mental.

CHAPTER III.—Cases in which the mental state was obviously responsible for the condition.

CHAPTER IV.—Cases in which relief was obtained, when the predominant factor producing the patient's discomfort was obviously the existing physical condition.

CHAPTER V.—Cases in which it was difficult to decide whether the mental or physical condition was the chief factor.

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INTRODUCTION

THE object of this book is to show that a hopeful mental outlook can do much to improve the patient's condition in disease, whether the disease itself is physical or mental.

In many cases not merely improvement, but cure will result from the possession of such an outlook.

And where such an outlook does not exist, it can be inculcated, given only that the patient will allow himself to be assisted by a practitioner skilled in the use of suggestion.

By suggestion I mean healing the patient by suggesting to him that certain results will follow if he listens ; that his mind can take in impressions from the suggestions given, and that his mind (and his body also within certain limits) will respond to those suggestions in the direction of cure.

The idea " You will get well," if it can be impressed on the mind concerned, is capable of stimulating and strengthening the mind and the body to an extent far greater than the average individual realises. Such an idea will not of course bring to life dead tissues, but it can, and does in many cases, improve the functioning of living tissues weakened by disease.

And since results achieved are of more importance than theories, I propose to put before you certain

results which have been achieved in my own case, and in the case of patients I have myself actually treated.

There will be no hearsay evidence in this book, and with each case I will give what appears to me to be the explanation of the cure which followed.

As regards my own case I propose to describe to you how I was cured of—

(1) *Depression and worry*; (2) *constipation*; (3) *insomnia and morphia habit*; (4) *fear of a vague un-reasoning nature*, and (5) *self-consciousness*.

THE MIND IN DISEASE—THE RELATIONSHIP BETWEEN PATIENT AND DOCTOR IN SUGGESTION TREATMENT—MENTAL PAIN, *E.G.*, WORRY—PHYSICAL PAIN—AND HOW SUGGESTION ACTS IN THE RELIEF OF BOTH THESE CONDITIONS.

CHAPTER I

THE MIND IN DISEASE—THE RELATIONSHIP BETWEEN PATIENT AND DOCTOR IN SUGGESTION TREATMENT — MENTAL PAIN, *E.G.*, WORRY — PHYSICAL PAIN—AND HOW SUGGESTION ACTS IN THE RELIEF OF BOTH THESE CONDITIONS.

The Mind in Disease

IN endeavouring to explain the action of the mind in disease it is necessary to remember that the mind acts in two ways : (1) by virtue of will-power ; (2) by virtue of the imagination.

Some authorities assert that imagination is always the predominant factor in cure ; others argue that by will-power only are results achieved.

It is my experience that successful results are achieved in some cases by stimulating the imagination, in others by encouraging the patient to use his will-power.

To one man you can say, " Do this, put your heart and soul into it, and you will succeed," and he does so, by virtue of willing himself so to do.

Similar suggestions given to another case result only in failure ; whereas if you say to that other, " Don't bother to believe, don't force yourself ; depend only on what I say to you and hope you will

get well," success follows. He does not exert his will-power ; he just hopes that you can cure him and cure follows as the result of that hope. His imagination achieves the desired result.

In other words we must remember that what succeeds in one case fails in another, that no two minds are alike, and that any routine formula, while it may cure minor evils, will not cure the greater difficulties.

A man who is ill is not the best judge of what procedure will cure him.

Assistance from outside is essential, and the individual who is to give that assistance successfully, must have a clear head, wide experience of humanity, must be prepared to follow up patiently every clue that will lead to cure, and must be capable of stimulating the patient in the right direction, *i.e.*, he must know whether to direct the imagination or the will-power at the start, and must be capable of getting the two to work together at the finish.

For in the end it is the imagination, ruled by the will-power or reasoning mind of the patient, that makes that patient capable of taking his place among his fellows.

Imagination alone can run riot. The idea " I can succeed " may take such hold of a mind as to make its possessor attempt the impossible. When, however, reason comes in and says " Up to such limits I can let myself go and no further," the idea of success so guided will often produce results where the idea of failure would have interfered with success.

For it is a fact that if you start to overcome a difficulty with the idea in your mind " I am bound to fail " you will be definitely hampered by that idea.

Whereas if the idea " I can succeed " is present in your mind, your mental faculties are undoubtedly sharpened, and thereby you are put in a better position to succeed.

And if the idea of success is not in your mind, such an idea may be put into it by an individual who has already found that the same idea has worked well for him in his own difficulties.

The important thing for the sick man is to find such an individual.

Many people who profess to treat the mind and get it into order, have never suffered from such disorders themselves. Their knowledge is derived from hearsay. They cannot—because they have not themselves been through the mill—inspire their patients with confidence. They have no first-hand knowledge.

In the following chapters I propose to give my personal experiences of the value of inoculating my own mind with healthy ideas. Having been able to study the action of such ideas in my own case, I have realised that both imagination and will-power have produced success. Later as I practised on others, I found that the important thing was first to stimulate the imagination, and then to encourage the patient to use his own will-power in addition. Why did I not tell him to use his will-power first? For the simple reason that so many patients told me " I have no will-

power. I have tried my best and failed." I said, therefore, "Give that side of your mind a rest." I know what an idea has done for me in more than one difficulty (*vide* chapters following) and I have found that once the idea of success got hold of me, my will-power made that idea work on reasonable lines. Those lines produced for me a success far greater than I had dared to hope for, and it is for that reason that I am able to say to you: "Once the idea of success is in your mind, you are in a strong position, and if you then use your will-power you will not abuse the idea. You will use it within reasonable limits, but even so your success will be greater than you ever at one time hoped to achieve."

The main factor in cure is to get in the idea "I can succeed." *I* can get that in for you, and *I* shall have to guide it along reasonable lines for a time. But afterwards your own will-power and reasoning can take over the reins of government and *you* can guide it as you will. If you are a fool you will abuse it, but if you listen to me I can prevent you from doing that, show you how to guide it at first, and finally leave you able to view and deliberate upon all things calmly, guided only by the idea: "Whatever I have to do, I can and will do." How far will that take you? Well, it may not take you to the utmost limit of your desire, but it will at the least enable you to face life philosophically, and if you have average brains, it will enable you to succeed where many others in the same position as yourself have failed.

The Relationship between Patient and Doctor in Suggestion Treatment

A great many people believe that if they undergo suggestion treatment, they will have to depend on the doctor treating them for ever after, if cure is to be permanent. They fear they may become as clay in his hands, that they will become as Trilby to Svengali. That fear is quite unjustified.

While I do not deny that an unscrupulous individual can abuse the power of suggestion, I emphatically state that, in the hands of a capable and honest practitioner, nothing but good can result to the patient concerned. Properly guided by such a man, there is no fear of the patient being reduced to the rôle of a dependent. After all, it is to the doctor's interest to cure the patient, not to injure him. The fact is that in cures effected by suggestion, it is the patient's own mind that really does the work. The idea of cure is put into his mind from outside, and that idea—carefully nursed at first by the doctor, I grant you—becomes finally part and parcel of the patient's personality, and dominates him to the exclusion of his symptoms. But mark well : it is the " idea " of cure and not the doctor that " dominates " him.

The important thing is to get in that idea, and it is here that the doctor is necessary, namely, at the start. His part consists in getting the idea in, getting it firmly embedded, nursing it in the early stages of its development, till it has taken a firm hold in the

mind of the patient. It will be subjected to all sorts of attacks at first. The patient will doubt its efficacy, and wonder whether it will work. He will expect failure, and through all that phase assistance from outside is necessary to him. But as time goes on the patient begins to realise that something is growing in himself which is making him stronger and happier every day, and eventually he realises that he can hold his own once more unaided.

But while I maintain that in the end, "it is the patient's own mind that really cures him," it is important to realise that such a statement, made to the patient while he is hopelessly depressed about his condition, will in most cases have little or no effect in the production of cure.

Most of the patients that I see come to me in a state of settled despair. The statement I most often hear at the start of the interview is :—

"Doctor, I've tried everything. I've done my best to pull myself together, and I've got steadily worse. I can do no more. I'm coming to you as a last resource and if you fail I am finished."

To tell such a patient at the first meeting :—

"You have reserves of power in your mind that will cure you," is only to make him feel you do not understand his case. It does no good, for though the statement is in fact true, the patient cannot take it in, and therefore, true though it be, it fails to help him.

So, having listened to the full recital of the trouble, I begin by saying to such a patient :—

“ I recognise that you are unable now to help yourself. Very well. I can help you. I can get something into your mind from outside that will make you, to begin with, feel a bit easier, and finally will make you quite well. I can, by treating your mind, get you a relief which you have not yet been able to achieve. If you give me only your attention, I can work on your mind just as a surgeon can work on your body, and cut out the feelings that trouble you, just as he could cut out a tumour. That done, your mind will heal, and get strong again.”

If the patient listens, and does not oppose what I say, he begins to experience relief. He is not asked to believe anything. His will-power is not interfered with, he is merely told, “ I can make an idea work in your mind which will give you relief where other treatment has failed.”

As time goes on, he begins to find the improvement becoming more pronounced. He realises that the suggestions given to him have proved true, at the least to a considerable extent, and possibly to the full.

He is then able to believe (as the result of the proof supplied) that suggestion does act when used by the doctor.

At this stage, then, I go a step farther, saying :

“ You can see that what I told you is true, though at first you could not believe me. Well, I have another truth to give you. I can assure you that you are now in a position to help yourself, and if you test what I say, you will find this is true also.

“ You thought my presence was an essential to

your cure, and finding that the sound of my voice soothed you, and made you feel better, you argued : ' Oh, yes, of course, I can do whatever the doctor says, while he is there and for a short time after.' Well, I can tell you that though the sight of myself, obviously believing in what I say, and the sound of my voice emphasising that you would get well, were undoubtedly a help to you, the essential factor in your cure is the idea (which such a sight and such a sound) impressed on your mind.

" It was the idea which cured you, and not I. I certainly helped the idea to develop by suggesting that you could get well.

" But there are other ways of getting the healthy idea to work for you, and though you could not have responded to them at first, yet you will find that with the knowledge you have since acquired, you will respond to them now. It comes to this : So far, you know that *verbal* suggestions, given by me, have been followed by relief.

" Now you will find that the *written* suggestions I give you will do the same. If you are troubled, read these suggestions and they will give you relief when I am not there.

" First, it is true, I shall have to get you to respond to them here, in my room, but with a little practice you will respond to them wherever you are, and then you'll begin to see more and more clearly as time goes on that *you are curing yourself*. It is only a matter of training your mind. But why don't I tell you to suggest to yourself that you will get well? Why

bother at all about written suggestions? Because it is a thousand to one that if you start suggesting to yourself at this stage, you will either overdo the suggesting, or not do enough of it, and so fail to get the result. But when for a time you have practised training yourself just by reading my suggestions, you will, in the words of a patient of mine, 'acquire the habit of viewing and deliberating all things calmly and so, taking the best out of life, let the rest go by.'

"That is to say, after a time you will be able to dispense with both verbal and written suggestions: You will find yourself well and happy again."

To sum up:—

1st. Assistance from outside is necessary, and that assistance is supplied by verbal suggestions given by the doctor.

2nd. The patient finds that the written suggestions can act as well as the verbal and he acquires confidence in himself.

The doctor drops out of the picture.

3rd. The patient finds he can dispense with all suggestions and remains well.

"Say you suffer from Insomnia, for example. I write out on a card here: 'Read this, count five and shut your eyes. You will then rest for eight minutes, opening your eyes at the end of that time and feeling rather refreshed. To-night, after reading it, you will rest for eight hours and wake very much the better to-morrow for a really good sleep.'

"You read and you find you get the eight minutes. That night you get eight hours, or if not all of it, at

least a good proportion. Next night, you do better, and so on, till finally you sleep without difficulty." "It is not the personality of the doctor that cures you, it is the idea." Granted that the doctor must have a strong personality to put the idea in to start with. But once in, it becomes your own property, and every time you read the card, your mind will respond more readily to the idea.

You may ask, "But have I to go on reading these suggestions every night of my life?" I reply, it is extremely unlikely that you will have to do so. If you read them for some time (longer or shorter according to the severity of your condition), you will establish a new habit. And, even if you had to go on doing it for ever, surely it is only a very little trouble to do so. It only takes about a minute to read, and that is surely a small price in effort to pay for the comfort secured.

Mental Pain, e.g., Worry

Take business worry, for example.

In all cases described under this condition we can recognise that two factors exist: (1) business conditions, (2) a mind capable of being impressed by such conditions.

Obviously removal of the cause will cure the condition.

But even where this cannot be done, the worry can be prevented in a great many cases by acting on the mind concerned.

This statement would appear to be against all reason, so I will endeavour to explain.

When a man is suffering from worry, what does he say ?

“ My mind is in a ferment. I see no way out. Failure is staring me in the face. I am obsessed with worry, and I have every reason to be so. Things have gone steadily from bad to worse, and now I am so worried I can't think or act clearly. I have no confidence ; I am dog-tired, and I can't concentrate.”

Every one of these statements may be true. What do they mean ? That his mind or consciousness is upset, and as a result he cannot work.

Yet I say : “ If you will not fight against my efforts, I believe I can prevent you from worrying, secure for your mind the rest which it so urgently needs at present, and even give you confidence to start work again later on, with a clear head. I can't give you brains, I can't teach you how to do your business, but I can rest your mind, inspire confidence, and thereby put you in a better position to deal with your problems.

“ I can't remove the conditions that exist, but **I can alter the impression they make on your mind.** I can put in confidence that will blot out the worry (impression).

“ You realise quite well that worry is retarding you in everything you try to do. And the facts are two : (1) your business is going to the dogs, (2) you are so worried over this you cannot use your mind efficiently.

“ As regards these facts, I can do nothing for the first ; I can't alter that, but as regards the second I can do much. You say, ‘ But as long as business is bad I can't help worrying.’ I reply, I can stop you from worrying even under such conditions. You recognise well enough that what's really killing you is the worry, and you'd give something to be rid of that. I can assure you it can be got rid of. You reply, ‘ I can't see it ; my reason tells me it can't be done,’ and I reply, there are *other forces* than your reason *latent in your mind* which you don't know how to use. Those forces can be utilised to cure you where reason and will-power have so far failed.

“ You have, I know, used your reason and will-power to the best of your ability, to shake off this worry, but that has got you nowhere. If I tell you there are other forces which can help, I don't ask you, on my part, to believe anything. I ask you to test what I say. You consent.

“ Well, then, I say I can cure you of worry by acting directly on your mind. I want to explain to you that your mind acts in two ways :—

“ By virtue of reasoning or will-power on the one hand, by imagination on the other. I can cure you by working on your imagination. At once you reply, ‘ But my worry is not an imaginary one !’ I agree, but your worry is the result of the idea of failure being alive and rampant in your mind, and I say that I can get the idea of success into your mind by working on your imagination. The fact is that the idea or fear of failure has prevented you from

using your mind in a normal, clear-headed way ; the opposite idea might surely be expected to produce the opposite effect ! Your reason is up in arms. You say : ‘ Have not I been trying to do this all the time ? I’ve used every effort of will, I’ve tried to pull myself together, and here I am, worse than at the start.’ Precisely, I agree with you.

“ All your efforts of will have failed, but I say I can get your imagination to do here, what your will-power has failed to do.

“ And since your will-power and reasoning have already failed to give you relief, will you please give up using them in this connection and do as I ask you ? Don’t reason about the proposition I put before you, don’t force yourself by an effort of will even to try to believe what I say, only don’t resist my efforts. Just listen to me and see what will happen. I tell you, if you will do what I say *I can get you to respond automatically* to the idea of cure, *where all your efforts of will have so far failed you*. I know that this imaginative side of yours can produce quiet for you, if you will listen to me. It can absorb the idea of cure automatically if you don’t fight against it, and, the idea absorbed, cure will follow. I am not going to interfere with your will-power or reasoning, I am only asking you not to let them interfere with me. And if you will concentrate all your efforts on looking at a bright object which I put before you, you will keep them both occupied thereby, and allow me to get at your imaginative faculty.

“ After a time, I shall ask you to close your eyes

deliberately, for by so doing you will shut out many other impressions, and your mind will thereby more easily absorb the impressions of quiet and cure which I can then make on it.

“ All the time you will find that you can use your reason and will-power as you wish : all I ask is—don’t use either to fight against what I say.

“ I tell you that under these conditions you will, after a while, feel easier, though quite conscious of what is going on, and that when I have finished to-day you will feel easier for some time after. If you let me treat you on these lines for some days, your mind will be easier for longer periods each day, and, though you will probably have ups and downs, you will find yourself worrying less and finally your worry will go.

“ Free of it, can you not realise how much better you will be able to make use of all your powers ?

“ Need I dilate on the value of confidence ? You probably number among your acquaintances at least some men as clever and capable as the average, with as good reasoning power, who were not depressed under worrying conditions. They remained optimistic. Granted that some, despite their optimism, were fools and failed in business, those who possessed the quality of optimism, and guided it by reason, were the men who really succeeded in life.

“ Their reason told them the difficulties were there, but the optimism they possessed enabled them to make a better use of their mental powers. At this moment you are entirely lacking in optimism—your

mind is full of the idea : ' I can't succeed ! ' I can put in the other idea, ' You can and you will succeed,' and with it in, you will think more clearly and act more confidently.

" All I am asking you to do is to let me show you that by acting on your imagination a state of quiet and peace can be produced, and a feeling of confidence inculcated. Any relief in those directions will put you in a better condition to use your ability later. I can't give you that ability, but *I can give you quiet* that will put you in a better position to use your ability.

" When you get down to bed-rock, *worry is an impression made on your mind.*

" I am only telling you that I can replace the worry impression with the opposite impression, *i.e.*, ' quiet,' and if you listen you will find that what I say is true."

Physical Pain, and how Suggestion Acts in the Relief of it

In discussing pain, I propose (1) to define it, (2) to show how it arises, and (3) to show how it can be relieved.

1. Pain is generally described as being of two kinds, Physical and Mental. If we suffer pain as the result of a fractured leg, we call it physical pain. If we are plunged into sorrow at the death of a friend, we are considered to be in a state of anguish, or suffering from mental pain.

The term "physical pain" appears to me, however, to be misleading.

Pain is a sensation, something we feel, and in the case of a fractured leg *pain is the feeling we have as the result of the fracture*. That it is produced by the fracture is beyond doubt, but it is the consciousness of what is going on that gives rise to the sensation of pain.

In short, **Pain is the Impression made on the Mind.**

So much for the definition and the origin of pain. Now as to how it can be relieved. Let us take first physical conditions such as fracture of the thigh bone.

Obviously the first thing to do is to treat the cause : set the fracture, and, as the bones and any other injured tissues heal, relief gradually sets in.

Whilst this is going on, however, the average patient is quite unable to prevent himself from feeling some pain, and recourse must be had to some form of sedative to relieve it. Anodynes, analgesics, anæsthetics may be necessary.

Sometimes even such measures fail to give relief, and the patient continues to suffer.

Yet even in such cases, suggestion can frequently give relief, if applied by someone who knows how to use it.

Please understand I do not say that suggestion can cure the fracture. But I do maintain that the pain resulting from it can be relieved by suggestion, even while the condition causing pain exists.

The accompanying diagram will help to explain my ideas on this question (see p. 35).

We begin with the assumption that man is possessed of a body and a mind or consciousness, and that without consciousness pain cannot be felt.

And inasmuch as mental and physical qualities are two different things, I represent the mind in the diagram as something distinct from the body. Whether the mind lives inside or outside the body, does not affect this theory. That we assume we have a mind, as distinct from a body, is all that matters. That they are linked together we grant. In the diagram the mind is represented as being at M.

Now let A represent the site of fracture, and since pain is what we are concerned with, my object is to show (1) how it is produced, (2) why it is felt, and (3) how it can be cured by suggestion.

It is produced by the fracture, it is felt because we have a mind or consciousness on which impressions are made, and it can be removed by suggestion because by suggestion we can fill that mind with impressions of another sort : *i.e.*, impressions, the opposite to pain, can be introduced into the receptacle—the mind—which holds the painful impression.

To explain :—

In the body we are provided with what is called a nervous system. This system is composed of a brain, a continuation of brain substance called the spinal cord, and a further continuation of that substance in the shape of nerve trunks which are simply prolongations of the spinal cord. These nerve trunks again spread out into numerous smaller branches

forming a network over and among all the tissues of the body. The whole is comparable to a tree, the brain representing the root, the spinal cord the trunk, the larger nerves the main branches, and so on.

This nervous system has the property of conveying sensations from all parts of the body to the brain.

For example, in the case of a fracture at A, impulses travel up through the smaller nerves in the vicinity, to the larger ones, then into the spinal cord, and finally into the brain cells.

Let B represent that area of the brain which receives the impulses from A. As a result of the disturbance at A, a further disturbance is caused at B, and we can describe the line AB as representing **the course of pain in the body.**

But the course of pain does not end there, for it is a fact that if such a patient be anæsthetised and rendered unconscious, he is quite unable to feel what is going on while unconscious, though it is a fact that during such a period the same impulses must be still travelling up to the brain.

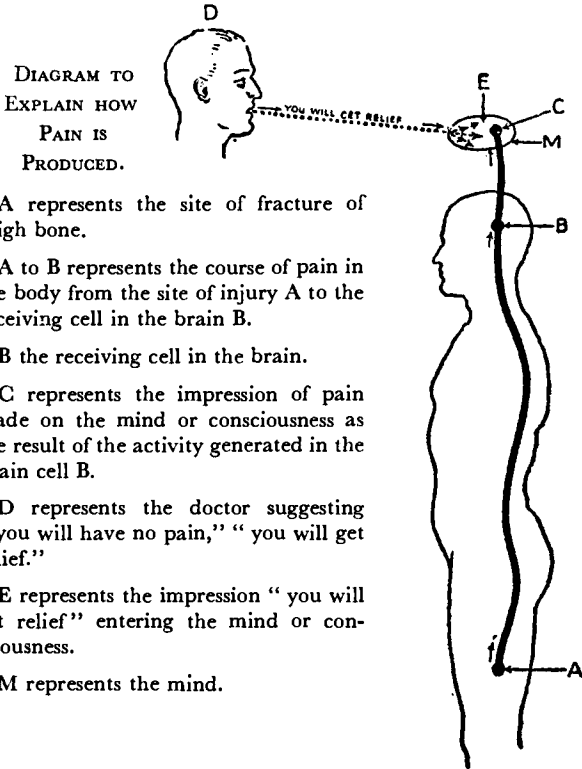
That means that while his mind or consciousness is shut off, he cannot feel what is going on in his body at A, and, further, that in order to feel the disturbance at A, an impression must be made on his mind.

Let C represent that impression in the mind.

How precisely the connection between mind and body is established cannot be explained, but it can be represented diagrammatically as the line BC. That a connection exists is beyond doubt.

So that the factors concerned in the production of

so-called physical pain can be represented as holding the line AC ; A the cause producing ; C the effect



A represents the site of fracture of thigh bone.

A to B represents the course of pain in the body from the site of injury A to the receiving cell in the brain B.

B the receiving cell in the brain.

C represents the impression of pain made on the mind or consciousness as the result of the activity generated in the brain cell B.

D represents the doctor suggesting "you will have no pain," "you will get relief."

E represents the impression "you will get relief" entering the mind or consciousness.

M represents the mind.

produced. (And it is C, the painful impression, that we are out to destroy.) It is as if pain were an enemy holding the line AC. Our object is to attack and dislodge that enemy.

Obviously we might attack it anywhere between A and C.

For example, set the fracture at A, and the pain may cease. Give various drugs by the mouth, or injections of morphia, or even anæsthetise the patient, and you can get relief for a time. But remember that all such measures, inasmuch as they are applied through the body, represent attacks made on the line AB, to dislodge the enemy, and the enemy himself is really lodged at C in the consciousness ! It is as if by such measures you were cutting off supplies to C. You may indeed succeed, and if you do, well and good, but, where you fail, remember that the final stronghold is at C, and, if only you can attack there, you come directly to grips with the enemy.

Remember again, C represents the painful impression in the patient's consciousness. That impression comes from within his body. But his consciousness can receive impressions from without also, *e.g.*, if one goes to a play suffering from a toothache, and becomes interested in what is taking place on the stage, one frequently loses the pain while so interested. Impressions coming in from without have destroyed the painful ones coming from within.

This fact has encouraged some of us, who practise suggestion, to believe that it is possible to make stronger impressions on the mind, and produce longer periods of relief, and possibly complete relief of pain, even while the condition causing it continues to exist. This belief I have found justified in my practice in certain cases.

I find that a patient suffering pain is as a rule eager and willing to listen. There are some who are too distracted to be able to give their attention, but they are the exception. Such cases are rare in my experience, and provided the doctor concerned is capable and strong enough, he can generally grip the patient's attention after a few attempts.

The following is the method I usually adopt. Placing the diagram referred to before the patient, I explain :—

“ Your pain is the result of the fracture at A. I cannot attempt to cure that fracture by suggestion, but I can cure the pain resulting from it. What really hurts you is the impression made on your mind at C. It is a reality, I know, there's a definite cause for it, but it is the impression made on your mind that hurts, and I can put in another impression that will overcome it. You needn't try to do anything. I'm going on talking to you and I'll get my impressions in sooner or later. I will probably be able to give you some relief to-day. I may indeed be able to give you much relief. I shall probably have to see you for some time to establish permanent relief, but if you don't fight against me I'll secure this relief for you much sooner than you anticipate.”

The majority of patients listening to such a statement become impressed with this idea, “ Well, anyhow, this doctor thinks he can do me good, perhaps I'll lose that pain.” Once such an idea penetrates, it is clear that there are two impressions working in the mind, (1) the reality of pain, (2) the

idea that it might get better. Now anything that makes the patient think "after all, I might lose my pain," tends to tranquillise his mind. Realising that an ounce of proof is worth a pound of theory, I go on to say to the patient : "It is true I am only putting an idea into your mind, but I can produce a much greater impression by doing so than you can imagine. Your mind, taking in the idea of relief, will in fact achieve the reality."

But, says the patient : "Doctor, this is a physical condition that is producing my pain, and how can an idea put into my mind act on my body?" I reply : "I'll give you a proof that an idea can do so, provided only that you don't oppose the idea. I suggest to you now (*i.e.*, I give you the idea) that your right hand will lift up *automatically* as I talk to you. That is, it will do so without any effort on your part. You can prevent it from moving if you like, for I am not interfering with your will-power, but there is another side of your mind apart from your will-power, that will carry out the suggestion if you on your part only listen and allow me to work."

Generally, in anything from one to five minutes, the patient finds his hand has moved up, and as a rule finds—he has become so interested in watching this happen—that his pain has already become less.

For my part, once I find his hand move, I realise that I have got in touch with his mind and put *one* impression into it. I know then that I can put others in, because he on his part is now much more ready and able than before to give me his full attention.

I know then I can fill his mind with the idea, "you will not be able to feel pain." I proceed to do so by suggesting that comfort will take the place of pain, and gradually he finds himself getting more and more relief.

Patients vary enormously in their receptivity, but failure to secure relief has been the exception in my experience. Failure, where it occurred, was due either to hostility to the idea of suggestion because of a foolish misconception that it interfered with the will-power ; or inability, on the part of the patient, to believe that I meant what I said. If such patients could only have realised that it does not profit a doctor to make a statement he cannot substantiate, they would have responded to the idea.

Does the suggestion of relief act by stopping the inflammation in such cases ?

That I cannot say. I do not know. But what I do know is that by stopping the feeling of pain, the patient is saved the expenditure of a great deal of energy. And energy so saved means increased ability to deal with the condition. Patients suffering severely can aptly be described as "being worn out with pain." They become physically debilitated by it ; when the pain goes, their resisting power to the condition is by so much—and very materially—improved.

And since a suggestion given to the mind can produce a lifting of the hand, *i.e.*, can start activity in the actual physical body, I see no reason why suggestion should not at any rate help in reducing

inflammation in living tissues that are not too severely diseased. That healthy suggestion *can* improve the general metabolism, *i.e.*, make the body function better, is an undoubted fact in some cases. That some physical conditions are too bad to be influenced by suggestion is, in our present state of knowledge, also undoubtedly a fact.

But if you refer to the case of broncho-pneumonia which I describe later on, you will see how an improvement in the cough, both as regards its severity and the quality and quantity of the purulent sputum, followed on suggestion treatment, and the patient's physical condition at once began to improve.

The only explanation I can see to account for such a change, is that by suggestion the patient was made to feel comfortable, he ceased to worry and fidget even while the infection was still present, and, once comfortable, his physical body was put in a better position to function.

We do not yet know the limits of the power of suggestion.

That is in one sense a curse and in another a blessing. It is a curse because people who are easily led, are apt to jump to the idea that suggestion can do everything because it has already done so much ! They put no limits to its power and attempt the impossible, often with cruel disappointment to the sufferer.

It is a blessing because those who know how to use it in reason, and are not afraid to use all other *proved* methods of treatment in conjunction with it, can, by

inspiring their patients with confidence, produce results in cases which would otherwise be regarded as hopeless.

Suggestion is beyond doubt of immense value in the cure of disease.

But the very strength of the power of suggestion entails that it should only be used by those who (1) understand the conditions they are dealing with, and (2) are well versed in the use of suggestion, and careful not to push it too far.

A multitude of people who practise it to-day know literally nothing about the diseases they endeavour to treat. In such hands it can be a very great source of danger to the public. In skilled hands it will never do harm and its use often results in great benefit.

I give in this book a description of some of the cases I have treated successfully on these lines.

It should be noted that the suggestion is, not "You have no pain," for that is absurd, the patient *has* pain, but "You will get relief." The continuance of that idea impressed on the mind acts as a soothing poultice to an inflamed area of the body.

CONDITIONS I CURED IN MYSELF,
PHYSICAL AND MENTAL.

- (1) DEPRESSION AND WORRY.
- (2) CONSTIPATION.
- (3) INSOMNIA AND MORPHIA HABIT.
- (4) FEAR OF A VAGUE UNREASONING NATURE.
- (5) SELF-CONSCIOUSNESS.

CHAPTER II
CONDITIONS I CURED IN MYSELF

Depression and Worry

MY OWN CASE IN CREFELDT PRISON CAMP,
GERMANY, 1915

*To explain how suggestion cures depression and worry due
to real causes*

PERHAPS the description of how I cured myself will help more than any other explanation I could give.

I was wounded at Mons in 1914, and spent ten months afterwards as a prisoner of war. While in prison, it became necessary to amputate my right leg, the amputation leaving me with a remnant of three inches. I had been $7\frac{1}{2}$ months in prison before the amputation was performed, all efforts to save my leg up to then having proved of no avail. I was reduced from 12 stone to 8 stone, and was suffering constant pain in the wound, which had continued septic. I took an average of two grains morphia per day during this period, for the relief of pain, with only partial success. I slept poorly and on at least two occasions was on the point of death. Profound depression, insomnia, and severe pain in the wound will briefly

and inadequately suffice to describe my condition. After the final operation (I had eight in all during the $7\frac{1}{2}$ months), I lay in bed longing for death.

I knew if I were to recover that I should have to face the following difficulties :—

(1) Say good-bye to the army I loved, and in which I had already served for eight years.

(2) Never again indulge in the healthy games and sports which had meant so much to me—rowing, boxing, hunting. My three ambitions in life had been to win the Diamond Sculls at Henley, the English Boxing Championship, and to ride to hounds. For the fourteen years previous to my being wounded, physical fitness had been my god, and now there was an end of it for me at 32 years of age.

(3) At this time I write of, I possessed, outside my army pay, exactly £200 in the world, and I was faced with the fact that I must work or starve. I did not know whether I should be retained in the Service, and I had always disliked the idea of private practice. Also, I had for several years lived at the rate of £1,500 per annum, until just prior to the war, when I lost the greater part of my income. My army pay at the time I speak of did not amount to half that sum.

(4) Owing to the large quantities of morphia I had to take, my digestion was very seriously impaired, to say nothing of my will-power. I was emaciated, fretful, and had lost all confidence in myself. It is no exaggeration to say that in those days I was a mental and physical wreck.

Such was my condition in April, 1915. It was

then I received a letter from an old patient of mine, whom I had cured by suggestion in 1911 in Kirkee, India. (The history of his case follows this description of my own.)

I was at my wits' end when I received this letter. It is true I had been practising suggestion since 1908, but somehow I never thought it could help *me*, in those prison days of 1915.

The receipt of the letter started a train of thought in my mind. I argued : If by putting an idea into that man's mind—for that was all I did—he has remained happy ever since in spite of his difficulties, perhaps I could get some sort of an idea into mine that would help me. But our cases were very different. I was then in much worse plight than he had been in 1911. In 1911 I was fit, and felt able to put the idea into his mind : there was no one to do a similar act for me.

If I couldn't get it in myself no one else would. The proposition as I saw it was this : Here you are in the pit of despair, mentally, physically, and financially defeated. How can any suggestion make you happy and efficient again ? You possess £200, one leg, and an emaciated body ; you are utterly depressed and ill-equipped to earn your living in the strenuous competition of these days. It is no good suggesting you will succeed in life, for you are too heavily handicapped.

And after much thinking I was compelled to admit that the future could never be other than a poor thing for me.

So I determined to "go off on another tack."

I said : " Even if I can't ever laugh again, or make a living worth speaking of, I might make myself able to grin and bear it, instead of weeping most of the day " (as I did then in paroxysms of physical pain and mental anguish).

I determined to try to accomplish that purpose, *viz.*, to suggest to myself : " Anyhow, you can cut out these tears, and face life better than you're doing. Like a man ? Oh, no, but at least not like the puling invertebrate thing you now are." I began, expecting nothing, starting in despair, not believing. For three solid, desperate weeks I went on. Relief ? Not a bit of it ! My reason was up in arms against my efforts. Every fibre of my being rebelled against the idea that I could possibly ever get out of that slough of despair. And, mark you, in those efforts I was not expecting success in life : I was only hoping for *some* diminution of the suffering.

Thus it went on—no shadow of improvement till, at the end of those three weeks, an idea came into my head that made me smile for a few seconds.

What the precise idea was does not really matter. It started a smile, and I remembered : " If ever you got a patient to smile in the old days, generally it meant the beginning of cure for him. You've just smiled—perhaps it means the start of a cure for you." But that night, as if to disprove such a hope, I was more miserable than ever. Bitter tears—utter despair. Next morning, however, little as I was expecting it, the relief came.

In the ward where I was lying, there was on one side of me a Russian, named Weidenbaum, and on the other a Frenchman, Sorigny. How well I remember that morning! I noticed the Russian looking at me in a strange way, and asked him not too politely what he was looking at. He replied: "We are all wondering what has happened to you, for you look quite different, and you have been laughing and talking all the morning." I replied: "And why not—I feel so well to-day!" Up with my little Frenchman to corroborate: "Mais oui, vous avez chanté La Marseillaise deux fois ce matin avec moi." (You have sung the Marseillaise twice this morning with me.)

Rather astonished at his excitement, I replied: "Of course I know I have. I always did want to learn it from a Frenchman."

This was too much for him. "Mon Dieu, il est fou!" (The man's mad!) was his response, and he retired to the shelter of his bed-clothes!

But I began to realise that something had happened to my outlook. I began to realise that I did indeed feel well, though I could not account for it. Bit by bit the idea filtered in: "Could it have been that your suggestions to yourself have really worked?" Up with my reason at once to condemn such a foolish explanation. But somehow the idea stuck. I realised I certainly *was feeling better*, and though I quite saw all the difficulties I still had to face, I felt somehow quite different about them. I felt, in fact, that if a suggestion, "You will get better," repeated every

day for three weeks could get rid of so much depression when I was still physically a very sick man, what would it not do when I was fit again !

Mark how I had advanced already. I began for the first time to think : " I am going to get well again some day and do things." And yet my suggestion had only been : " You'll get out of this state, perhaps, but you cannot hope ever really to succeed in life." I had already got farther than I had expected. But I was taking nothing for granted. Every day I watched myself, expecting a return of my former state. It never came. True, I did cry once or twice, in sheer physical pain, and I did feel a bit depressed at times, but the old gloom had gone. I had not only got over the first fence, but I was going well over the whole course, and the more I went the more full of going I felt.

Some six weeks later I was transferred from hospital to the prison camp. By that time I had a grip on life again, and felt that grip getting stronger as each day went by. I had, by filling my mind with the idea, " You'll succeed," achieved far more than I had expected. I had found resources in my mind that I had never dreamt of ; and I argued from what I had experienced : " If I, ill, can put an idea into my own mind and respond to it, surely I, well, can more easily fill other sick minds with the same driving force ? If I can suggest success to myself, *and get it*, in spite of all my reasoning against it, I can get the same idea more easily into other minds if I can only get them to listen to me."

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In that prison camp to start with, I cured many cases of depression. My procedure there was always the same. I began by saying : " I can't alter your conditions, but I'll make you laugh at them. I'll alter the impression they make on your mind."

It is twenty-three years since those prison days, and they have been full of such cures.

As explained, my own imagination was fired by the knowledge of another man's response to my treatment.

Here is the story of this patient cured at Kirkee, India, in 1911, who had remained well ever since I treated him four years previously, and whose letter made me determine to treat my own depression on the lines that had produced cure in his case.

KIRKEE, 1911

In 1911, while acting as medical officer to the Ammunition Factory at Kirkee, I had as a patient a European man employed there holding the rank of conductor. All the conductors were specially selected men. They were all old soldiers, N.C.O.'s or Warrant Officers of good character discharged from the Service as time-expired. The post was one much sought after by men of their class, carrying with it as it did many advantages : good quarters, servants' good pay, and an excellent climate. Kirkee was 3,000 feet up in the Bombay province, and was practically a hill station. There was plenty of sport. The conductors in themselves numbered a community

of 200 men with their wives and families. Tennis, hockey, fishing and boating were all to be had, and the work was not heavy. A Brigade of Horse Artillery was within a mile of their quarters, and in Poona, which was just $3\frac{1}{2}$ miles away, were two white, and three native regiments. From the point of view of sport, sociability, and climate, these men were well provided for.

My patient, Mr. X, was then a man of about forty years of age, physically sound, mentally alert, a good and willing worker, and a performer at most of the concerts which were given at Kirkee. When I knew him first, he appeared to be without a care in the world, in the best of mental and physical health. Later he began to report sick at more and more frequent intervals. He complained of constant fatigue, headaches, and inability to concentrate on his work. He gave up his games, avoided his fellows, became gloomy, and began to lose weight. He was not a malingerer, and did his best to carry on. I treated him by means of tonics, got him transferred to light duty, and at various times sent him away for change of air. But for six months he continued to run down, and at last one day in my office he broke down utterly, collapsing in tears.

By dint of much questioning, I eventually got the following statement from him :—

“ The plain fact of the matter is, sir, that I am homesick. I've been twenty years out of England without a home furlough, and though I know I have

much to be thankful for, I'd give all I've got for a sight of England. I'm well off here. I've got servants, sports and a social life that I could never afford to keep up in England. If I give up my position here, I'll have to live on my pension at home, plus any odd jobs I can get, and it is hard for an old soldier like myself to make a start in civilian life at 40. I've got a wife and two children to support, and I can do it well here. If I give up my job, it will mean hardship for all of us, and yet I'm so utterly miserable that I don't see how I can stick it. The sight of that brown maidan (plain) every morning gets on my nerves, and the prospect of eventually dying here appals me."

Realising that the best way to cure any suffering is to remove the cause of it, I assured him I would do my best to get him a furlough to England, and for three months devoted all my energies to getting him sent home on sick leave. But the powers that be in his case could not grant his request ; it was, in fact, impossible to get him a passage. He had been a very sick man now for nine months when one day I went in to see him and spoke to him as follows :—

" I've done all I could to get you home on sick leave, and failed, so you'll either have to stay on, or give up your job and go home. If you decide to go, it is impossible to say when you can purchase a passage, and therefore at the very best you'll have

to stick it out here for some months more. I cannot alter the conditions that exist here, and there is in my opinion only just one chance of getting you well. I practise hypnotism, and it is just possible that if I hypnotised you, I might be able to alter the impression made on your mind by existing conditions. I might, by this method, be able to make you look on things from a different point of view.

“It is only a chance, I can promise nothing, but everything else has failed and it is therefore worth trying.”

You will observe that I spoke doubtfully. I was indeed doubtful. In those days I could not see how suggestion, as I understood it then, could act, and I believed a hypnotic trance was essential. (As a matter of fact, I never really hypnotised him; he was fully conscious of everything I did while treating him.) Rather to my surprise, he jumped at the offer, saying: “I don’t mind what you do; you can mesmerise me, or hypnotise me, or do anything you like. If you could only make me *feel* myself again, I’d be eternally grateful.”

So, rather doubting myself, I set to work. Holding up a ring I asked him to look at it, assuring him that if he did so he would feel drowsy, his eyes would get heavy, and close, and he would find himself in a very pleasant hypnotic trance. While in that state I could influence him, and make everything seem bright and well, both then and after.

In a few minutes his eyes did close, and he

appeared to be resting in comfort, his breathing was quiet and regular, and his face lost its unhappy expression.

I then spoke to him on these lines :—

“ Your trouble is really the state of mind you are in. I can now alter your mental state, and ever after you’ll feel as I now tell you to feel. You’ll get back all your old joy in life, feel just as happy as you did when you first came out, and loved India. All this cloud will pass away, and you’ll be happy again in your work and your play also. You need have no fear, everything will be as I say.”

After about five minutes of this sort of talk, he opened his eyes and said : “ Well, sir, I’m very much obliged to you, but I wasn’t hypnotised at all ; I heard every word you said.” I assured him that none the less he would do well, and, rather crestfallen, took leave of him. Indeed, so little did I believe in the efficacy of what I had done, that I purposely kept out of his way for the next week. However, one day as I was riding past his bungalow, he rushed out, and seizing my horse’s bridle, asked me to come in as he wanted to talk to me. When inside I turned to his wife and asked her how he had been. She replied with a smile : “ Well, sir, I don’t know what you did to him, but he has been a different man since the day you spoke to him. He whistles in his bath in the morning, and is as happy as he was when we were first married fifteen years ago.”

My patient corroborated all she had said, stating that he was now quite happy in his job, and didn't want to leave it.

That was in 1911, and I did not leave the station till November, 1912. In that time I saw him occasionally. He had some slight relapses, but, in six treatments spread over several months, he became and remained perfectly well.

In April, 1915, while I was a prisoner of war in Germany, I had the letter from him saying that he had never left India, and although he was disappointed at not having been sent to the front, he had never looked back since I had treated him. He had in effect four years of cure, and had been able to do his job well.

Chronic Constipation Cured by an Impression made on the Mind

MY OWN CASE

Many diseases can be cured by strongly impressing on the mind of the patient the idea "You will get well."

From 23rd August, 1914, the day I was wounded, to 8th April, 1915, I never had a motion without an enema.

For the first ten days after my wound I lived in a Belgian farmhouse. As it was impossible for me to undress, and there was no one to set the fracture, I took by the mouth large quantities of morphia, partly to soothe the intense pain, and partly to prevent defæcation. For those ten days I was

absolutely constipated—and correspondingly distended. Later, on arrival at a Belgian hospital in Mons, I was treated by enemata, and evacuation was achieved with great pain and difficulty. After that, daily various strong purgatives were administered by the mouth with no result, and evacuation was achieved only by enemata. I often spent five to seven days without a motion. I was, of course, by this time extremely weak and emaciated. Flatulence was a constant and distressing symptom. My abdomen became distended and painful to such an extent that I often screamed in agony. The evacuations as the result of enemata were always accompanied by extreme pain. It became essential to give me enemata every third day. Nothing else had the slightest effect. All this time I had a large suppurating wound in the right thigh, and I was reduced practically to skin and bone. Eventually I was transferred to the English Ambulance at Mons, which was maintained inside the German lines by the Hon. Angela Manners, by permission of the Germans. In passing, I would like to pay a tribute to this English lady who by her skill and courage saved the lives of 102 Britishers whom she nursed in those days. Nothing I could say is adequate thanks to her.

Suffice it to say that on my arrival at her Ambulance, it was decided to operate on my leg in an endeavour to clean the wound and get the fragments of the bone into position. Mr. J. Driberg, of the London Hospital, who was the medical officer

in charge, did the operation, but owing to my weakened state I collapsed badly, and was kept alive only by repeated injections of Saline Digitalis and Strychnine. I owe much to his skill and untiring kindness and efficiency on my behalf. I owe my life to the care that Mr. Driberg, Miss Manners, Miss Thorpe (a London matron) and Sister Beatrice gave me.

I began to recover, but the constipation continued, relieved only by enemata, which were administered every third day.

On 16th November, 1914, I was transferred to Crefeldt, Germany. The operation wound was still septic, the fragments had again separated and I was emaciated and extremely weak. Pain, constipation, indigestion, insomnia, exhaustion and despair inadequately describe my sufferings. Various operations were performed for the purpose of removing pieces of dead bone. The wound continued septic, and finally on 4th March, 1915, amputation was performed on the upper third of the right thigh. Right up to 8th April, 1915, from 23rd August, 1914, constipation had been absolute, relieved only by enemata. On 7th April, 1915, I read in a book on Hypnotism, written by Forel of Zurich, that chronic constipation was frequently cured by suggestion. I had been practising suggestion myself for this, and had cured many minor cases of constipation. But prior to reading that article in prison, I had never thought of applying suggestion to my own case, a clear proof of my deplorable mental condition.

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As a doctor I realised there were the following factors against me :—

(1) I had been taking enemas for $7\frac{1}{2}$ months, and it would probably take me several months to break the enema habit.

(2) I had, over the same period, been taking an average of two grains of morphia a day to dull the constant pain. The action of morphia is to dry up the internal secretions, and morphia, therefore, tends to produce constipation. Note morphine paralyses the nerves of the digestive tract, and hence causes constipation.

(3) As a result of the constant use of enemata my intestinal muscles had become weak, and because of the sepsis I had become emaciated, and had no muscular tone worth talking of. Yet to secure an evacuation intestinal and abdominal muscularity are essential.

Somehow or other, Forel's article (it is too long to be given in detail here) *made an immense impression on my mind*. I began to think furiously : " Perhaps here, then, is a chance for me. My case is worse than any he relates ; but I wonder, could suggestion act on me in spite of the constant use of enemata, the morphia habit established now for $7\frac{1}{2}$ months and my real physical weakness ? " I went to sleep that night little expecting cure, but half hoping against hope. (I had to have an injection of morphia to get to sleep.) My reason argued, " This won't work for you ! " My imagination clung to the apparently vain chance, " It will ! "

Next morning about 10.30 I had an inclination to defæcate. Half an hour later I had a motion for the first time in $7\frac{1}{2}$ months without an enema. The last motion had been two days before, following an enema treatment.

I could not, however, believe I was cured, and so, day after day, I watched, expecting failure. The progress of events was as follows :—

I lived under the same conditions in the hospital at Crefeldt from the day cure started, 8th April, 1915, to 14th May, 1915, when I was transferred to the prison camp. I was confined to bed all the time, except for one hour per day, when I was wheeled round the garden in a chair. I could not walk. On being transferred to the prison camp I was still too weak to walk, and was wheeled round by my fellow-prisoners in a chair provided by the prison authorities.

This record is taken from the diary, still in my possession, which I kept while a prisoner of war. I took a careful note each day of my progress, all the time feeling, "This is too good to be true."

8th, 9th, 10th, 11th, 12th April. Normal motions.

13th April. No motion, and at once the idea came, "You can't be cured."

14th April to 23rd April. Normal daily evacuation.

24th April. No motion.

25th April to 28th April. Normal daily evacuation.

29th April. No motion.

30th April to 2nd May. Normal daily evacuation.

3rd May. No motion.

4th May to 10th May. Normal daily evacuation.

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11th May. No motion.

12th and 13th May. Normal daily evacuation.

14th and 15th May. No motion. (On 14th I had been transferred from the Hospital to the Prisoners of War Camp).

16th to 18th May. Normal daily evacuation.

19th May. No motion.

20th to 23rd May. Normal daily evacuation.

24th May. No motion.

25th May to 30th May. Normal daily evacuation.

On this date I gave up keeping a record, feeling certain that "something" had cured me in spite of well-recognised and real physical difficulties. To-day, November, 1938, I am still well. And since improvement could be definitely traced to the day after I had read Forel's article, I was forced to admit that I had been cured as the result of *the impression which that article had made on my mind*. From that I argued: "If an impression made on the mind of a man in my weakened physical state can actually make my intestinal tract function normally again, there must be more power in a mental impression than I have ever realised. Surely if I can only make a strong enough impression on sick people, I can do at least something to improve their condition." Acting on that principle I have since that day cured many cases that in my early years as a medical practitioner I should have regarded as hopeless.

How was cure achieved? In my case by reading Forel's article. He explained at considerable length

that if the idea "You will have a normal motion every day" could be got into the mind of a patient, this very often cured him, when other remedies failed. He supported this statement by relating in his book exactly how he had got the idea to work in the case of a lady who had consulted him. She was cured in a remarkably short space of time.

Reading this account, I became fired with the idea: "If she was cured, why not I?" and though my reason told me (and truly) that my case was worse than hers, the idea took hold of me too, and worked successfully as I have described.

Insomnia and Morphia Habit Cured by Suggestion

PRISON, 1915

I had suffered ever since I received the wound on 23rd August, 1914, from severe and constant pain with resulting insomnia.

Relief was secured only by hypodermic injections of morphia $\frac{1}{4}$ gr. to $\frac{1}{2}$ gr. No smaller dose had any effect on me, and I took an average of 2 grs. every 24 hours for $7\frac{1}{2}$ months! After a few months I began to realise that I was relying on the drug. I well knew the dangers of so doing, but I was far too weak even to try to break the habit. At times the nurse in charge gave me the injections, at others I did so myself. It was the practice to leave a syringe ready loaded at my bedside each night in case I wanted it. When the cure of constipation started, I began

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to wonder, "Can I break this morphia habit, as already I appear to be breaking the enema habit?" I have said that a syringe with morphia was left at my bedside each night. If ever that syringe was not in its place at its usual time, I worked myself up into a frenzy of fear lest it should be forgotten. Often I literally sweated with panic if it were half an hour late.

On the other hand, I noticed that once or twice, after it was put there, I had gone to sleep, *for a short time*, without using it. Knowing it was handy, if required, had made me easy in my mind. But I had never once gone through the night without at least one injection.

Some time after I began to have evacuations without enemata, between 20th and 23rd April, I felt in rather better health than usual, and one night determined to try if I could sleep without the morphia, suggesting to myself I *could* do so. To my astonishment I had a very comfortable night, but next day a good deal of pain and the usual injections. That night I determined to try again, only to lie awake in agony all night long. But by luck more than by courage I did not give myself the injection. I tried to persuade myself, "The morphia is there if you really want it, but you've done without it once, and you'll succeed again."

For the next three or four nights I worked on these lines. I had morphia by day—and badly I needed it. I had agonising pain by night, but somehow managed to keep off the drug. I was very nearly

in despair, when at last on about the fourth night, I dropped off to sleep. I slept all through that night and for several hours the next day.

From that night on, though I still had the syringe always ready beside me, I took no more morphia by night, and was able to do with ever-decreasing doses by day. And I slept better.

By the time I was transferred to the prison—14th May, 1915—I had given up the morphia completely, and, though I still had pain, the delight at my emancipation more than made up for any suffering. I had rid myself of a habit well-established for several months. I had got good sleep without the assistance of morphia.

Note, the cure of constipation started on 8th April, and continued, although I still took morphia up to 20th or 23rd April.

I have indeed never experienced any of the delights which the morpho-maniac is reputed to enjoy.

My recollection of the days when I was a slave to the drug are anything but pleasant. I remember agonies of pain, followed by oblivion, from which I woke to a sense of misery, doped and nauseated, the cure only a little better than the disease.

Fear of a Vague Unreasoning Nature, the Product of the Imagination

The following is an account of a vague, unreasoning fear from which I suffered, and how I cured it.

On my return to England in 1915 I began work before I was really fit to do so, and in the early part

of 1916 developed a severe dental abscess. It became necessary to remove in pieces a badly-decayed tooth, and with it portions of dead bone from the jaw, which had also become affected. I was at the time barely 8 stone in weight, as against a normal weight of 12 stone. I had many worries, chiefly financial, in addition to my physical disability. Depression and physical weakness were once again my portion.

I lived in a small flat, and when retiring for the night I had to put out the light in the passage, and walk in the dark to my bedroom. It was a matter of ten steps only, but it spelt an eternity of fear to me just then. So worried did I get, that I kept on putting off the time for bed, and frequently remained up till 1 or 2 a.m. I had become terrified of that short journey. At first it was just a vague fear of the dark. Later on I began to think there was something following me. Later still this thing took a definite shape. It seemed to be a man dressed in red doublet and hose, and carrying a large axe crooked in his elbow. The details were distinct up to the shoulders, but I could see no face. But what I saw was enough to paralyse me with fear. My reason told me I was a fool, that there certainly was nobody following me, that indeed no one would come to my flat so dressed, in the twentieth century ! I realised fully the whole thing was the product of my imagination, but my terror continued none the less.

For after a while, terror, abject and complete, was the only way to describe my state. All through the days I dreaded the approach of night, and when

night came the terror was magnified a thousand times. I began to think this unnatural stranger was haunting me, and planning my destruction in some horrible manner. On other subjects I could reason clearly, but when I found myself in that dark passage, a cold shiver of fear ran down my spine. I suffered bodily as well as mentally, felt weak, nervous, afraid, wretched. The fear got worse as time went on, and I began to think I would never get rid of it. At last, in desperation, I sat down to try to think out a solution. It took two or three days of hard thinking to determine what to do. I give you here briefly the lines on which I worked. *I faced the facts.* First, I fully recognised that I was in a very low state of health, both physically and mentally. I had no energy and very little interest in life. My resisting power was at a low ebb. And I saw quite clearly that as a result of this I was, so to speak, painting a mental picture of a man with an axe that terrified me. I was painting with a mental paint-brush ; that is to say, the picture was an unhealthy product of my mind, and the more I thought of it the worse it became. It was the product of thought. My mind, unhappy at my actual condition, focussed on the idea of tragedy, and this picture was the result. I argued : If by thinking of unpleasant things this picture is produced, possibly by thinking of pleasant subjects another picture might be produced in its place. If I *could* think of something peaceful, perhaps this picture would fade away *for want of thought to feed it.* And I racked my brains to think of something

peaceful, to find some memory of peaceful times gone by on which I could concentrate. Many pictures arose, only to be rejected as useless : memories of happy days when I hunted, rowed and boxed, successes in various phases of life. I felt—"Of what use now are these memories? Those days are gone." Such memories failed to inspire me ; they gave me no hope of cure. Until at last one memory arose and held me. At home in Ireland I remembered my father's house, the river, the avenue, the Kerry hills in the distance, and standing out as the essence of all that was peaceful, a memory of Kerry cows. They stood always in a paddock beside the avenue, contentedly chewing the cud, peace personified. I reasoned : If only I could think of that picture when I am in that dark passage, if only I could *fill* my mind with it, perhaps then there would be no room for the other. That night I started painting the new picture. As soon as I put the light out in the passage, I deliberately thought of those quiet Kerry cows. At first I found the other picture forcing its way into my consciousness. It was as if I darted from one to the other, peace and tragedy alternating. I was like a man who looking to the right sees a pleasant prospect, only to be pulled back sharply to the left by an unpleasant reality at his elbow. For three nights I worked on these lines, and after that I was free. The man with the axe had gone, although he had been well-established in my mind for six or eight weeks before I started to tackle him ! Two months later I was able to realise—I did it quite suddenly

by accident one night—that I had remained free, and I have never thought of the old trouble since without smiling.

When I first attempted to cure myself, I did not expect cure for a long time, if indeed ever. I have told you how quickly it was achieved (in three nights).

This seems to prove that given average determination (yet, mark you, my will-power was at a low ebb when I started), a man can readily absorb healthy thoughts sufficient to blot out unhealthy ones, even when these latter have been long imbedded in his mind. *Three nights' work on healthy lines smashed the product of six weeks of unhealthy thought.*

You may say to me : “ Doctor, what you did, I could not do.” I answer : “ It is not necessary for you to do as much. I will show you an easier way out.” I cured myself by diverting my attention into another channel. I can divert yours for you, and with a little practice you will be able to keep up what I have started. I don't ask you to think of any picture. I can get your attention diverted in an easier way. I ask you to look at a sixpence which I give you. I say that when you look at it you will think and do as I suggest, and I suggest two things : your hand will lift up, and with it your fear, here and now with me.

You find your hand goes up, and next day you are able to report your fear has lifted to some extent. It has not lain so heavily on you. And so on each day it lifts more. You find that whenever you look at that sixpence, wherever you are, whether in my

room or at your own home, you get relief, because that sixpence has become associated in your mind with ideas of cure ; and when you look at it you remember what I said. It makes you think you will become well, and the reality of cure develops more every day. You begin to find you can rely on yourself and the sixpence, and the need for my assistance disappears. Your will-power is not interfered with at all (except that you find you can use it better every day !) but your attention is diverted into healthy channels. In your case, as in mine, your imagination is first fired with the idea of success, and your will-power then takes a hand in guiding that imagination. Where, before, all your efforts of will failed to procure relief, now you find that same will-power, *aided by the imagination*, has produced cure for you.

And at the beginning you are not asked to believe. You are asked to test the truth of what I say. Then as you get the proof that what I say is true, you believe, and finally you become well.

Self-Consciousness

MY OWN CASE

Although I have had excellent health all my life, and enjoyed especially those games in which risk took a considerable part, I have, since the earliest days I can remember, been acutely sensitive and self-conscious. It is true that, as time went on, I overcame it to a great extent. But every now and

then, if I were for example worried over any difficulty for a long time—and I have had many difficulties—I became self-conscious, afraid of what people thought of me, felt I was an imposter, was not as strong as I looked, that I was a fraud, a sham, a fool. These thoughts cropped up on the most absurd pretexts, and once in possession, they ruled my mind for a longer or shorter period as might be, only to fade as inexplicably as they had arisen. When well again, I saw the absurdity of such moods, but, when in them, reason and will-power seemed of no avail. I seemed incapable of reasoning or using my will-power at such times. Yet, in my own small sphere of life, I had achieved a considerable amount of success. I was Captain of my University rowing and boxing, I sculled, hunted, pig-sticked, and up to the time I lost my leg in 1914, was noted for my physical fitness and general cheerfulness of disposition. Thank heaven, I still possess a fair share of the two last-named qualities! Yet to give an idea of how I suffered at times :—

In 1912, I was attached to a Brigade of Gunners in India as Medical Officer. I was then 30 years of age, and in perfect physical health. I was winning races at the Regattas, and had won the West of India Boxing Championship. Because of my knowledge of rowing I coached the Gunner Officers, and at boxing I coached the men. The Officers' Eight were only beaten in the final of the Eight-Oared Race, and of the men I coached, four won their fights at the West of India Championship Meeting. I was

on excellent terms with all ranks, and in excellent health myself, when, one day the idea came into my mind: "You are a doctor, you ought not to be masquerading in the clothes of a soldier. Instead of a Sam Browne belt, an officer's uniform and a sword (which it was compulsory at times for *all* officers to wear!) you ought to be dressed in black and carrying a stethoscope hanging round your neck. You're only a pretender. They're all laughing at you!" To such an extent did this absurd idea upset my mind, that I applied for three days' leave to get away and think what I should do. When I came back I realised I had been a fool. My brother officers were all good friends of mine and showed it. Yet from time to time, in spite of my reasoning, just such thoughts cropped up, sometimes when I was feeling run down for any cause, at other times when I was apparently in the best of health. And perhaps the strangest thing about this condition, in myself, is the fact that, even while I suffered, I was often able to cure others afflicted with similar moods. As I have said, I learnt sense and control as time went on, but some time after the war I got a bad attack, and I will relate here to you how I cured it.

I was living in London, and in the summer I took a house on the river for six months. My idea was to live there, and come up to town each day to work. I particularly wanted to scull at some Regattas and get really physically fit again. As things turned out, everything went wrong. To begin with, I was very hard-worked, and the rail journey, an hour and a

half each way, proved a bigger strain than I had expected. My sculling had to be done between 7 and 8.30 a.m. and at night between 7 and 9. I had looked forward to having my friends down each weekend to stay with me. The first friend who came, died suddenly in my house of heart failure, an hour after he entered it. That alone cast a gloom over everything, and then, for three months, it rained practically every day. Instead of benefiting by the change, I became run down in health, and finally, utterly tired out, I gave up the house after a three months' stay and returned to London.

Life seemed again a failure. I lost all interest in things in general, worked hard all day, but enjoyed nothing. I went nowhere, avoided my friends and shut myself off from everyone I could. Although I was every day curing people of similar conditions all this time, I could not seem to do anything for myself. I felt that I was no good.

When this condition prevailed for some nine months, I received an invitation to a dinner-party which I felt I was not in a position to refuse. To have done so would have given considerable offence in quarters where I was far from desiring to do so. But I felt, "If I go there, I shall be a wet blanket." I knew who the guests were to be, one of them a famous V.C., another a big-game hunter, a third a famous sailor, and so on. Two distinguished public speakers who were to be present were not the least of my difficulties!

With nine months of practical isolation to reckon

with, I thought : “ How can I hold my own with these men ? I shan’t have a word to say, and I shall ruin the whole party.” However, go I had to. When dressing that night, I prayed for some accident to happen, for anything that would give me an excuse to keep away.

In despair and utterly unbelieving, I did suggest to myself all the time as I dressed : “ You will be at your ease when you get there, you’ll find something to say, you will be all right. ‘ Think that you can and you will.’ ”

It all seemed so much meaningless gibberish ! *Though I knew the same ideas had helped me to beat depression in prison in 1915*, my reason assured me, “ You’ve nothing to talk about, you’re no good, you’ll spoil everything.”

With these opposite ideas in my mind, I started for the fray, still devoutly hoping that, at the last moment I could get out of it.

Nothing of the sort happened, and I arrived ten minutes late !

It is not possible here to go into detail, but I found to my astonishment that, in a few minutes, I was at my ease, that as the dinner went on I became more so, conversation became easier and I felt I had found my feet again. Incidentally I may say it was not due to the excellent wine provided, for I drank sparingly ! The conversation around me was brilliant, and at first, I knew I was not holding my own in it. But the feeling “ You’re no good ” had gone, and in its place I found myself

cool and collected. As time went on, I took my part and thoroughly enjoyed my evening.

Next day I reviewed the position, and summed up as follows : " You got through last night in spite of doubts and fears. You need not be a fool any longer. You can go out again now, and take hold of life." And from that day I did so. The old mood had gone, I felt better the more I tried, and the effort to try became less. And what started me ? I suggested in essence to myself, " You can succeed and you will do so."

And to-day my motto is, " Whatever you *have* to do in your particular line of life, that you can and will do happily and efficiently. Think that you can and you will."

Often, when I am up against a more difficult proposition than usual, that idea gets a bit of a shaking. I nearly lose it, but I've never quite lost it, and it has worked for me to a far greater extent than at first I thought possible. " Ideas are things." They can produce results. Keep on putting in the idea " You can succeed," and it will help you more than you realise. To me the very fact that it has often demanded considerable effort on my part is now an asset to me. I realise that, in spite of much doubting, I have always found I need only persist (grimly at first, if you like) and I " got there."

Having given you my experiences of the action of suggestion in my own case, I propose now to put before you the history of a few cases I have treated

by suggestion. In some, the mental state was obviously the predominant factor ; in others, the physical condition ; in others still, it was hard to say which was the most important, but in all, improvement followed as the result of suggestion. Where physical methods had failed, mental methods succeeded. Again, however, I wish to emphasise that suggestion treatment is not a panacea. It will not *cure* malaria, nor typhoid, nor fractures, nor cancer, to mention only a few human afflictions. But it can cure pain, even in many physical conditions ; it can secure sleep and, by the very relief of pain alone, it can and does improve the resisting power of the physical organism. It is only a help in many conditions, but it is a much more powerful help than is yet understood. My conviction, based on experience, is that it is a help in all chronic conditions of disease, for the simple reason that, if any disease goes on long enough, " it gets on the patient's nerves," and he begins to think, " I've been ill so long, I can't get well." That thought definitely affects his physical condition and retards his recovery.

Put into such a mind the idea " You will get well," and it gives new hope, and with it new force, to the patient. The will to live is a powerful factor. It does not always produce recovery, but it often does so.

However, to leave theories and come on to facts, I give you the following cases in which cure was achieved by suggestion.

Cases in which the mental state was obviously the predominant factor :

(1) Depression with insomnia in a prison camp, Crefeldt, Germany, 1915.

(2) Dread of thunder and lightning, Crefeldt, 1915.

(3) Fear while motoring.

(4) Business worry.

(5) Insomnia due to mental states. Another case of worry.

Cases in which the physical condition was obviously the cause :

(1) Sciatic pain due to wound of sciatic nerve, Crefeldt, Germany, 1915.

(2) Pain of fractured thigh.

(3) Pain, following operation for gunshot wound of abdomen, with injury to 4th lumbar vertebra cured by suggestion.

(4) Chronic constipation, Case I, Case II.

(5) Insomnia in bubonic plague.

„ in broncho-pneumonia.

„ in dental abscess.

Cases in which it was difficult to decide whether the physical or mental condition was the predominant factor at the time of treatment :

(1) Chronic alcoholism, Case I, Case II.

(2) Baldness, partial, following physical injury and shock.

(3) Insomnia, constipation and indigestion.

(4) Asthma, horse asthma and ordinary asthma.

In all three classes, suggestion succeeded, and these are only a few out of many cases treated. The most interesting are indeed too long and complicated to put before the average reader.

CASES IN WHICH THE MENTAL
STATE WAS OBVIOUSLY THE
PREDOMINANT FACTOR IN PRO-
DUCING THE DISCOMFORT.

- (1) DEPRESSION IN A GERMAN PRISONERS OF
WAR CAMP, 1915.
- (2) LIFELONG DREAD OF THUNDER AND
LIGHTNING.
- (3) FEAR WHILE MOTORING.
- (4) BUSINESS WORRY CAUSING INSOMNIA,
DEPRESSION, LACK OF CONFIDENCE AND
INABILITY TO CONCENTRATE PROPERLY.
- (5) INSOMNIA DUE TO WORRY.

CHAPTER III

CASES IN WHICH THE MENTAL STATE WAS OBVIOUSLY THE PREDOMINANT FAC- TOR IN PRODUCING THE DISCOMFORT

Depression in a German Prisoners of War Camp, 1915

GERMANY, 1915

THE following is the case of a Russian officer, age 33, treated by suggestion while he and I were prisoners of war together in a German prison camp during the summer of 1915.

He gave me the following history :—

“ I was serving with the Russian Army in the Russo-Japanese war, and was captured at the fall of Port Arthur in 1905. Before that time I was always happy and contented. In captivity I became irritable ; I suffered from constant melancholy and physical fatigue. Since then (1905) I have completely lost interest in life. I seek solitude, and, at the same time, I dread it. Now, in order to get sleep I have recourse to narcotics (morphia, which he obtained by bribery).

“ When war broke out between Germany and Russia, I felt I had a chance to make good. I

volunteered for service with the Army Corps selected to invade East Prussia, only to find myself again a captive after the battle of Tannenberg, 1915.

“ My cup of misery seemed full, and I determined to escape. I bribed a German civilian to assist me, and as I was walking out of the prison gates, disguised, I was again captured. I and two others, who had made a similar attempt, were thrown into close confinement for six weeks as a punishment. We were allowed out for one hour’s exercise per day in a small yard.

“ I have just finished serving that term, and have now been again four months a prisoner of war.

“ I cannot sleep at all ; I am miserable, nervous, depressed. I worry, wondering what has become of my family, and I see no future before me now. I have no appetite and I am utterly broken in mind and body.”

As he spoke, his story was punctuated by violent hysterical sobbing, and he was, indeed, in a pitiable state : emaciated, clothed in rags, a shadow of a man. He spent his days in a secluded corner of the prison, hiding from his fellows. If one tried to speak to him, he slunk away, cowed. If one persisted, he burst into tears. All night he walked up and down his dormitory, unable to sleep, miserable, restless. He did not come of himself to me for treatment. He was too broken to make even that effort. He was forcibly dragged up in front of me by two of his brother officers whom I had cured. He could

speaking no English, and I no Russian, so I had to enlist the services of another Russian officer, who spoke English, to act as an interpreter. I explained, through him, that while it was quite impossible for me to alter the conditions that existed and were the cause of his trouble, I was quite certain I could alter the impression they made on his mind. He expressed, with sobs, his utter disbelief in my ability, but eventually consented to let me treat him. I held up a ring in front of him and said that if he would devote all his attention to looking at it, I could hypnotise him, and, once hypnotised, could inject or instil an idea into his mind that would neutralise the effects—produced on his mind—by his misfortunes. I had not the least intention of hypnotising him, for I did not think it necessary, and I never did, in fact, hypnotise him. But I felt that if I merely said I could “suggest away” his symptoms, he would be quite unable to believe me, and as a result would be unable to co-operate, whereas, if I used the term “hypnotism,” that would, I felt, make him prick up his ears, and give me his attention, which was all I wanted. To make a long story short, he readily responded to the treatment and in five sittings was cured. As he said himself: “In these past days, 14th to 19th June, 1915, I have been hypnotised by the English doctor. At the first séance, my sleep came back to me, and since the third, I eat with appetite. As a result of these experiences I believe I am restored to health.”

My treatment consisted of suggesting to him :

good sleep by night, a healthy sense of relief, and peace in his mind by day, good appetite and digestion. (Suggestion *can* act on the intestinal tract.) To get these ideas into his mind, I got him to look at my ring till his eyes closed, assuring him that once they did close, he would be unable to resist the entrance of these healing suggestions into his mind, and once in, his mind, and his body also, would benefit by their introduction. From beginning as a sceptic, this patient had, in a few days, developed an immense belief in suggestion. He found that every suggestion I gave him acted, but he attributed his improvement to some influence *I* had, and felt that he himself could never develop the necessary power. He felt I could keep him well, but that if ever he lost sight of me, he would relapse. As a matter of fact, it was his own mind that had cured him all the time. My part consisted in getting the right idea into his mind. Once in, his mind had made use of it. However, he would not believe that he could maintain himself in health if I left him. I knew at that time, June, 1915, that I was soon to be exchanged to England. (As a matter of fact I was exchanged on 30th June, 1915.) It was, therefore, most important that he should be shown how to keep fit after I had gone, and so I adopted the following method : I explained to him that he had already found that by looking at my ring he was thrown into a *suggestible state*, and when in that state absorbed any idea of health I presented to him. Further, that the ideas introduced then produced peace of mind and

sleep for him after. I then told him that I could show him how to produce the necessary suggestible state of mind himself by looking at a gun-metal watch which he wore. I explained that I could link up that watch in his mind with the same healthy ideas that I had already and successfully given him. I assured him that every time he looked at the watch, it would *automatically* start in his mind a healthy train of thought, which would replace the depressing thoughts and draw him away from them. I continued : “ I well know that there is good *cause* for you to be depressed, and your depression is the *result* of definite, real conditions. But depression itself is a *mental state* no matter from what cause arising, and I have already been able to alter your mental state for the better. I will show you now how to do it yourself. You will remember that when you first looked at my ring you never expected that by so doing your mental state could be altered. Yet it has been most pleasantly altered, and every time you look at it now, you again experience a delightful feeling of relief which lasts for some time after. Why? Because the sight of it reminds you of former successes. That ring is associated in your mind with ideas of cure, and it is for that reason you get relief every time you look at it. The sight of it will always bring up pleasant ideas.

“ Well, I am now going to get that watch of yours associated in your mind with ideas of cure, and every time you look at it, it will work just as well as my ring worked. If you look at the back of your

watch now, *I* will throw you into a state of mental calm, and ever after, the sight of it will produce in you a similar calm state, whether I am there or not. Don't bother to believe me. Look at the watch ; your eyes will close, you will get five minutes of peace, and open your eyes when the five minutes are up. All this you will do automatically, that is, without conscious effort on your part."

He did as I requested then, and found his eyes opening in almost exactly five minutes. As a further test, *he then suggested to himself* that by looking at the watch *he could secure five minutes' rest*, and to his astonishment did so without any suggestion from me. But, having done so, he turned to me and said : " Ah, doctor, it is all very well, but you were here with me all the time, and that makes a vast difference. I could never do this by myself." I agreed that my presence was a help, but denied that it was an essential. I assured him that by this method, given a little practice, he could secure peace of mind wherever he was and without further assistance from me. He then told me that he was, of course, infinitely better but that his one trouble now arose at 5 p.m. regularly every day. Whereas, before coming to see me, he had been depressed *all* day and every day, slept poorly, and scarcely ate at all, he now slept well, had good appetite, and digestion and was *At* till 5 p.m. when down came the depression and it lasted till he went to sleep at about ten o'clock. I told him that the next time this five o'clock attack appeared, he would

beat it in five minutes if he looked at his watch. I did not see him for four days, and then he reported as follows : " You, doctor, treated me last at 11 a.m. on 19th June. I was splendid all day till about five o'clock, when down came my depression. I forgot all about your instructions, and remained depressed till about 10 p.m. when I went to bed and to sleep. Next day, 20th June, I felt splendid until about five o'clock, when, almost to the minute, down came my depression again. I must have been depressed for ten minutes, when I suddenly remembered your instructions. I took out my watch and looked at the back of it, not believing it would do me any good. I found myself getting drowsy and my eyes closed. I remained quite conscious but began to feel relief almost at once, and some minutes after, it may have been five or ten, I opened my eyes and found the depression had gone. I can best describe the relief by saying that I felt as if an actual physical weight had been lifted off my mind. Although I fully expected the depression to return at any moment, I felt perfectly splendid for the rest of the evening and again slept well. Yesterday, 21st, I was again splendid till 5 p.m. when once more down came the depression. This time, I deliberately tested myself. I noted the time and then looked at the back of my watch. Almost at once my eyes closed, and in almost exactly five minutes they opened again, and I found the depression had completely disappeared. I now feel quite certain that I can beat the depression myself."

I left the camp on 30th June, 1915. In December, 1915, I had a post-card from my friend to state he was doing well, although prison conditions were, if anything, worse than when I left. When the war was finished I met in London an English officer who had been with us both in prison, and asked him how my patient was. He replied : " For two years after you left the camp X was still with us. He was never depressed, and was indeed the life and soul of many a party. Some time in 1917 he was transferred to another camp, and I lost touch with him, but while he was with us, he was well." The last news I had of this patient was a letter from Paris in March, 1923, to say that he had been exchanged in 1917, had fought with the armies of Denikin and Wrangel against the Bolsheviks, and eventually had been compelled to emigrate to France. There he had been able to obtain work in an office. At the time of writing he was in receipt of a small salary and had the prospect of improving his position. He was on the verge of melancholia in 1915, and up to 1923 he had not toppled over the precipice. How did I cure him? By getting the idea " You can succeed " into his mind. That hope, once introduced, acted at first as a lubricant, and later on as a powerful driving force for him. I explained to him, " I look on your mind as a machine. A machine well oiled will run well. Just at present all your mental machinery is clogged with the grit of despair at your condition. I can get that grit out. Already you are realising this. Once out, all you have to do is to oil the

machinery, and it will run well again. What's this oil I'm talking about? The best oil I know of to lubricate the mental machinery is the idea 'I can succeed.' Drop that idea into your mind quietly every night, and you'll find yourself getting better. After all, when you get down to bedrock, what have I been doing all this time? Just getting that idea in, and you have found yourself getting better every day. I have been flooding your mind with the oil, 'You will get well again' and the grit of despair has been washed out more and more each day. But as you go on you'll find out something more, namely, that the idea of success will act not only as a lubricant, but as a driving force in your life. For remember, *ideas can produce results*. Aeroplanes, motor-cars, steam-engines, are all the products of ideas, originating in the minds of their respective inventors. And if you apply to yourself the idea 'I, too, am going to succeed'—you may not indeed finish by being a great inventor! but you will at least be helped thereby to get over your own difficulties. You ask me *how* does the idea work when it gets into your mind?

"Well, I can't tell you positively, for I've never seen the inside of a mind, but my own belief is this: that once the idea gets in, it sharpens the mental faculties, makes one sit down and think on *positive lines* (as opposed to negative), puzzle out, work away, and, as long as it lasts, the individual keeps on thinking and trying. If it dies out and he begins to think 'I can't,' he begins to give up. But the man

who keeps on thinking and trying ends by finding some way out of his difficulty. The final solution may not be the one he first thought the best, but somehow or other he ends by 'getting there.' I don't mean to say that by thinking *alone* you can succeed. First think 'You can' and then, using your reason to guide you, act on that assumption. My own rule is this : for since I have discovered in this very prison that I have beaten my own depression by suggestion, I have made a rule for myself :

"Whatever I have to do in my particular line of life, that I can and will do. If I am up against a proposition where failure means a bad fall for me, I sit down and say to myself, 'I've been up against more than one big fence, and thank Heaven, I'm "going" still in spite of it. I'll beat this difficulty too.'

"But don't mistake me. Never let the idea 'I can succeed' make you arrogant. If you're arrogant you're weak. Don't forget to take your hat off to those in authority, to God, to the King, and to the women. But don't let anybody knock it off your head."

And up to to-day (1938) I have found nothing to invalidate that line of action.

Fear of Thunder and Lightning of Lifelong Duration Cured by Suggestion

The patient was a Russian officer whom I treated in the prison camp at Crefeldt in Germany in 1915. His age was 40, and in spite of this particular dread

he was, so his fellow officers informed me, a brave and capable officer. He came under treatment in the following manner :—

One day, as I was wheeling myself along a corridor, I saw him sitting on a box. Just then a door banged violently some way down the passage.

He shot off that box as if he had been hurled out of a gun, trembled violently all over, holding his head in his hands and moaning in great pain. I went up to him and explained : “ If you are startled by such noises, I believe I can cure you.”

I have before me the following notes on his case, which I took in that prison camp.

“ Every noise, even the smallest, makes me shake all over, and it takes me a long time to get control again. . . . I sleep very badly. I have little will-power left. . . . I have a most terrible dread of storms . . . when I am alone in my room, I am terrified. . . . Bright light always upsets me. If you can cure me, I shall be ever grateful.”

I explained to him : “ I can put you into a hypnotic state and, while in that state, remove all your fears. Afterwards in your waking state, the same conditions that terrified you before will no longer affect you.” I did not hypnotise him. I got him into a suggestible state of mind, that is, into a drowsy, quiet state, and then proceeded to assure him that his fears would leave him. As he appeared to be very comfortable, I then went a stage further with him than I usually do with patients at the first sitting. There was in the room where I treated him

a large zinc tub full of coal. I had attached to me as servant an R.A.M.C. English orderly, who was in the room with me at the time. I gave this orderly the shovel used for putting the coal on the fire, telling him that when I gave him the word, he was to let fly with the shovel at the zinc tub and make as much noise as he could. (He thoroughly enjoyed the joke !) Returning to my Russian friend, I told him : " In a few minutes now, you will hear a loud and unusual noise, but it will not in the least affect you." I then left him in suspense for five or ten minutes, and at the end of that time gave the word to my orderly. You can be thankful you are spared the din that followed.

At any rate it did not make the slightest impression on my patient. When it was over I asked him how he felt. Drowsily he answered, " I heard it all distinctly, but it did not bother me at all." I replied, " You now have proof that, while in the hypnotic state, noises do not affect you. From now on, they will not affect you either in your waking state." I let him rest for a few minutes and turning once more to the orderly, I gave him the following instructions : " In a few minutes I shall wake this officer, and talk to him in the passage outside. I want you to try to frighten him, by making any sudden and terrifying noise you can think of while we are talking." I little knew the ingenuity of that English soldier ! He left me with the smiling assurance that " he'd do his best " and walked down the passage. I then woke my patient and talked to him,

making sure that his back was turned to the direction in which my orderly had gone. Suddenly there was a piercing shriek, and a sound of broken glass, but no sign of my fellow conspirator. He had slipped into a room off the passage and flung his boot through one of the windows!! A moment later, he banged the door, and engaged in a terrific struggle with another orderly, whom he had brought in as a helper! Knowing nothing about this, I dashed off in my wheeled chair to find out what the row was about, followed by my Russian friend, who was perfectly unmoved! While I was endeavouring to find out what on earth had happened—for I was myself genuinely surprised—the Russian tapped me on the shoulder and said: “You know this is wonderful, I never minded the noise at all!” I had achieved what I was working for. He was not frightened, whereas before he would have been terrified, as he expressed it himself, and I assured him noises would bother him no more. Some four or five days later he was able to report his nerves steady and his sleep good.

It was then that he asked me, on the same lines, if I could cure him of a dread of thunderstorms. I felt bound to admit to him that, while I could reproduce most of the noises that he heard in the prison, it was quite beyond me to produce a thunderstorm with lightning attached! but that, nevertheless, I felt convinced I could prevent him from being terrified by such storms. Here is the translation of a letter he wrote to me some time afterwards.

“ CREFELDT,

“ *June*, 1915.

“ From the first day of my consciousness to life, and up to the present, I have felt an inexplicable and incomprehensible dread of thunderstorms. The rolling of thunder and the flashing of lightning, which are a wonderful music and a magnificent spectacle to many, always plunged me in melancholy and put me in such a fright, that nothing seemed worth while.

“ I had a premonition of an impending storm two or three days beforehand and was seized with a terrible dread. Although a sceptic by nature, I sought help from many specialists, but alas . . . I was soon convinced that all their means of assistance could not help me. All at once, I learned that many of the officers from our internment camp were visiting your séances. It had never occurred to my mind that this resource, untried as yet by me, could be of such benefit and help to me. I feel ashamed to admit that on first going to you, I scarcely believed in the possibility of a cure. After three séances, as if for a test, we had a thunderstorm and, to my great astonishment and unbounded joy, I ascertained that not even a hundredth part of my former malady remained. Returning home after the fourth and fifth séances, I somehow believed that you would kill my dread of storms. The last two thunderstorms were not a bit frightful to me, on the contrary, they presented an enchanting

spectacle, and as I have already said, this was quite foreign to my nature. . . .”

Providence had indeed been kind. The necessary thunderstorms had appeared ! During the first one (in fact while it was at its height), this officer had dashed across the barrack square from his room to mine to inform me (as a nerve-racking peal resounded) : “ *Ca m'est absolument égal,*” which being freely translated means, “ I don't mind that in the least.”

Fear while Motoring

In the case here described, fear was produced as the result of definite risks over which the patient had no control. In 1912 I was motoring in Ireland with a very nervous lady, aged 34, in a car driven by a mutual friend called C., who was a particularly reckless, dare-devil driver. We had to motor twenty miles to a race meeting. The roads were very greasy and there were no non-skid tyres on the back wheels. C. was determined to pass another car, containing the remainder of our party, which had started fifteen or twenty minutes in front of us. In his efforts to do so, he had no regard for safety. From the start we skidded violently at frequent intervals, and on more than one occasion nearly finished in a deep ditch which ran alongside the road. Eventually, we passed the other car (going round a corner at the time !). A few minutes later we nearly ran into a car coming in the opposite direction, and

only escaped a severe head-on collision by braking violently. As a result of the sudden application of the brakes, we turned a complete circle in the middle of the road. While getting straight, our friends passed us again, and C., undeterred, once more took up the chase. What with avoiding traffic, racing all out, and constant skidding, the lady in the car was almost prostrated. She and I both begged of C. to slow down, but nothing would stop him : he pursued the even (or should I say uneven ?) tenor of his way, deaf to all appeals. The lady was by this time very nearly a nervous wreck, but as C. provided our only means of transport on a lonely road, I said to her : " I cannot get any sense into this lunatic, but, if you let me, I'll steady your nerves. It is quite on the cards that we shall end in the ditch—if not in eternity. We shall certainly be lucky if we reach the racecourse with a whole skin, but getting nervous will not make things better, and I believe I can stop your nervousness." Telling her to lie back, I went on talking to her. She listened, not believing much, but after a while shut her eyes, saying : " I don't mind what happens now." A few minutes later we skidded violently. She did not move or flinch at all.

Some ten minutes later we skidded again, the car this time turning almost a complete circle in the road. She smiled quietly, saying : " That's all right—I know what has happened, but I am not nervous."

Eventually we got safely to the races, and on getting out of the car she laughed, saying : " I never

expected to get here alive, but I haven't been nervous since you told me not to be."

Later that evening we drove home again at the same reckless speed and she was quite free from all trace of fear. Some six months later she wrote : " You know how nervous I have always been, and especially about learning to drive a car? You remember telling me on that drive I'd never be nervous again? Well, neither have I been, and I've got a car of my own now and drive it well."

This fact was corroborated by her husband. This case illustrates well a statement I have often made to patients : " I may not be able to alter the conditions existing for you, but I can alter the impression they make on your mind." By all the laws of reason this patient was justified in being afraid ; there was a very real cause for fear ; but by impressing on her mind the idea ' This will not affect you ' she lost the fear. I believe here it was imagination that cured her. Her imaginative faculty got hold of the idea : " I'm not going to be afraid anyhow," and that impression, acting on her mind, removed the fear. Imagination is a two-edged sword. It can cut both ways. It can produce confidence just as illogically as it can produce fear. By no means should we let it rule us completely, but there are times, as here, when it will do more good for us than any reasoning.

The imagination guided by the reason will produce for us more success than the one or the other alone

can do, and the practical application of this fact consists in filling the mind with the idea :—

“ Whatever I have to do, that I can and will do.” With that idea in the mind we are in a stronger position to deal with life than those others who think only in terms of : “ It can’t be done.”

Insomnia due to Mental States—Business Worry

Many people are unable to sleep owing to worry. The worry may be due to real loss, *e.g.*, death of friends, loss of position, financial loss, etc., etc. Or it may be entirely the product of the imagination. Many patients tell me, “ I have no cause at all for worry, yet I do worry, and it keeps me awake at night. I imagine all sorts of terrible things are going to happen, and I can’t shake off these morbid ideas.” But whether the worry is the product of the reason or the imagination, we must realise that it is always a *reality* to the patient concerned. Take a man who is worried. To tell such a patient that his worry is all imaginary and that he must pull himself together, will do no good. He has already been doing his best to cure himself, without avail. I grant you that there are some who can, by an effort of will, throw off worry and secure sleep, but I am here concerned with those who cannot do so.

In *all* cases the important thing to remember is, that insomnia is due to the worry impression *acting on the mind*, from whatever cause the worry arises, and I have found that by acting directly on the mind

when such impressions exist, soothing impressions can be put in strong enough to obliterate the worry impression and thus secure sleep.

The procedure is to attack the worry impression where it lives, *viz.*, in the mind. I say to such a patient : " You suffer because of the impression in your mind. Whether I can remove the cause or not, I can remove the impression it has made, and that will result in sleep for you."

The following case illustrates this :

INSOMNIA DUE TO BUSINESS WORRY.—Patient, aged 47, male, consulted me in 192-. His history was that in 189-, on the death of his father, he became the owner of a business concern. It proved to be insolvent, and for three years he lived on the verge of bankruptcy, but eventually pulled through. Up to 1914 the business flourished, but it practically collapsed the day war broke out, as the trade was largely with Germany and Austria. 95 per cent. of the business was lost from the day war was declared. Undeterred by this, my patient took up Government work in his factory, and so well did he succeed, that he was very shortly making excess profits. The war over he again reverted to his former business and, when he came to see me, he was doing exceedingly well. So well, indeed, that with a capital of only £50,000, his commitments for that year were £550,000, *i.e.*, he had bought raw material to the value of £550,000. He had every reason to expect he could sell this at a profit, inasmuch as his commitments had been steadily

increasing each year, with resulting increase in profits to him. He was a clever man of business, but he was beginning to feel the strain.

This is the story he told me :

“ I have no reason to anticipate any difficulty in getting rid of what I have bought, but I am beginning to lose my nerve. The figure, half a million pounds, obsesses me. I feel I owe that much money. I can't sleep. I dread business interviews. I'm losing my personality. I have no confidence in myself. We are really a very small company, compared with other companies in our business. We have a capital of £50,000, our nearest competitor a million and a quarter, and our principal competitor, a capital of eight millions. If the others knew how small we are, they could undersell and ruin us. So far we have done wonderfully well, but if my nerve goes, we are done for. I am the pivot of our firm, I own most of the shares and direct the policy, and now I am losing my grip. My knees shake when I have a business interview, and I am tongue-tied. All night I lie awake thinking. I begin work at 9 a.m., and am generally working out problems all day and till past midnight. It is thirty years since I first embarked on a business career, and the strain is too much for me now. All my life I have been highly imaginative. Between the ages of 10 and 25 years, the mention of death always made me feel ill, and I frequently fainted at the sight of blood. When I was 32, while working up a business connection abroad, I got an attack of agoraphobia (dread of open spaces)

in the middle of a street, and for months after I was unable to cross a road. This was cured by suggestion eventually, and now only troubles me when I am very tired. If I could only keep my nerve for the next two years, I should be able to retire as a rich man. I know my symptoms are folly, but that knowledge does not cure me."

I assured this patient that, while I could not show him how to run his business, I could stop his nervousness, make him sleep and, by so doing, put him in a better position to do his work. He was very sceptical but consented to undergo treatment. He had an important business interview next day and dreaded it. I assured him he would sleep well and have steady nerves in the interview. Next day he returned to tell me he had had a good night and got through the interview without a tremor. "I was a bit nervous at lunch beforehand, but once in the room everything went as you said. The change is amazing, but will it be permanent?" I assured him it would. In the next twenty-three days I saw him six times. He continued to improve, slept well and found himself steady in all interviews. On the twenty-third evening, I was rung up to say that his factory was burned to the ground and he was faced with practically a total loss. (His property was very inadequately insured.) I went round at once to see him and explained: "Up to now, I have been able to quieten your mind in spite of real difficulties, and you have worked better as a result. I recognise that now you are up against a bigger proposition, I cannot give

you your factory, and it looks as if ruin were staring you in the face. Well, I can't alter those facts, but I can alter the state of your mind. What is it that makes you suffer in all this? *The frightful impression this loss has made on your mind.* I can act on your mind and put in another impression that will take the sting out of what you feel. I can steady your mind, and save you from becoming a mental wreck." He listened, though he did not believe. That night I gave him a very powerful sedative, and in the next twenty-one days, I saw him six times, suggesting always, "I can inject or instil into your mind the idea of quiet, and, by so doing, produce mental calm. This will prevent you from thinking of your worries at night, enable you to sleep, and thereby put you in a better position to tackle the difficulties of each day. I deliberately say that these ideas of quiet will work on your mind as massage would work on your body, freshening it and making it stronger. I know it is no good telling you to take a holiday and have a rest. You must keep at work, but if you will only do what I ask you, you will get sufficient rest and energy to enable you to work well. I am giving you in writing the suggestion : 'Read these lines, then count five and shut your eyes. You will get five minutes of absolute mental calm if you do so, and wake from it refreshed with a clear mind better able to do your work each day, even now in the midst of this turmoil.' When you have read this suggestion, shut yourself away from all callers for say ten minutes. During that time you will get the five minutes' rest suggested.

You know that if you swallow a sufficiently strong sleeping draught, it will exert at least some soothing effect on you. The medicine taken into your body acts no matter what you think about it. I tell you that when you read these lines, you will, so to speak, swallow an idea, *i.e.*, you will take the idea into your mind and that, no matter what you think, it will act there."

He replied : " Your ideas take some swallowing," and I answered, " Never mind, you'll find they will work."

I saw him six times in the next twenty-one days. During all this time he was working hard, trying to pull his business together, making long rail journeys, having many interviews, always working. But he slept well, and kept a cool head all day. Four months later he wrote to me : " All that weighed on my mind since I last saw you has since been complicated by a very bad slump in trade making business trebly difficult. The slump still continues and is even aggravated now. In all this hard and gruelling time, your advice and the practice of your methods (reading the suggestions and resting five minutes each day) have been of the greatest help. I don't know how I could have pulled through without them, and I am practising them daily. It keeps me quieter and less worried. It failed at times when things were very bad, but on the whole it got me through the worst time in my business career, and I think a worse time than most men have to face. . . ."

During those four months, I had not seen him. It was twenty-one months before I saw him again and I then saw him four times in one month. He reported that he had slept well and kept a cool head, but his difficulties were as bad as ever, and he felt a few new suggestions might be a help. I treated him, and there was again a lapse of four months, when I had this letter from him.

He wrote : " My affairs culminated in a catastrophe. I found myself unable to pay, and was advised by my solicitor to go into bankruptcy. I stood out against this, went round and saw each of my creditors personally and succeeded in getting an arrangement made that enables me to hold on to my business and carry on till better times come. It was a heart-breaking job, and one I could not have tackled before I went to see you, but I used suggestion and went through it without a tremor. It took me six weeks before I got everything settled, but I did so, without losing either weight or sleep." Three years and 10 months from the day I first saw him I heard from his wife that he was still well, though his business affairs were no better. In this case, by suggestion, the patient was prevented from worrying, and sleep was secured in spite of the real difficulties with which he was surrounded. It is interesting to note that while worry was eliminated, his ability to work was not impaired, but improved, and further that he learned how to employ suggestion himself with success.

1938.

Seven years from the date of our first meeting I met this patient again. He gave a dinner party to celebrate the fact that he was succeeding in his business once more.

Insomnia due to Mental States—Another Case of Worry

The following is another case in which insomnia was the result of worry :—

The patient, aged 38, male, a man of good education, consulted me on 28th December, 1922. He stated : “ I’ve been married eleven years and was ideally happy. I now discover my wife no longer cares for me, and we have decided to live apart. She is going to South Africa with the children whom I adore, and I have to go to America to take up a new job. I am utterly broken by it all. For nine months I’ve lain on my bed in misery, refusing to go out, or even see a friend. I have no happiness left in life, all my ideals are shattered. I can’t concentrate ; I doubt my ability to do anything. I am suspicious of everybody. I’ve lost all my old cheery humour. For the past year my life has been a nightmare of hell. I am unable to get any sleep at night for the past nine months or more. I lie awake worrying and I see no solution. Yet I must work to live, as I have no income except what I can earn. And how I shall hold my own in a new country (America) is beyond my conception.”

I assured him that though I could not alter the situation I could prevent him from worrying over it, and enable him to get good refreshing sleep at night. He was extremely sceptical, the more so as he could only give me six days for treatment. He was due to sail for America on 4th January, 1923, if he got well, though indeed when he consulted me, he thought seriously of refusing to go there, as he felt quite incapable of tackling any work. However, he consented to try what he called "the experiment."

I explained to him: "In order to cure you I must get you into what I call a suggestible state. If you look quietly at this sixpence which I put on the table in front of you, you will get into that state. Close your eyes when I tell you to do so. You will be quite conscious. You will not be hypnotised, but you will take in what I say, and to-night you'll sleep." I asked him a few seconds later to close his eyes and I suggested: "To-night when you go to bed, look at that sixpence, count five, and shut your eyes. That's all you need do, but you will sleep for eight hours and wake up feeling fit to tackle your difficulties. You will find now that here in this room you will rest eight minutes, and wake up feeling much happier even after this one treatment."

Six and a half minutes later he opened his eyes, saying: "This is wonderful. I don't know why it is, but I feel better already."

Next day, however, the 29th, he came in very depressed, saying: "Last night I believed implicitly that all you said would come true. I looked at that

sixpence ; I got myself deliberately into a most believing frame of mind, and determined I'd go to sleep. As I was doing the job myself, I thought it better to count up to 20 before I shut my eyes. And from 10 p.m. to 4 a.m. this morning I continued to do so without the slightest success ! After that I got a few snatches of sleep, but nothing to speak of. I'm sure I can't be cured." I pointed out to him that he had far exceeded my instructions, that he had deliberately tried to force sleep, whereas if he had only looked at the sixpence, counted five, and shut his eyes, he would have responded to my suggestion. I said : " Now that I have *once* got you to respond to the idea of rest by looking at the sixpence in my room, ever after when you look at it, a state of rest will be achieved. Don't try to put yourself into any state. Look at the sixpence and a state of restful sleep will follow automatically."

Rather bewildered, he left me. Next day he came in and said :

" I looked at the sixpence as you directed at 10 p.m. last night. I went sound asleep in a few minutes and never woke till I was called at 7 a.m. I feel splendid, and I've scarcely worried at all since I saw you yesterday. I had a lot of work to do ; fixing up my affairs, making a new will, getting my passport, etc., etc. As you know, I have very little time to get my affairs in order, but I'm feeling splendid. Already I feel quite different. I feel now I've got quite a prospect in life, and that I can tackle things and make good again. I can deliberate the

future calmly, where up to three days ago I was flying off at tangents, and where I'd lost all belief in everything, I now feel life still holds much for me."

And so the improvement went on. He slept well, got on with his work, and though fully alive to the position, worried no more. On 31st December he was kept awake by the noise of sirens and the New Year's Eve celebrations, and had got only five hours' sleep, but he said: "It was as good as eight formerly, and I was A1 when I woke in the morning."

I impressed on him this idea:

"Whatever you have to do in your particular line of life, you can and will do happily and efficiently, viz., sleep well, work well, enjoy life. If you read that suggestion"—(I wrote it out for him)—"every night, you will find it working out truly. It will keep confidence and efficiency alive in you."

He left England on 4th January well and happy. On 21st January he wrote from New York: "I was A1 on the voyage and am A1 still." On 9th October, 1923 (nine months from the time I saw him), he wrote again from U.S.A. "I am sleeping well and enjoying life. This is not altogether due to the gods favouring me in all things, as I have had some rather difficult problems to tackle, which in my previous state would have worried me a lot. But I seem to have acquired the knack of *not letting things worry me*, and so taking the best out of life, I have let the rest go by. Family affairs, notwithstanding some unpleasant letters, have not worried me at all, and now with my present appointment nearing its end, and

with no job in prospect to follow, I am not in the least flustered, and I view the future with fatalistic calm, and almost with optimism. I have been feeling well, eating well, and saving money, so I have no need to be unduly anxious for a time while I am looking round for another job. I have not actually been making any effort to apply suggestion to myself, but having practised this for the first few months after my visits to you, I *have become accustomed to viewing and calculating all things calmly.*"

On 2nd July, 1924 (nineteen months from the time I treated him), he wrote again :

"I have got a much better job with an increased salary. I sleep and eat well and am fit and happy, in fact I feel better than ever."

Here again the idea of good sleep and steady nerves was impressed on the mind of the patient. His mind took hold of the idea and responded to it, in spite of the real difficulties existing.

I need hardly add that in curing him I explained : "I have nothing to do with the ethics of your life as regards your wife. All I am interested in is to make you fit and well able to do your job."

1938.

In May, 1936, I had a report from this patient that he was well and happy and running a successful practice in America.

CASES IN WHICH THE PHYSICAL
CONDITION WAS OBVIOUSLY
THE PREDOMINANT FACTOR
PRODUCING THE SYMPTOMS
COMPLAINED OF.

- (1) SCIATIC PAIN DUE TO GUNSHOT WOUND
OF SCIATIC NERVE.
- (2) PAIN OF FRACTURED THIGH.
- (3) PAIN, POST-OPERATIVE, DUE TO GUNSHOT
WOUND OF ABDOMEN.
- (4) CHRONIC CONSTIPATION :
 - (a) Case I.
 - (b) Case II.
- (5) INSOMNIA DUE TO PHYSICAL CONDITIONS :
 - (a) In a case of Bubonic Plague.
 - (b) In a case of Broncho-pneumonia.
 - (c) In a case of Dental Abscess.

CHAPTER IV

CASES IN WHICH THE PHYSICAL CONDITION WAS OBVIOUSLY THE PREDOMINANT FACTOR PRODUCING THE SYMPTOMS COMPLAINED OF

Sciatic Pain due to Gunshot Wound of Sciatic Nerve

THE following is the patient's own account of the cure of pain in this condition. Treatment consisted in producing a suggestible state in the mind of the patient, and while in that state impressing on him the idea—Your pain will not continue.

[*Copy.*]

At O.

20th March, 1916.

The following is an account of my wound, treatment in a German Hospital and Prisoners of War Camp and what was done for me by hypnotic suggestion.

I was wounded in action at L.C. on the 26th August, 1914, by a rifle bullet which entered the inside of the left thigh and emerged at the buttock, the bullet severing in its passage the sciatic nerve.

On the 5th September, I was removed by train to Germany, arriving at C. on the 7th September, 1914. I remained in hospital for a month and was removed to the Officers' Camp on the 7th October. My wound had healed up by this time. A few days after my arrival at the Camp I was visited by a German surgeon, who examined my leg and informed me that an operation was necessary, and asked me if I was willing to consent to the operation. I said I was, and accordingly was again removed to another hospital in the town.

The following day, 15th October, 1914, I was operated on and for a time was all right.

On the second day after the operation I became delirious, and remained in that condition for eight days. During the whole time I had a series of the most awful nightmares imaginable. I shall have a good deal further to say about these nightmares, and what effect they had on me.

About a fortnight after the operation I got a little better, and my nightmares stopped. For the next six weeks I had a very high temperature. I suffered a lot of pain, and could not sleep at night. In fact I did not care whether I was alive or dead.

It is impossible to describe my feelings at this time, so as to convey them to anyone, but I wish to say that I went through "hell" itself.

At the end of the six weeks an English surgeon, Lieutenant D., R.A.M.C., arrived and looked after us. He used to nurse me, and it is through him that my life was saved

The operation wound had become septic, with the result that I had a huge open wound 7 inches long and 4 inches deep which was constantly discharging, and the whole of my leg was full of pus. It was this pus which kept my temperature so high and was causing all the trouble. Lieutenant D. placed five rubber tubes in the wound, to drain out the pus. Soon after this my temperature went down and I began to get better. D. was eventually sent away to another camp, but he had cured me, and I gradually recovered.

About the 1st January, 1915, I got out of bed for the first time, and left the hospital on the 5th March, 1915, returning to the camp on that date.

About a month later Captain Leahy, R.A.M.C., arrived at the camp, and he asked me if I was willing to be cured by hypnotic suggestion, explaining it all to me at the time. I consented, and he started on his cure shortly afterwards.

Before going any further I must now explain something with regard to the operation. My sciatic nerve being severed, left a jagged piece to each end. Before the nerve could be rejoined it was necessary to cut a small portion off each end, so as to make the two ends perfectly smooth. The two ends were then joined. The result of this was that the nerve was considerably shortened, and to allow for this my leg had to be kept bent at the knee. My leg was kept in this position for five months. It was eventually straightened under chloroform. Very soon, however, it got a little bent at the knee, and remained

bent. Every day for two months the German doctor came to me and tried to straighten my leg, but could not do so. He often tried to force it straight, giving me a lot of pain. They then put my leg into a machine to straighten it, but it was of no use, and I was eventually sent to camp on crutches with a bent knee.

The very first day Captain L. started his cure, he straightened my leg, or I should say, told me to straighten it, and I did so. It has remained straight ever since.

I had always suffered a lot of pain in my foot. It kept me awake at nights. The pain was continuous and bad. For six or seven months I never had a moment's rest. The first time I was in a hypnotic condition, and when my foot was stroked the pain went, almost as if by magic. When I was not in a hypnotic condition the pain came back as before.

I do not know how many sittings I had with Captain L. Anyhow, after about the sixth, the pain would go away for a considerable time after the sitting, and eventually after about twelve sittings the pain completely vanished for about four months or so. I still have a little pain now, but it is nothing compared to what I suffered before I had any sittings ; in fact, I never notice it unless someone draws my attention to the fact or asks me if I have any pain.

The result of all the nightmares I had during my delirium was to have its effect when I got to the camp. It is impossible to describe the nightmares, as they were of such a vague character, but to say in

a few words, their nature was, that all the friends I ever knew in life appeared in them in hideous guises, and they all jeered at me, the result being that as soon as I made any friends in the camp I used to imagine that they jeered at me, and loathed and despised me. I can safely say that this was not the true state of affairs, but merely my imagination. My nerves were naturally in a very bad condition, and the fact of being more or less shut up in one place all tended to produce attacks of severe depression amounting to melancholia. During these attacks I never spoke to anyone, and tried to make as many enemies as possible, making myself as disagreeable as possible to everyone. These attacks were frequent, and I told Captain Leahy about them. After the first time he treated me for this melancholia, I felt a different person, and never had any more attacks.

Until I was treated by hypnotic suggestion I never dared put my foot to the ground, and was always on crutches.

After the first few sittings I was walking about without any aid of any sort. I always appeared in public on crutches, as I did not wish to spoil any chances of my being exchanged and sent home to England. I always did a certain amount of walking in my room, improving a little every day.

As soon as I returned to England I gave up the crutches altogether, and now always go about with the help of one, or sometimes two, sticks. I often go for a walk of two miles. I can say with confidence

that had it not been for the hypnotic suggestion given me I should in all probability still be walking about on crutches.

X., Captain.

Dated 20th March, 1916.

This patient was returned to England in July, 1915. In July, 1924, I met his brother-in-law at dinner. He told me that X. desired to be remembered to me, and that except for an odd twinge he had suffered no pain since the days I treated him.

The following is an account of X.'s condition, given me by the English doctor who nursed him and was present at the operation :

LONDON,

21st November, 1916.

This is the history of X. of the X. I am glad to be able to give it to you, for it is to me so extraordinary and so opposed to our general conception of the results of nerve suture in a mixed nerve ; X. appears to have had within 9 months a recovery of function which one would not have expected for 18 months to 2 years.

Wounded at L.C. 26th August, while running forward in a crouching position, rifle bullet passed behind left thigh bone through hamstrings which owing to his position were at that moment tightly stretched.

Immediate loss of motor and sensory function in leg. Clean exit and entry wound ; the explanation

of the complete severance of the sciatic nerve must lie chiefly in the fact that the nerve when struck by the bullet must have been on the stretch.

Treated in various hospitals for 6 weeks until he arrived at C. There he was seen by E. who diagnosed complete division of sciatic nerve, cut down and sutured the nerve with catgut. The wound suppurated, and when I saw him 1st November, 1914, the thigh was riddled with sinuses and pouring pus. The operation was performed about 15th October, 1914.

I saw him 1st November, 1914; examined him and found reaction of degeneration in flexor and extensor muscles of leg and the typical loss of sensation to prick and touch on outer aspect of leg and dorsum of foot. Thus then there was no evidence of regeneration and this fully bore out the correctness of E.'s diagnosis also confirmed by him at operation.

When I left C., 25th November, 1914, the wounds were healing, but there was still no evidence of recovery of function. In addition there was very great pain referred to the leg and foot such as is always found in cases of sciatic nerve injury; he could hardly tolerate the gentlest touch to his body or to his bed. There was no doubt that his pain was organic and not functional, for it robbed him of sleep and required anodynes for its relief.

I shall always be interested in this case and in all your work, for I feel that there is so much in medicine and surgery and the bearing upon them both of

psychotherapy that we do not know, that no wise man would be justified in adopting a hostile attitude.

Pain of Fractured Thigh Cured by Suggestion

Pain due to fractured thigh, the result of a fall. The accident occurred on 20th July, and pain, with resulting insomnia, were pronounced symptoms. Relief was only obtained by injections of morphia totalling $1\frac{1}{2}$ grains every 48 hours. This amount had been injected from the time of the accident to the date on which I saw the patient. Patient was capable, strong-minded, and of good physique, opposed to drugs and afraid of contracting a morphia habit. Aged 30 years.

My business was to stop the pain and produce sleep, and I began treatment on 25th July, five days from the date of the injury.

The patient was quite willing to be treated by suggestion, and readily responded to the suggestion : " You will not feel the pain by day and you will sleep by night."

The patient got eight hours' sleep that night, and next day was much more comfortable.

On 8th August. I see by my notes : Patient has been sleeping well since treatment began, and has had very little pain either by day or night.

I saw this patient in all seven times, and finished treatment on 8th August.

On 27th October, patient writes : " You will be glad to hear I have been sleeping excellently since

you finished treatment, and have had very little pain even in the daytime."

All I did here was to put in the idea : " You will get the relief," and that impression put in from outside blotted out the impressions which must have been all the time travelling along the course of the (physical) nerves to the brain. The pain due to the physical condition was unable to make any impression on the consciousness, though the patient was in all other respects perfectly conscious.

Pain (Following Operation for Gunshot Wound of the Abdomen with Injury to Fourth Lumbar Vertebra) cured by Suggestion

The patient, a Canadian officer of good physique, was wounded about 8 p.m. on 15th December, 1917. He was shot in the abdomen. The entrance wound was a small puncture (bullet) $1\frac{1}{2}$ inches below the tip of the 10th rib on the left side. The exit wound was a large one (due to explosive effect) immediately to the left of the 3rd and 4th lumbar spines. He was operated on at 6 a.m. next day. At that time the abdomen was rigid and tender. The patient was pale, pulse 125. He complained of much pain in the left leg (due to injury of the 3rd lumbar nerve). On operating then, extensive laceration of the left erector spinæ and psoas muscles was discovered, with a comminuted fracture of the left transverse process of the 4th lumbar vertebra. There was a rent in the peritoneum (the lining membrane of the abdo-

minal cavity) the size of a 5s. piece, through which a coil of the bowel protruded.

The abdomen was opened in front by a vertical incision through the left rectus muscle. All lacerated and foul tissues were completely excised, and the wound packed with gauze. The upper part of the jejunum (or small gut) was found to be perforated over a length of about 10 inches, and the adjoining mesentery was seriously involved. The injured portion of the gut (namely 10 inches) was cut out, and the healthy ends stitched together. A large quantity of extravasated blood was mopped up. The wound in the anterior abdominal wall was closed up, and the wound at the back left open to allow of drainage. The patient stood the operation well, but was very pale and exhausted afterwards, due to extensive loss of blood at the time of wounding. Since the operation he has only been able to take small quantities of fluid by the mouth.

He was evacuated from France on 6th February, 1918, and on 7th February, 1918, when examined at the Prince of Wales' Hospital in London, was emaciated, anæmic and had the appearance of a man suffering from a long and severe illness. There was then a gaping wound, 8 inches by 3 inches, to the left of the 3rd and 4th lumbar spines, a small pressure sore to the left of the tail bone, and a sinus (channel) leading to bare bone in the region of the 4th lumbar vertebra. He was able to take solid food, but unable to defæcate except after enemata. Over the front of the left thigh he suffered intense pain on the

slightest touch (due to injury of the 3rd lumbar nerve), and *this* particular pain especially prevented him from sleeping.

Morphia alone gave him any relief when on 14th February, 1918, he was sent to me for treatment for the first time.

He stated :

“ The sensation down my leg is as if the skin were drawn very tight, and someone was flogging it. Successive waves of pain go up the leg. The pain is present to a greater or less degree always, since the time I was wounded. I may get two hours' sleep occasionally, through the night. I have on very rare occasions got as much as four. But I never get more than one hour's *consecutive* sleep.”

I suggested to him that he would soon get eight hours on end, and that during the day his pain would steadily diminish, that I could in fact make him insensible to pain while the healing process was going on. I made this statement to him on 14th February, 1918.

On 15th February, 1918, he reported :

“ I got seven hours of sleep made up as follows : 2 hours, half an hour, 1 hour, and 1½ hours. Last night was fine, and I was free of any real bad go of pain since seeing you yesterday, a thing that has not happened to me before, since I was hit.”

I continued treatment daily and up to 21st February, 1918 ; he got 7 hours' good sleep each night without drugs, and had very little pain by daytime. Though he woke often, as many as four

times in the night, he invariably got off to sleep easily again, and felt correspondingly rested.

On 22nd February, 1918, when I was treating him, he complained of much pain, but after a few suggestions this passed off, and he reported next day that he had quite a good day afterwards.

On 26th February, 1918, he says :

“ I am doing splendidly. I know I have a ‘ trench ’ still in my back (the wound had not yet healed), but it is not bothering me now.”

On 1st March, 1918, he reports :

“ I’m doing well, but I *do* wish I could sleep on my right side instead of always on my left. When I try to turn over on my right side I get a very bad pain in the inner and lower third of my thigh.” (He was still very emaciated.)

“ This goes away when you are treating me, but I can’t beat it by myself at night.”

I suggested he would be able to do so, and to prove what I said, suggested then :

“ Lie on your left side now. I tell you that in a few minutes you will turn to your right and sleep comfortably there. You will do the same thing to-night, even though I am not there to suggest it.”

After I had said this he lay on his left side for five minutes, then turned over and *slept* for 45 minutes on his right and felt splendid on waking.

On 2nd March, 1918, he reported : “ I had a bad night.” I repeated he could sleep on any side comfortably, in spite of the first failure. On 4th March, 1918, he stated :

“ Last night I slept on my right side from 3 to 6 a.m., and had a splendid night. All told I slept from 10.30 to just short of 3 on my left side, and from 3 to 6 on my right, and I feel ‘ fine ’ to-day.”

On 7th March, 1918, he reports :

“ I go to sleep on my left side, but I can now turn over and sleep on my right easily. I average 7 to 9 hours’ sleep.”

By 18th March, 1918, he reports pain much less, sleep excellent.

On 20th March, 1918, the report is : Patient was up yesterday in bath chair for four hours, and has been sleeping excellently. He is now definitely putting on flesh.

On 12th April, 1918, he reports :

“ I sleep splendidly, and the pain is much less by day.”

On 3rd May, 1918, he states :

“ Sleep very good. Pain practically gone. I can stand being massaged.”

And from that day he continued steadily to improve, and finally regained good health. On 3rd October, 1924, I received the following information from a mutual friend as to the patient’s condition :

“ I have just returned from Canada. I met there an old patient of yours. He is in excellent health, swimming and playing tennis, and desires me to tell you he has been free of pain and sleeps well since the day you treated him.”

This patient like most others had experienced relief alternating with a recurrence of discomfort,

but by continually suggesting "You will get more relief as time goes on" he achieved the result here described, in a much shorter time than he expected.

His pain and insomnia were due to definite physical conditions. I could do nothing by suggestion to alter those conditions, but I could and did make him indifferent to them. It was the idea "You will get relief" that worked for him. His own mind developed that more and more as treatment went on. I was not suggesting to him all through the night "You must be comfortable." I put that idea into his mind once a day, worked at it for a few minutes, and the reality of relief followed. Why? Because *his* mind then took hold of the idea.

Chronic Constipation—Case I

Patient, a female, aged 43, consulted me on 27th February, 1923, for the above complaint. She stated, "I have suffered from constipation for years. I am in the habit of taking medicines regularly, almost every night of my life, and frequently, even with these aids, go two days without a motion.

"For the past fourteen days I have been especially bad, and with medicine during that time have succeeded in getting an unsatisfactory motion once in every 36 hours."

I had previously treated this patient successfully for depression and insomnia of long standing. She was much impressed with what had been done in those directions, but did not believe suggestion could

cure her constipation. She had taken a pill the night previous to seeing me. I treated her six times between 27th February, 1923, and 12th March, 1923. Each time I suggested, "You will, from to-day on, have a normal evacuation once in every 24 hours without taking medicine." On 23rd March, 1923, she writes: "I am delighted with the results. . . . What interests me most is this, that though I know how much you can do on the psychic line, I did not believe that you could help me for this physical trouble, which I have had for more years than I can remember. That you should succeed in spite of an attitude of mind which, if it did not counteract your suggestions at least did nothing to help, seems to me most remarkable. Since 12th March, 1923, when I last saw you (11 days ago), I have had a regular stool every day, mostly and generally in the morning. On one day twice . . . also I now have a much better appetite. I wonder sometimes whether this is not too good to last."

Eight months later, on 7th November, 1923, I saw this patient again, and she reported that though she had been travelling abroad for some time and alternately living in England, she no longer suffered from constipation.

In November, 1925, I saw her again, and she reported "a normal daily evacuation is the rule."

I am well aware that unsuitable diet and lack of abdominal activity (weak muscular tone) are causes of constipation. Such cases should be treated by appropriate remedies. This case merely illustrates

the power of an idea in stimulating the intestines to function normally.

In my endeavour to cure this case, I spoke much on the following lines : " Your mind can act on your stomach and intestinal tract. You know that a revolting sight can actually make you sick. That involuntary micturition frequently occurs as the result of fear, defæcation likewise. All these effects are produced as the result of emotion. The unhealthy excitement produced in the mind is responsible for the activity of the body. In these cases the impression made on the mind starts the intestinal action if the impression is strong enough, *i.e.*, mental impression produces physical reaction. Well, I believe I can make an impression on your mind that will produce a healthy reaction, a normal activity in the tract concerned. It may take me some time to get the idea to work, but given time, it will work exactly on the lines I suggest." The patient was an exceedingly capable, intelligent lady, and promised not to oppose what I said. The result was as stated above, complete cure. Her mind became full of the idea that normal evacuations would follow ; with each success, her confidence was reinforced, and with it physical cure progressed.

I may point out, that of course suggestion could not work in cases of constipation due to definite surgical conditions, but the vast majority of cases of chronic constipation are due to a laziness in the intestinal musculature, plus interference with the secretion of intestinal glands, and both the muscular

and the glandular functioning can be stimulated by suggestion. The patient having for a long time failed to evacuate normally, begins to think he must depend on medicine. As a result the normal healthy impulses to evacuate do not originate in the mind as they should, the physical nerves are not stimulated, and as a result the muscles and glands concerned no longer work properly. Once the healthy train of thought starts in the mind, impulses travel down the nerve tracts to the muscles and glands concerned, and produce normal functioning. It is a remarkable fact that whereas in such cases the motions prior to suggestion treatment are either always distinctly costive, *i.e.*, hard, or at other times watery and containing undigested food, once the healthy idea develops in the mind, the motions become well formed and of moderate consistency.

In the course of treatment every now and again the patient may pass a day without a motion, but whereas this was the rule before, it becomes the exception as time goes on.

Chronic Constipation—Case II

Patient aged 46; female. A very capable, energetic woman, who played tennis regularly, stated :

“ I have suffered from constipation all my life. By taking two mild pills once a week, and exercising regularly I get an evacuation every day. If I am constipated for even one day I get a very bad headache, acute indigestion, and feel frightfully sick. I

have to be most careful, and suffer severely if I don't take exercise. Sometimes even with exercise I am constipated. If I go away to friends I am often constipated for four days on end unless I take large doses of aperients. Certain climates, such as the north coast of Norfolk and Dorking, in Surrey, have a very bad effect on me. And it's such a bother having to take exercise for this constipation. I've never in my life gone a week without taking a pill."

I treated this patient on the following dates : 31st October, 1922, 11th, 12th, 13th, 14th, 15th, 16th November. She took one of her usual pills on 10th November, and I suggested that from that date she would have a normal daily evacuation.

On 4th April, 1923, she reports ($4\frac{1}{2}$ months later) :

" I have only taken four of my usual pills in three months, as against two per week formerly, and have had normal daily motions. I am feeling wonderfully well as a result, and no longer suffer from the (?) rheumatic pains that used to trouble me."

Insomnia due to Physical States

In discussing Insomnia I propose first to define the condition ; secondly to give the causes ; and thirdly to offer a line of treatment which in my experience has frequently resulted in cure.

First then as to the definition : Insomnia, wakefulness, or inability to sleep, can be defined as a disturbance of consciousness. That is to say, the mind of the patient is so disturbed that he cannot secure the rest he requires.

Secondly as to causes : Whatever the causes they all come under the heading of mental or physical, or a combination of both.

Under the heading physical, I include such conditions as the graver fevers, plague and broncho-pneumonia, inflammation of nerve tissues, as in severe toothache, injuries such as bad fractures. In fact, any bodily illness, if sufficiently severe, can be a cause. Under the heading mental, I include such conditions as over-excitement, strain, depression, fear, mental exhaustion, worry in any of its forms. A combination of mental and physical causes is established in any long-continued physical illness, inasmuch as the mind becomes depressed, as a result of the long continuation of the bodily disease. But whatever the cause, the essential fact is that insomnia is a disturbance of the consciousness, and the cure of the condition consists in quieting the consciousness concerned by some means or other.

Thirdly, then, as to treatment. Obviously the first effort should be to remove the cause. Cure the fever, extract the offending tooth, set the fracture. But it is not always possible to achieve cure of the Insomnia even then, and if Insomnia persists, by all means resort to measures appropriate to the condition ; massage, morphia, hot baths, etc., to mention only a few that may be ordered by the medical adviser. Frequently, indeed, by such measures relief is obtained, and if so well and good. But there are many cases in which these measures fail, and it is with such cases that I am here concerned.

I maintain that the measures so far here enumerated, cure by acting *directly on the body*, and thereby (indirectly) quieting the mind, and that where they fail, cure can frequently be achieved by acting directly on the mind, and leaving the body entirely alone.

We know that man is possessed of a mind and a body, and, though we recognise that the two are linked together, we regard his mental and physical qualities as two distinct entities.

And while the composition and attributes of the body are well known, it must be admitted at once that we do not yet know what the mind is or where it is to be found. We do, however, know that we can get in touch with it, and that it can respond to impressions from without the personality of the individual, as well as impressions from within that same personality. The utilisation of that knowledge can, in many cases, induce the cure of Insomnia.

To explain :—

In any severe physical illness a marked impression (in the shape of disturbance) is made on the mind, and, if the impression is sufficiently disturbing, Insomnia results. To put it perhaps more clearly : the disturbing impression made on the mind is responsible for the condition known as Insomnia, even though that disturbing impression itself is caused by the presence of bodily disease, the important thing to remember is that Insomnia is a disturbance of consciousness from whatever cause produced. Now if a disturbing impression in con-

sciousness produces Insomnia, it would seem reasonable to expect that a soothing impression would produce the opposite effect, namely Sleep. If that is so, the question of cure resolves itself into this : Can a soothing impression sufficiently strong be introduced into a mind already full of disturbance ? And the answer is Yes, in a great many cases that fail to respond to treatment applied directly through the body.

I say that Insomnia is essentially a mental state, even though it may be the result of a physical condition, and I further say that though the physical condition causing it persist, Insomnia can be cured by acting directly on the mind. The patient concerned cannot, as a rule, make a sufficiently strong impression from within himself, but such an impression can be made on his mind from without by another, provided that other is himself sufficiently strong, and skilled in the practice of suggestion. And such an impression can be made permanent.

We *do* know that soothing impressions can get into a mind disturbed. For example, a man may be worrying over a business proposition. He goes to a theatre, suddenly finds the particular play interests him, grips his attention, and while he is listening to the plot he forgets all about his worry. The impression made on his mind by the play prevents the worry impression from acting—for the time. It is true that the impression made here may be only temporary, but it is a fact that in Insomnia a permanently soothing impression can be made on the

mind by suggestion, given that treatment is continued for a sufficient period of time.

To cure a patient of Insomnia by suggestion, the important thing is to prove to him that a sufficiently powerful soothing impression can be produced at all. Such an impression can be produced, provided the suggester can grip his patient's attention.

The following cases will, I trust, prove this contention and illustrate the procedure I employ. All I did in these cases was to introduce into the mind of the patient the idea : " You will go to sleep and sleep well." The introduction of that idea produced refreshing sleep.

CURE OF INSOMNIA IN A CASE OF BUBONIC PLAGUE.
—Patient aged 4 years, a European male child.

In 1911, in India, this patient contracted Bubonic Plague. He showed all the typical signs and symptoms : a bubo in the left groin, high temperature, restlessness, delirium, emaciation, following a plague outbreak among the native population. For four days he went rapidly down-hill, was unable to assimilate his food, got practically no sleep, and became reduced to the typical skeleton of plague epidemics. On two occasions he collapsed, and was only saved from death by the injection of strychnine in the arm, and brandy per rectum. Sulphonal, Trional, Veronal, Bromides and Morphia injections were all tried without avail to produce sleep. His restlessness was wearing him out, and he was getting steadily worse. I was in charge of the case, and on the fourth day, realising all else had failed, I

determined to try suggestion, in the hope of securing sleep. I had little hope of success, for I well recognised that his restlessness and insomnia were the result of plague poisons circulating in his system, and I did not see how acting on his mind could produce sleep with such enemies on the field. One asset I had, however. The child knew me. We were always great friends. I had taught him how to box, and he had a great belief in anything I ever told him. That gave me a feeble hope that I could influence his mind by anything I said.

And so I got his mother to hold him—for he was struggling and semi-delirious at the time—took his head in my hands, fixed my eyes on his and kept on saying: “You will go to sleep—I can make you do so and take away all your pain.” I hoped that by so doing I might impress on his mind that I was strong and could do what I said. It was no easy matter: for twenty minutes I went on, hoping against hope, and then—and to my astonishment—his struggling at last ceased, his head drooped, he went sound asleep and slept for several hours.

That night I repeated the performance and he slept again, waking at intervals, but on the whole much calmer than he had yet been. In the next three days I repeated the process several times, always with success. He then began to take his food more easily, lost his restlessness, and by the seventh day his temperature dropped to normal.

From that day he progressed steadily to cure.

He is to-day (19th November, 1938) alive and doing well, an officer in his father's old Regiment.

INSOMNIA IN A CASE OF BRONCHO-PNEUMONIA OF TEN MONTHS' STANDING.—In 1913 I was asked to see a sergeant in the Rifle Brigade who had been confined to bed for ten months, suffering from the above disease. His life was despaired of; he had been steadily getting worse. He himself had quite given up hope of recovery. He appeared to have lost about three stone in weight, was utterly exhausted, and suffered from Insomnia, which was only relieved by morphia. There were cavities and patches of consolidation in his lungs, and in violent paroxysms of coughing he brought up a purulent, foul-smelling sputum. Headaches, constipation, and indigestion with flatulent distension, were all pronounced symptoms. He was unable to take solid food, and lived on brandy, champagne and egg flips. When I told him I thought I could cure his insomnia, he scoffed at the idea, saying: "Every doctor in the hospital has had a try at curing me, and you'll fail, like the rest." And that day I utterly failed to produce any result. Next day I returned to the attack and said: "Never mind yesterday's failure. I'm certain I can cure your insomnia, and I'm going to sit here to-day till I get some result." He was much impressed by my confidence, and for an hour I talked, explaining the action of suggestion, and telling him he would sleep that night without pain, that his cough would be easier, and that he would wake next day feeling a different—that is, a much

fitter—man. When next day came, I was met with a smile and the statement : “ Well, doctor, you’ve done it ; I slept eight hours and feel fine. I woke once or twice with the cough, but easily got to sleep again.”

From that time onward he slept well, lost his indigestion and began to put on flesh. The cough diminished, and the quality of his sputum altered for the better. Three weeks after treatment began he was able to leave his bed. I had seen him ten times.

A CASE OF INSOMNIA DUE TO DENTAL ABSCESS.—
In 1922 I was called to see a patient, male, aged 40, suffering from violent pain in the region of the first lower right molar tooth. The pain was due to abscess formation at the root, and there was a tense globular swelling in the cheek, the slightest touch to which gave rise to agonising pain. This patient was a man of fine physique, brave, strong-minded. He was well known as a hunting man and rackets player, and had a good war record. He was in every respect the opposite of what is described as a weakling.

When I saw him at 12.30 midnight, he told me he had been unable to sleep for three nights, owing to the pain, and that his dentist could not extract the offending molar till the inflammation had gone down. His appearance bore out all that he said : he looked thoroughly exhausted. We happened to be friends, and he was quite willing to give me his attention. When, however, I assured him that I

could get him relief from pain *in five minutes*, and good sleep that night he said : " Well, I don't see how you can do it, but I'll leave it to you." I suggested to him that if he looked at a coin which I held in front of his eyes, I could get hold of his attention, and get it off the pain. He did so, I assured him his pain would go, kept on doing so, and, five minutes later, he informed me it had completely gone. He was able to press hard on the tense swelling (which was still there !) but could elicit no pain by so doing. I then suggested he would sleep well, that the abscess would hurt him no more, but that he must have the tooth extracted as soon as possible. Next day he reported : " Although I woke after you left last night, I readily got to sleep again, had a splendid night and feel splendid this morning." At 4.55 that afternoon he had a slight return of pain in the tooth, but, as he expressed it, " nothing to speak of." The second day he reported he had again slept well, and so on the third day also.

From the time I treated him that first night the pain left him, except for the slight recurrence in the afternoon of the second day. On the fifth day he had the tooth extracted.

These cases illustrate how Insomnia can be cured even when it results from bodily conditions causing pain.

CASES IN WHICH IT WAS DIFFICULT
TO DECIDE WHETHER THE MEN-
TAL OR PHYSICAL CONDITION
WAS THE PREDOMINANT FAC-
TOR IN PRODUCING THE
SYMPTOMS COMPLAINED OF.

- (1) CHRONIC ALCOHOLISM :
 Case I.
 Case II.
- (2) BALDNESS (PARTIAL) FOLLOWING PHY-
SICAL INJURY AND SHOCK.
- (3) INSOMNIA WITH CONSTIPATION AND IN-
DIGESTION.
- (4) ASTHMA (ORDINARY AND SO-CALLED
HORSE ASTHMA).

CHAPTER V

CASES IN WHICH IT WAS DIFFICULT TO DECIDE WHETHER THE MENTAL OR PHYSICAL CONDITION WAS THE PRE- DOMINANT FACTOR IN PRODUCING THE SYMPTOMS COMPLAINED OF.

Chronic Alcoholism—Case I

THE principle on which I work here is that in all cases of alcoholism, a man becomes conscious of a need or desire for drink before he starts drinking, and that by acting on his mind you can obliterate the need and the desire which exist there. The "need" for drink may arise from bodily discomfort, a sinking feeling in the stomach, nervous twitchings, the result of former drinking, headache, or the thousand and one bodily discomforts the alcoholic suffers from. Or a mental condition may be the cause. It may arise because of a feeling of acute nervousness. Fear may be the predominant factor, but whether it is malaise of mind or body, it makes the patient think "I need a drink; it helped me before for a time, and no matter what the consequences, I must have one now." "*I need it.*" That

is the predominant *thought* in his mind, and when it gets strong enough, he gives way to it.

If you can prevent his thinking that, you go a long way towards curing him, and the best way to prevent him so thinking is to secure for him relief of his bodily and mental conditions. This can be done by suggestion, as the following case will show. It amounts to this, that in the end all these patients drink because they feel they must, to relieve their suffering. By acting on the mind, you can make them feel differently. They can be made comfortable without drink. By "desire" I mean much the same as need, only in this case the patient is feeling quite well, except that something in him urges him to have a drink: "Pure cussedness, doctor; I don't know why I did it. I just couldn't help myself," as one patient said to me recently.

In both cases it is the feeling of *which the patient is conscious* that drives him to drink, and though in physical conditions you cannot at once alter the physical derangement existing, you can make the patient unconscious of what is going on, say, for example, in his stomach.

I need hardly say you cannot do this in all cases, but that it can be done in some, the following case will prove, and I have succeeded in many similar cases.

This patient was a man aged 53. He consulted me on 16th October, 1922, was treated 17 times and remained teetotaler afterwards for two years and five months. He then broke down, and drank for

a week, when he consulted me again in April, 1925. Since that date he remained a teetotaller till his death in 1931.

The following is his history :

“ All my mother’s family were hard drinkers, and my brother and myself have drunk hard all our lives. For quite thirty years I have been well known as one of the hardest drinkers in my town. I frequently drink a pint of whisky in the evening, and am none the worse for it. I don’t drink much till evening time. At frequent intervals I go on a wild burst of drinking, lasting for anything from three days to a fortnight, and while on such a burst, am quite incapable of carrying on my business. I have been to various institutions for cure from time to time, but always as soon as I get out I start drinking again. For the past three months now I have been drinking very hard, often a quart of whisky at a sitting, and my business is going to rack and ruin. I’m losing my grip on myself, and am so nervous I must be on the verge of D.T.’s.”

And he was ! An enormous man, of fine physique, standing 6 ft. 3½ in., and weighing 18 stone, nervous, tremulous, shaking all over, with a hunted, furtive look, disjointed in speech, hardly able to frame his words, he was, as he described it, “ just miserable all over,” complaining of nausea, headache, and extreme depression. I told him that I could put him to sleep, and procure comfort, and that with treatment I could remove all his craving for drink. As he was too far gone to understand any explana-

tion, I simply said I'd hypnotise him, and so prevent him from drinking. I did not in fact hypnotise him at all. I put him in a nursing home, and suggested every day: "You will get quite comfortable here, get back your health to the full, and you will lose all need and desire for alcohol." I put in his room two bottles of whisky and half a dozen bottles of stout, saying: "You can drink what you like, but you'll soon find you have not the slightest inclination for drink." I put a nurse in charge with instructions to let him drink as he felt inclined. He at once began to respond, and by 25th October, 1922, *i.e.*, nine days from the time I first saw him, he was down to an ounce of whisky and a bottle of stout in the 24 hours. All this time he had remained in the nursing home. He was indeed afraid to trust himself outside.

It was necessary to show him that he would be free from the craving wherever he went, so I explained to him: "All the time you have been in this home I have been inoculating your mind with the idea that you do not need nor desire drink. That will work for you first here in London, and later in your own home 400 miles away, and finally anywhere." He was, by the way, a complete stranger in London. I told him to go out by himself, and assured him that he would be all right. I gave him in writing the suggestion: "From now on you will have neither need nor desire for alcohol. If you read this each night at bedtime, it will keep alive in your mind the cure which has already begun." He remained in

London till 2nd November, 1922, that is for seven days more. During that time he went out every day by himself, and returned every evening, sober, to the nursing home. He informed me that he found himself instinctively avoiding public-houses, that he often lunched and dined at public restaurants, but kept away from alcohol without any difficulty. I encouraged him to keep on reading the suggestion every night, and to let me hear from him once a month on his return to his own home. I advised a week by the sea, as he had been rather run down, and he left me on 2nd November, 1922. At the last moment he received a wire necessitating his immediate return home on urgent business. He was much afraid that this change in his plans might upset the progress of his cure, but I assured him he would be all right.

A month later he wrote : " I am extremely glad to report that I have neither need nor desire. My nerves are normal. If ever I am thirsty I drink tea with a slice of lemon in it."

He lived in a small town where all his friends drank hard. (Later I cured one of them who came to see me at my old patient's request !) He met them every night in the club, and played cards and billiards there with them, odd times a game of golf, fishing and football matches, all with the same hard drinkers, but he remained teetotal. For example in February, 1923, he reports : " I went to the International football match with a large party of friends. They drank hard. My drink that day was

coffee." In May, 1923, he wrote : " I am O.K., no alcohol, and I now do business with pleasure, that before I saw you I had to be forced to do, and always did with a grudge."

And so he continued till 6th April, 1925, when one day out fishing in cold and wet, he got a craving for drink and had five or six glasses of Hollands gin. Next day he drank more, and continued getting worse up to the 11th, when he began to diminish the amount. He came to me on 13th April, 1925, stating : " I had no reason for drinking except that I felt my stomach wanted a heater ! " He was very nervous, and much afraid that he could never be cured now. He drank three bottles of stout, and one stiff whisky that day, and on the 14th he ate some fish, the first solid food for seven days. By 21st he was down to two bottles of stout per 24 hours, was eating well and feeling much better in every way. He had again been out alone in London and experienced no craving. From 24th April, 1925, to 29th April, 1925, he drank nothing, and on the 29th he left for home feeling well. He has written to me each month to say he is still teetotal, and doing good business. In a letter received 2nd February, 1926, he states he never felt better, and it was then nine months since I last saw him. When he first came for treatment he was in despair. When, however, I showed him how suggestion could act by making his right arm stiff, he was much impressed, and from then on his case was easy.

On his breakdown in April, 1925, he was again in

despair, but after sixteen days' treatment he has remained well.

With the exception of purgatives and sleeping draughts for a few nights, his only medicine was suggestion.

Chronic Alcoholism—Case II

DRINK AND THE TREATMENT OF SAME BY SUGGESTION

Patient . Age 45. Male. Un-
married. Came to see me 27th August, 1917.
Consistent drinker since age of 28 on landing in
Colonies. He could hold his drink well until fifteen
years before ; *i.e.*, up to the age of 30. Drinking
bouts then became very frequent and severe. Was
in Government employment. Would be sober two
to six months, then start drinking for perhaps three
days, two bottles of whisky per diem. Volunteered
for service in the War, and came over to England.
Sober for five months in 1916 from February to July.
Then came to London for training and in September,
1916, took to drinking for three days ; drinking
quite two bottles of whisky per diem. In December,
1916, another bout of two days—two bottles of
whisky per day. In March, 1917, four days' drink-
ing ; in April one day : 8th, 9th, 10th and 11th May
hard drinking ; 16th, 17th, 18th June ; 18th, 19th,
20th, 21st, 22nd, 23rd August. Court-martialled and
dismissed from the service as a drunkard 18th
August, 1917. Patient is a fine muscular type, talks

clearly, but is rather slow, most anxious to be cured, realises that he is losing everything by drink ; keeps a diary to which he constantly refers. The outbreaks have always synchronised with some change, such as "going up to town." "It was the same long ago," he reports, "change or excitement followed by physical depression made me drink. I have no real cause for depression." (But this patient has not made a success of his life.) He says :

"I work in a little one-horse town in the Colonies. I feel everyone is watching me, and if I had a drink I know the whole town would talk about it. Now, when I am drinking hard in England, I feel also I am being watched. I want to give up drinking because of my sister's affection for me first, and also, I want to get on in life." I told this patient, that I thought he could be easily cured. I treated him in London. He was due to leave for the Colonies early in September.

The Dates of Treatment were 27th, 28th, 29th, 30th August, 1917 ; 4th, 5th, 6th September, 1917.

I suggested that he would lose all need and desire for drink, that he would be quite happy without it, and be able to work well. I repeated this suggestion at each sitting, stating on the 30th August : "In a month from now, you will have beaten this craving." From the beginning he improved and began to drink very much less, and on the 6th September he stated : "I have had absolutely no craving for drink since we started. At the beginning I was doubtful as to whether improvement would continue, but I feel

quite confident now. At first I feared change and thought the excitement of landing again in the Colonies might upset me, but now I have no such fear." I gave this patient a sixpence and said: "In moments of danger, if you look at that coin, you will steady yourself, and you will not give way to drink on landing in the Colonies again." I gave him also written suggestions to read each night stating that, if he read them, he would be influenced by them—that he would lose all need and desire for drink—and would, in fact, give up alcohol. On the 27th of December, I received the following letter from him dated 11th November, 1917, The Colonies :

"Many thanks for your letter dated 16th September. I had quite a long and tedious passage out, six weeks instead of the pre-war three weeks. I am glad to tell you that I have not experienced the slightest inclination to drink since I left home, although every opportunity was put in my way. The man sharing my cabin was a hard drinker, so hard, indeed, that he apparently got snowed up at 'X,' and missed the boat. There was, too, as is usually the case on these long voyages, a lot of tall drinking going on on board. I, however, carried out your instructions implicitly, and still do, with the result that I had absolutely no inclination for alcohol, either on board or on landing at 'X' and 'Z,' which I told you, I think, I rather funk'd. Of course, at first, the idea of drinking and perhaps the fear that I should break down, was more or less

constantly in my mind. It never worries me a little bit now, and I feel that I am daily gaining more and more confidence in myself."

I wrote again to this patient four years afterwards to ask how he was progressing, and received the following reply dated 30th October, 1921, The Colonies :

"Very glad to hear from you. I am glad to report that I am getting along famously. It is now four years since I left England, and during that period, I can truthfully say that I have led what the ordinary man in the street would call an exceptionally sober life. On three occasions I must own I have taken too much drink, never a prolonged bout, but just for one evening, and have always pulled up at once. For the last fifteen months I have touched no alcohol at all, and thank goodness, have no desire to do so."

Baldness (Partial) Following Physical Injury and Shock

A lady, aged 35, came to see me on 21st February, 1919, stating : "In August, 1918, I was in a bad motor collision. Our car struck another and the force of the impact bounced me out of my seat, my head striking the top of the car. I was very badly bruised and shaken, and my head ached for days afterwards. Fourteen days after this accident my hair started to fall out, and my hair has been such a joy to me, it has been so long, extending below the waist

even to-day, and luxuriant. Now every day I comb my hair, it comes out in fistfuls, and is getting so thin all over and worse every day." Examination showed three bald patches, one on the vortex 3 inches by 2 inches in size, another 1 inch by half an inch, and a third 1 inch by 1 inch. The patient was exceedingly depressed, very highly strung and quite sure she was going bald. She had been all her life of a highly strung nervous disposition. She stated, "I worry about everything. I am always afraid my children are going to be ill. If I take a bath, I'm afraid always that I'll faint in it, though I never have fainted. I think I've got heart disease, and I'm sure I once had a floating kidney. I've had headaches most of my life, and chronic constipation for twelve years. Can you stop my hair from falling out? I've tried every conceivable remedy without avail." The husband, a medical man, corroborated this patient's statement; but informed me that she was organically sound in every way. Now I recognised that there was a large element of worry in this patient's condition, and knowing that worry alone can disorganise the various functions of the body, I told her I *might* be able to help her. At the same time I did not disguise from her that I felt there was a physical basis for her condition, namely, that when her head struck the roof of the car she probably bruised some of the nerves of the scalp, and such an injury could certainly affect the growth of her hair. But I explained: "Worry can undoubtedly affect the nutrition of the body, and worry is playing *some*

part in your baldness. I can work on your mind, prevent you from worrying, and so save you from wasting energy. The energy so saved will improve the condition of your scalp and your general health, and your hair will begin to grow again."

I saw her five times in February, five in March, five in April, and twice in May, 1919. Treatment began on 21st February, 1919, and ended on 29th May, 1919. She had no medicine or hair lotion of any kind in this time. I simply suggested in effect, "You will not worry and your hair will grow again."

On 26th February, 1919, she reported: "I washed my hair yesterday. It has already stopped falling out. As a rule when I wash it and comb it afterwards, I comb out handfuls. This time only a very little came away." On 7th March, 1919, she reports: "It's falling out again. I'm so depressed. I know I'm going bald." Again on 11th March, 1919: "I brushed my hair very hard to-day, and none of it came out." The patient's husband corroborated, saying, "She is not nearly so depressed as she was, and her hair is certainly not falling out." On 1st April, 1919, she reported, "It's falling out again, but not nearly so badly." Here the patient reported: "My sister died suddenly yesterday, 30th March, 1919, and I was of course terribly depressed." I reassured the patient, saying that nothing would prevent cure, and on 7th April, 1919, she reported: "There is a definite growth now on the bald patches, and the hair has practically ceased falling out." On 24th April, 1919, there was a pronounced growth

on all the bald patches. On 29th May, 1919, when I saw the patient again, the hair was growing strongly and the patient was in excellent spirits. On 23rd June, 1919, I received the following note from her husband : "The treatment has been little short of marvellous. Her hair is now growing as fast as it can. My sincere thanks for absolutely wonderful results." The patient herself wrote on the same date, "A line to tell you how awfully well I feel, and my hair is a great success."

I may point out shock is not the only cause of baldness, and that suggestion will not cure baldness due to other causes. It is not a panacea for this condition, but this case does illustrate my contention, that if you can eliminate worry from the mind of a patient you put the body in a better position to function. Worry was eliminated here by getting the patient to believe that the condition could be cured.

Insomnia, Constipation and Indigestion

INSOMNIA.—Patient, a domestic servant, aged 40, states on 28th January, 1916 :

"I have suffered from Insomnia since childhood. I go to bed about 10.30 and lie awake practically all night. In the past month I have seldom enjoyed more than half an hour's sleep per night, and in all my life, I seldom remember getting more than three hours in any night."

NERVOUSNESS.—"I am very nervous, easily startled by anyone speaking in a sharp voice, or by any sudden noise, but I am not afraid of sleeping in an

empty house by myself, nor am I easily frightened in the ordinary way."

INDIGESTION.—" I suffer from hiccoughs and flatulence with great discomfort after meals. I drink a lot of strong tea."

CONSTIPATION.—" All my life I have been constipated. I get two motions in a week, and frequently only one. Medicines, *e.g.*, senna pods, Epsom salts, castor oil and liver pills, have sometimes helped me a little, but I have given them up latterly, and get two motions a week without them."

HEADACHES.—" As a rule once a week very bad, chiefly at the back of my head." (Occipital region.)

This patient is an excellent servant, hard-working, conscientious, cheerful, practical,

EXAMINATION.—No definite organic lesion discovered, patient rather anæmic and below normal weight. I explained to her that I believed I could cure all her symptoms by suggestion if she could give me her attention. She was quite willing to do so, and the following procedure was carried out. I stated : " If you look quietly at that ring of mine (a gold snake ring) you will be giving me your attention, and thereby allowing me to get in touch with your mind. As you continue to look your eyes will feel heavy and you will become drowsy, partly because of the physical strain entailed by keeping your eyes fixed on a bright object, and partly because I am talking to you in a quiet monotonous voice. Finally, your eyes will close, and you will drop into what I call a suggestible state. In that state I can easily

make an impression on your mind which will produce a reaction in your body. In order to prove to you that the suggestion which I give you can produce an effect on your body, I will suggest that your right arm begins to move upwards *automatically* as I go on talking to you. The movement of your arm will be a proof of suggestion acting which you can see for yourself, and that will give you some confidence in the other suggestions I am making, and I can assure you that all the other suggestions will act just as certainly for you."

After 4 minutes and 35 seconds, patient closed her eyes, and the following suggestions were made: "You will have a good night to-night, and from now on you will sleep well each night. Each day you will have a normal, healthy, well-formed evacuation, your indigestion will go, you will no longer be nervous and your general health will improve. The headaches, being largely the result of constipation, will disappear, with the cure of that condition. Your right arm will move in five minutes." (It did so.)

These suggestions were given on 28th January, 1916, and the following morning patient reported that she slept splendidly from 12 to 6, woke feeling very well, and had a normal evacuation at 7 a.m. Similar suggestions were given on 30th and 31st January, 1916; 4th, 7th, 15th, 17th, 20th February, 1916; 8th, 9th, 10th March, 1916; 13th April, 1916; 25th January, 1917. From the start improvement was marked. On 4th February, 1916, that is,

seven days from the first treatment, patient stated as regards her symptoms :

SLEEP.—“ I sleep well every night from 11.30 to 6.30. I may wake twice in the night, but only for a few seconds.”

CONSTIPATION.—“ I have had a normal daily motion at 7 a.m. since 29th January.”

NERVOUSNESS.—“ I am still a little nervous. I think my nerves got a bad shock when I was nursing a drunken master some years ago through an attack of D.T.'s. He jumped out of bed one night, and threatened to kill me, and I ran out of the house to escape him. All my life I have been especially frightened of mice.”

N.B.—On 7th February, 1916, patient assisted in the killing of a mouse, and on 15th February, 1916, killed—unaided this time—another mouse !

On 17th February, 1916, as patient had been working very hard, and had some difficulty in sleeping I suggested she would sleep that night from 11 to 6 exactly. Next day she reported she had slept exactly as suggested. By 8th March, 1916, she reported herself to be in excellent health in every way, and looked it, but asked me to treat her for chapped hands by suggestion. She had been doing a good deal of scrubbing and the palms showed raw fissures, the backs being red, rough and chapped. I suggested that she would feel more comfortable on waking and that healthy skin would grow. On emerging from the suggestible state, she stated her hands felt perfectly comfortable, ever so much smoother and more

supple. On 10th March, 1916, the hands showed definite improvement, and patient said they had not felt sore since 8th, though she was still doing a good deal of scrubbing. On 13th April, 1916, she stated the improvement had been continuous, and she had no pain at all.

On 25th January, 1917, she asked me to treat her for chilblains on both feet, which caused intense irritation, and made her limp as she walked. Her feet were swollen, her boots tight and painful. On giving suggestions of relief, she stated after treatment—"My feet feel nice and warm; there is no irritation and my boots feel quite loose"—where a few minutes before they had felt tight on her feet. She definitely stated: "I can see my feet are less swollen now," and though I could not agree with this statement, it is an undoubted fact that she walked without a limp and was comfortable.

January 25th, 1917. She sleeps from 11 to 6 nightly, has no longer any indigestion; the constipation is cured and she enjoys good health.

This patient had been in the habit of drinking a cup of strong tea each night for the past ten or fifteen years. She gave up this habit when I began treating her in January, 1916, but began to take to it again on 13th September, 1916. From that date up to 27th September, 1916, she found that though she went to bed at 11, she got no sleep until 2. She then, however, got five hours on end, waking at 7. As she liked her tea, she asked me if she could continue to drink it, so I suggested at 10.45 p.m. on the night of

27th September, 1916, "You can drink a cup of strong tea every night if you like, beginning now, but you will find the suggestion 'you will sleep' acting more strongly than the tea, and you will sleep well in spite of it, in fact as soon as you have finished your tea, you will get very sleepy straight away."

She slept that night from 11 to 6, and has done approximately the same up to the last notes I have on the case dated 26th February, 1917.

I consider the drinking of strong tea is injurious in most cases. This patient, however, derived great comfort from drinking such tea, and I felt justified in saying *to her*, "It will not hurt you though it might hurt others." Her general improvement in health justifies my contention in her case. She no longer suffered indigestion though she did continue to drink such tea.

Asthma : Horse Asthma and Ordinary Asthma

A lady, aged 43, consulted me on 29th November, 1921, stating :

"I've had asthma for years. It affects me in two ways : (1) I get it from horses ; (2) I get ordinary asthma which wakes me at night.

"To describe what I call 'Horse' asthma. I get attacks if I go into a stable, or stand near a sweating horse. I remember seven and a half years ago getting asthma driving in a victoria, behind a horse that was not well groomed. Putting on my habit, to go hunting, gives me asthma. The other

day my sister came into my room in her riding-habit three times. Each time she came in I got an attack of asthma. If I breakfast dressed in my riding-habit, I get asthma, though out of doors being so dressed does not affect me. If I go near a sweating horse I get it, and similarly the dried sweat seems to affect me. The smell of a horse starts me off.

“A typical attack of horse asthma starts with a sore feeling in my nose and throat, then the trachea (windpipe) gets thick, a violent wheezing in my chest, sneezing, running at the nose and eyes, my chest muscles get rigid, and I struggle for breath though I know my lungs are full of air. They feel distended, but I can't relax and empty them. I have never found anything to relieve these attacks; they simply wear themselves out in time. Often as a result of such attacks I am ill for fourteen days after. I don't get asthma sitting near a man in hunting kit.”

ORDINARY ASTHMA.—“This I have had since childhood, and suffer more or less most nights. It is the same as the ‘Horse’ asthma, only there is no running from the nose and eyes. Stramonium helps me in these attacks.

“I can see how you might cure ‘Horse’ asthma by suggestion, as I recognise there may be an association between asthma and the sight of a horse or habit, but I don't see how my ordinary asthma can be cured by the same means.”

The patient was a capable, well-educated woman, not in the least neurotic, rather sceptical, coming to me as a last hope. She had hunted regularly up

to 1914, but had to give up on account of the agony she suffered. On 29th November, 1921, I suggested : "Your asthma will be less ; the bronchial tubes easily relaxed, and especially as regards 'Horse' asthma, the attacks will diminish in frequency and severity." On 5th December, 1921, she reported no improvement—"and I do want to hunt on the 9th December (1921)." I suggested : "You will be comfortable hunting that day, as far as asthma is concerned." On 12th December, 1921, patient reports : "I had much less asthma hunting on 9th. I drove home in a closed car ten miles, with a sweaty saddle inside, and was practically free of asthma ! Normally, under such conditions, I'd have had a bad attack ; and I had no asthma putting on my riding-habit." On 15th December, 1921, she states : "I was riding again on 13th, and enjoyed it—just a faint sniffing otherwise free from nose and eye symptoms. I went into the harness room yesterday, and had no trouble," 6th June, 1922 : "I've had no asthma since I saw you on 15th December, 1921—neither of the horse nor ordinary variety." 30th August, 1922 : "Three weeks ago a slight recurrence of the 'Horse' asthma when riding. And I now only get the ordinary asthma in the night, if I had an attack of 'Horse' asthma by day. Even though I spent nineteen days at Brighton, where my asthma used to be bad, I had no asthma of any kind there." 6th September, 1922 : "I've had no asthma though I've ridden twice since 30th August, 1922, and I had one pretty severe test. My pony

bucked me off, and when I caught him again, I took off the saddle and found him galled and full of sweat and loose hair underneath. There was an awful smell, but it did not produce an attack." 16th October, 1922 : " I've had no trouble to speak of since 30th August, 1922, though I have ridden frequently and was in Tattersall's one day. Even though I contracted a heavy cold, I have been free of asthma of any kind." In January, 1923, the patient writes : " I really think the ' Horse ' asthma is defeated. I had no trouble with it the four or five days I hunted at Christmas, and putting on my habit no longer affects me. My asthma proper has not bothered me at all." This patient was treated in all thirteen times—from 29th November, 1921, to 16th September, 1922. The treatment consisted in telling the patient : " I can by suggestion act upon your mind or consciousness, and prevent you from ' feeling ' uncomfortable.

" As a result, the smell of horses will not produce irritation in the mucous membranes, nor tightening of the bronchial tubes. I can only act on your mind, but your mind is in some way linked up with your body—I believe through your central nervous system. The idea of comfort, which I can put into your mind, will act on the physical nerve endings which in your body were irritated by the smell of horses, and quite probably also by dried particles which impinged on them. In other words, the impression made on your mind will produce a favourable reaction in your body. Your asthma

was produced by an irritation in your body starting from the (physical) nerve endings, which produced a sensation in your consciousness or mind. The trouble started in your body and worked up to your consciousness. Cure will be effected by starting an impression on your consciousness, which will work down to the nerve endings in your body. I recognise, too, that the factor of apprehension, the dread of an attack, does often produce the condition. Well, apprehension, or fear, is something that develops in your mind, and I can, by suggestion, get another impression, namely, confidence, to develop there instead, and it will act as an antidote. At first the two will work against each other. As we go on I can literally pump more confidence in, till finally your mind becomes full of confidence, and the feeling of apprehension is entirely forced out."

In whatever way the treatment worked, the fact was that running from the nose and eyes ceased, the breathing became easy, the patient lost the fear of an attack, and eventually the attacks ceased altogether.

CONCLUSION

THAT the mind and the body act and react on each other is beyond doubt.

Fear, for example, can produce pallor, disordered heart action, and even inability to move when in the presence of great danger. The phrase, "He stood rooted to the spot with fear," expresses a truth.

On the other hand, chronic indigestion can produce depression and irritability.

Again, worry can affect the patient's physical health, producing indigestion. The indigestion, once started, further accentuates the depression. The vicious circle, worry, indigestion, depression, becomes established, and it is by no means easy to determine which is cause and which effect.

I have in many cases been able to break this circle by successfully attacking the useless habit of worrying. By removing the worry I have cured the dyspepsia. In other cases, when the mental depression was the result of unsuitable diet and lack of abdominal activity, the condition has been cured by suitable dieting and abdominal exercises.

It is recognised that the patient's morale becomes affected in most chronic diseases. "He loses heart." If you are able to inspire him with the belief "I can

show you how to throw off that depression," you will improve his physical condition. By putting a healthy idea into his mind, his physical body is made to function better.

The Physical treatment of physical ills is undoubtedly both necessary and desirable, but such treatment is in certain cases rendered ineffective because of the patient's mental condition.

Closer co-operation between the surgeon or physician on the one hand, and the mental specialist on the other, can do much to expedite recovery in cases such as these.

Finally, as to the condition known as worry, a prolific source of ill-health :

Worry, which has no foundation in the patient's social, financial, moral or physical condition, cannot be successfully treated on ordinary medical lines, but can be successfully treated in many cases on mental lines.

I APPEND HEREWITH A LIST OF CONDITIONS CURED BY SUGGESTION IN MY OWN PRACTICE, EMBRACING DISEASES, HABITS, DEEDS AND FEARS

Alcoholism	Confidence (lack of)
Asthma	
Aphonia (loss of voice), functional	Depression
	Dyspepsia } of nervous
	Diarrhœa } origin
Business worry	Dysmenorrhœa (difficult menstruation)
Baldness (due to shock)	Disordered action of heart of nervous origin
Blepharospasm (spasm of eyelids)	Dyspnœa (difficulty in breathing)
Blindness (due to shock)	Dumbness (functional, due to shock)
Cigarette smoking	
Constipation	
Colitis of nervous origin	Eneuresis nocturna (bed wetting)
Cramp	
Confusion states	Eye strain of nervous origin
Concentration (lack of)	

Epileptiform fits	Fear of tuberculosis
Eczema	„ „ violin playing in professional violinists suffer- ing from stage fright
Fear of baths	
„ „ blushing	
„ „ closed spaces	
„ „ death	
„ „ examinations	Gastritis of nervous origin
„ „ fainting	
„ „ fear	
„ „ heights	Hypochondria
„ „ horses	Hysteria
„ „ hunting	Hemiplegia (functional), paralysis of one side of body, face, arm and leg
„ „ infecting other people	
„ „ insanity	
„ „ interviews	Hay fever
„ „ loneliness	Headaches
„ „ mice and fear of rats	Homesickness
„ „ micturating	Homosexual impulses
„ „ motoring	
„ „ open spaces	Insomnia (due to physi- cal causes, plague, broncho - pneumonia, dental abscess and various surgical in- juries)
„ „ strangers	
„ „ suicide	
„ „ syphilis	
„ „ the future	
„ „ thunder and lightning	Insomnia (due to mental states, worry)
„ „ trains	Impotence (sexual)
„ „ travelling	Introspection

CONDITIONS CURED BY SUGGESTION 167

Inability to concentrate	Obsession (see fears)
Literary paralysis (inability to write novels and lectures in the case of men who had been previously successful but suffered from worry due to adverse conditions and as a result of anxiety were unable to write)	Phobias (see fears) <i>Pain</i> due to physical conditions :
Mental exhaustion	Pain in dental abscess
Melancholia	„ „ crushed finger
Micturition (frequency of)	„ „ gunshot wound —sciatic nerve
Micturition (painful)	„ „ gunshot wound —abdomen
Migraine	„ „ fractured thigh
Menstruation (irregular)	„ „ dental extraction
„ (painful)	„ „ amputation stumps
„ (flooding)	„ „ conjunctivitis
„ (inhibition of)	„ „ painful micturition following operation on bladder
Morphomania	„ „ dislocated shoulder
Neuritis (of ulnar nerve)	„ „ abscess in the ear
„ (sciatica)	„ „ hæmorrhoids
Neurasthenia	Religious melancholia
Nervous exhaustion	Sciatica
	Somnambulism

Stage fright	Tachycardia (fast-beating heart of nervous origin)
Stammering	Train sickness
Spasm (of eyelids)	Vomiting (functional)
Sexual neurasthenia	Weeping (morbid)
Sea-sickness	Worry
Self-consciousness	Weakness (physical) due to worry
Swallowing of wind	Writer's cramp
Self-abuse	
Toothache	
Tobacco habit	

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