The Journal of Hypnotism

Vol. 1 - No. 4
November, 1951
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Dr. Bruno Furst

In this issue

Hypnotic Conditioning for Childbirth
The Case for Stage Hypnotism
Hypnotism and Crime
Herbert Charles Tells the Kefauver Committee
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Editor and Publisher of The Journal of Hypnotism

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The Journal of Hypnotism

Dr. Rexford L. North, Editor
Harry Arons, Associate Editor
B. H. Yanover, Research Director
Len Leonards, Art Director

Vol. 1 November, 1951 No. 4

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Editorial

We will be a bit late with this issue due to working out details with the printers for a better proof reading job. We have been assured that the JOURNAL will be typographically perfect from now on. We hope so. Mr. Leggett, our printer, is one of the nicest fellows we have ever dealt with and he has a well equipped plant but like most printers these days, he has his troubles, too.

We are now well settled in our new building and we are now geared to handle the rapidly growing circulation. Every mail order brings in loads of mail from hypnotists all over the world telling us how well they like the JOURNAL. That naturally makes us happy and we keep working harder to improve each issue. As will be noted, this issue has again been increased in size by four more pages. We are planning to make the next issue even bigger with more pages, more articles and more photos. Incidentally, we are constantly in need of photos. Please send your photos in. They will be returned and we will also make you a gift of the engraving.

We are starting the promised bibliography with this issue. This will add to the value of the JOURNAL. Each issue will carry a full page of data about current and out-of-print books on hypnosis.

We have been getting many letters from readers asking us to publish the JOURNAL monthly instead of bi-monthly. Maybe someday we will be able to do this but not yet. One of our basic problems is in getting material. We are pioneering in a new publishing field and right now we must develop new writers. As we get new writers, we hope to keep enlarging the size of the JOURNAL. We feel that a large bi-monthly is better than a small monthly. However, we will welcome your suggestions.

Speaking of new writers—next issue we will start a series of vital articles by a writer who is new to our pages but definitely not new in the field of writing about hypnotism. We proudly announce that Ormand McGill, world famous authority and author of the Encyclopedia of Stage Hypnotism, will be a regular contributor. Mr. McGill has an exceptionally interesting way of putting his ideas in black and white.

(Continued on page 12)
CAN SELF-HYPNOSIS HELP YOU?

By STANLEY S. JACOBS

(A condensed reprint from FUTURE, published by the United States Junior Chamber of Commerce, Akdar Bldg., Tulsa, Okla.)

A prominent Chicago banker, whose nerves were a-flutter because of the two packs of cigarettes and half dozen cigars he smoked daily, was warned by his doctor to quit smoking.

The banker, weak-willed about tobacco, despaired until he read of the experiments of Andrew Salter, noted hypnotist of New York City. Encouraged, he tried auto-suggestion on himself until his hangering for a smoke disappeared completely. That was three years ago. He hasn’t smoked to this day and, what’s more, says he doesn’t miss tobacco.

Psychologist Salter is firmly convinced that at least one-fourth of the world’s troubled people can ignore pain and actually raise their health level through self-hypnosis.

He’ll tell you about hundreds of clients who have conquered their aversion to the dentist’s drill. These fortunate folk calmly sit themselves in the dentist’s chair and murmur: “I will feel no pain... I will feel no pain...” They say it fifteen or twenty times until they actually have sold themselves on the idea.

“One person out of four has the talent for self-hypnosis,” Salter says. “I have seen chronic alcoholics improve after conscientiously trying self-hypnosis. And it’s an excellent technique for learning to control your temper!”

A Chicago housewife who read about the Salter technique wondered if self-hypnosis could relieve the insomnia which had plagued her for ten years. She tried it several weeks, saying each time as she got into bed:

“Tonight I shall sleep well... Tonight I shall sleep well...”

Within three weeks, her tortuous insomnia had disappeared. She hasn’t had a recurrence of sleeplessness since practicing auto-suggestion.

During the war, military psychiatrists reported amazing results with hypnosis in curing battle fatigue. Today, their wartime discoveries are being used to aid men and women who suffer from abnormal shyness, stuttering and other neuroses.

One middle-aged woman admitted to her psychiatrist that as a child of seven she had been thrashed severely by her father for a minor misdeed. This developed in her a feeling of inferiority, the outward manifestation of which was her speech defect.

After three hypnotic treatments and several weeks’ practice of auto-suggestion, the woman’s stuttering abated 75 per cent. Within three months, she spoke normally and without a trace of stammering; her entire personality radiated a new self-confidence and poise.

Because of the discredit which hypnosis has suffered through racketeering, some doctors still veer away from it as a therapeutic method. Yet, the Journal of the American Medical Association declares:

“Hypnotism has a definite place in psychotherapy. It is not a mysterious art but an established scientific technique!”

Consequently, many physicians and psychiatrists are turning to hypnosis more and more as a dote of patients, with morbid fears, guilt feelings, obsessions and anxieties clamor for relief.

Typical is the case of a St. Louis school teacher who, inexplicably, developed a fear of automobiles. Her fear progressed to the point where she dreaded going to school and stayed home on leave until her funds ran perilously low.

A psychiatrist to whom she confided her trouble discovered that her father—whom she idolized—had been killed in a car accident when she was four years old. This old tragedy, hidden away in memory’s recesses, had engendered a neurosis which made her unable to cross streets by herself.

“You will stand on the busiest corner downtown,” her doctor told her, “and repeat to yourself: ‘I am not afraid of cars... I am not afraid...’ Say it fifty times if you must. Don’t worry about what people will think. This is your battle, and auto-suggestion may help you get out of this difficulty!”

The teacher followed his counsel.

(Continued on page 25)
My Favorite Method of Induction

Photo illustrates the favorite method of Len Leonards, the inimitable photographer-hypnotist. Subject's eyes are closed to begin with. Coin in center of forehead serves as fixation object, which subject is instructed to feel and "see" mentally. This method is also ideal for blind subjects. The subject above is beautiful Irene Rembez, who is custom wedding gown designer for Zerbak Studios of Passaic, N. J. What is YOUR favorite method? Send us a photo illustrating it, together with description. We will pay $5.00 for every "Favorite Method" published and the cut will also be given to you after printing. Send your photo to the editor.
The Hypnotist Who Remembers

By DR. EDOUARD BELCIQUE

Amidst the teeming, bustling holocaust which is present day New York City, dwells a hypnotist who is beyond all question of doubt the world's leading mnemonist (Gr., memory expert). The New Yorker writes that he is "perhaps the best all around mental athlete of the century." It further states, "If there were an intellectual Olympics, Dr. Furst would win the decathlon. Nothing cerebral is beyond him."

Little would one suspect upon first glance that this conservatively dressed, balding, bespectacled, individual, speaking with a soft German accent, conceals beneath his professional bearing a personality not unlike the night bloom cereus in it's ability to bring forth the unexpected. Scholarly, perceiving and astute, Dr. Bruno Furst is possessed of high intellect, hypnotic knowhow, and scientific accuracy alike which have amazed the world's intelligentsia. His writings have electrified such authoritative reviewers as Richard Rovere of The New Yorker, David Taylor Marko of the Associated Press, Frederick Brownell of the American Magazine, May Lamberton Becker of the Herald Tribune, and Orval Graves, M. A., F. R. C., of the Rosicrucian Digest.

The professor taught hypnotism and telepathy at the Masaryk People's University of Prague, Czechoslovakia, from 1933 to 1938, holding the post of associate professor of psychology at that institution. From 1939 to 1945 he also taught these subjects at his own school in New York until his course in memory and concentration grew to such proportions that he was forced to discontinue other teaching.

Born in Metz, Germany, he attended the University of Munich and was admitted to practise before the bar at Frankfurt in 1919. With the advent of Hitler he fled to Prague, and in 1938 came to this country and perfected his now famous system of memory and concentration.

Furst holds that each of us is born with a potentially great memory which, like a muscle, needs only conditioning and training. He goes on to prove this by rattling off the 94th power of 2, which is 19,807,040,628,656,084,398,385,987,584. Challenged to resolve the 100th power of 2, he, with blithe nonchalance, quotes: 1,237,650,600,228,229,401,496,703,205,376—want to check it? He has authored 3 texts, "Use Your Head," originally written in German and translated to English and published here in 1939; "How to Remember," 1944, republished as "The Practical Way to a Better Memory;" and "Stop Forgetting," 1949. The doctor is contemptuous of the notion that it is possibly for the human mind to become overcrowded; he believes that every fact, of whatever nature, the mind adds to its store, makes the brain that much more receptive to the next fact that comes its way; just as in each new sensory perception, the fact is that it prepares the senses automatically for the next one. He has extension branches of his school across the country and has instituted a correspondence course for non-resident students, many of whom are in other countries.

Since coming to America, Dr. Furst has been academically honored with a Professorship in Law at the Mc George College of Law in Sacramento, California, and an Instructorship at the Brooklyn College, Adult Education Division. He also maintains classes at Yale University and at the Town Hall of San Francisco, California. Recently, the University of Tulsa, took over a like course of the doctor's which was previously held at the Town Hall of Tulsa, Oklahoma, and will commence its presentation on the next curriculum.

Along with many appearances on radio and television, the doctor has been featured in a great many publications. A nominal listing: The Reader's Digest, American Library Association Bulletin, Science Digest, Fate, Mind Digest, The American, Maclean's, True, and in Charles Francis Potter's, Beyond the Senses. He has also made personal appearances at the invitation of medical, legal, psychological, and other academic bodies where he has expounded his amazing methods.

To Dr. Bruno Furst, the staff of the Journal joins with hypnotists in every corner of the world in extending a heartfelt "Well Done" Our sincere best wishes are second only to our congratulations and esteem for an able fellow hypnotist.
Dr. Bruno Furst, "The Hypnotist Who Remembers," here illustrates his flair for the dramatic. He suggested that ordinary chairs were so heavy that she could not lift them no matter how hard she tried. Note the strained expression on the subject's face as well as the obvious pressure being exerted by her hands. Observe how the high ceiling and shadows dramatize the photo.
LET'S FACE IT

By BILLY WEINBERG

I am not a Hypnotist, that is, in the sense of deliberately putting a person to sleep through the power of suggestion, nevertheless, hypnotism has always fascinated me; I’ve watched with awe and the laymen’s skepticism the performances and the strange antics of the subjects. I figured it was merely a form of entertainment like wrestling or some other hooked up deal strictly for amusement.

Having seen Dr. Pauline often, back in the alleged “good old days,” and knowing that he carried a crew of “plants” and viewing the Flints surveying their brand of entertainment under the euphemistic title of hypnotism, it was only natural to assume that the totality deal was rigged. I’ve since come to respect these performers for mixing the genuine with the faked.

The Flints and Dr. Pauline made substantial stipends with their acts. Well up in the four figures weekly. The stooges they used were for insurance of the performance and to project the startling, unusual and spectacular. They were standard acts in the halcyon days of vaudeville. Hypnotism has come a long way since those days of the turbulent twenties. For a time it seemed to go into a total eclipse until World War II. True, a few errant disciples were playing the sticks and practically getting nowhere but in debt.

The U.S.O. had the idea that hypnotic entertainers were good for the morale of the troops. They used quite a number of them. Some names I recall were Leitner, Klein, Dick Good, Freeman, and, of course, a lot of others made the trek to various sectors to entertain the soldiers.

Good get results that even startled him. Results that had the medics up on the front line raising their eyebrows in wonder and no little awe at the results of hypnotism.

Some time ago Klein of Philadelphia had a revealing article in the Reader’s Digest anent an experience with hypnotism and some prisoners of war. Several years ago an aggressive young man had the top-flight columnists writing flattering blurbs about his hypnotic activities in soldier camps. His name was Ralph Slater. In my recollections one bit of irony remains signally etched:

Dr. Rexford L. North who was one of the contingent of Hypnotists visiting the camps in the far-flung fastness of war’s horizon came down with a rage of meningitis that has robbed him of one of his senses—hearing—but has made him in my humble opinion, the top-rung exponent of hypnotism today. By no means do I wish to infer that he has a monopoly on this force we call hypnotism, but he is certainly one of its most ardent advocates and a zealot that will be long remembered after he has been booked by his Maker.

There are a swarm of disciples springing up everywhere. Baron in Chicago is making his presence known with a timely and much desired program of taking weight off fat women. Will they love him! And the fellow is getting marvelous results. Of course, the diet takes off the superficial flesh, but Baron impregnates (watch your language) the fat shedding females with the will and determination to follow through with the lowered caloric regimen. I could go on ad infinitum about the fast growing prevalence of the science of hypnotism. If you read your newspapers or magazines it tells you about its progress in the field of therapeutics. Teeth out, no pain. Babies born, traveling and labor relegated to desuetude (look it up) and every day finds a new batch of progressive minded gentry seeking to find out something about this revived science. Gradually but surely the fog is lifting. Irrevocably the mist is clearing that hypnotism is something linked with the devil; unholy, a mish-mash of abracadabra that stems from the hocus-pocus jive of necromancy. As an illustration, in the Hypnotism Center of cultured Boston, there meets twice monthly a group of men whose sole interest is Hypnotism. This is not a motley mob of mopeds but a generous cross section of the people that make Boston. Astute business men, lawyers, professional men of all walks and activities many of them branded with the Harvard label of erudite distinction. They discuss and treat of the serious side of the subject. Sit in on one of their sessions and you come away with a wholesome respect for their views, approach, and overall conclusions. Let’s face it. It looks like hypnotism is here to stay.
BIBLIOGRAPHY

A monthly feature in which recent and out of print books on the subject of hypnotism, both domestic and foreign, will be catalogued. A complete reference file will be the eventual result.


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The Case for Stage Hypnotism

By DR. REXFORD L. NORTH

The above photo was taken recently while Dr. Rexford North presented his hypnotic show on the stage of the Warren Theatre in Roxbury, Mass. Although the show was presented as entertainment, Dr. North availed himself of the opportunity to show several thousand people the serious side of hypnotism, too, and thereby won many new converts to the cause of hypnotism.

Every once in a while a howl is heard about the horrors of presenting hypnotism upon a theatre stage. Let's examine the situation. I must start off by confessing that I work a number of theatre dates every year. I do not hang my head in shame when I say this nor have I ever presented a show I was ashamed of. All of my demonstrations, regardless of where they are presented, are clean, factual, legitimate and educational.

I work theatres for three reasons, not necessarily in the order given. (1). I like the money I can make in theatres and am not hypocrite enough to deny this. Working on percentage it is not unusual to make several thousand dollars a week. (2). I enjoy working theatres. I like the applause of the crowd. Sure, that is ego but I have yet to see a GOOD hypnotist without ego. (3). While I present this reason last—it it really the most important one. In theatres I often have 2,000 and more people in the audience. These audiences are largely made up of people who enter the theatre with a lot of misconceptions about the art. I consider this a wonderful opportunity to show thousands of people what hypnotism really is, what it can do and what it cannot do. (Everyone who knows me is well aware of the fact that I'm brutally frank about the limitations of hypnotism.) The people who witness
my theatrical demonstrations leave the theatre much more pro-hypnotism than they were when they came in.

I have never faked a show. I use no hocus pocus, no plants, no stooges. I do not have to. I know my subject, have a flair for the dramatic and I have the guts to face an audience with nothing behind me except two dozen empty chairs.

And who is it that clamors the loudest about the stage hypnotist? Look at the record and you'll find that they are men who commercialize some other phase of hypnotic practice. The natural assumption is that they fear the competition and dislike having anyone else poaching upon what they like to think of as their own preserves. However, for the sake of appearance, their usual argument is that hypnotism is a serious thing and should not be used for purposes of entertainment. This is nonsense. As already stated, a good, clean, factual theatrical demonstration can help in educating people about hypnotism who would never otherwise learn. Many of these people are thus more apt to believe in the use of hypnosis in dentistry and other phases of medical therapeutics.

Those who clamor about the wicked stage hypnotists also like to claim that stage hypnotists do not really know what they are doing—they say that stage hypnotists are dangerous and cause all sorts of calamities. Just like that. No qualifying. All stage hypnotists are raked over the coals en masse. Well, I was reading the paper today and there was a story about a minister who ran off with a church member's wife. No doubt this fellow wasn't made of the proper material to be a preacher but would any reasonable person condemn ALL preachers for this? Over a six month period of time the newspapers will carry all sorts of stories about bankers who steal, lawyers who commit fraud, ministers who sleep with someone else's wife, doctors who do abortions, dentists who have designs upon their women patients, etc., ad nauseam. No one would think of claiming that ALL ministers, bankers, lawyers, doctors, dentists, et al should be run off a gang plank. A reasonable person would simply admit that those individuals were not worthy of their calling.

Well, why aren't the boys who do the name-calling a little reasonable about realizing that not ALL stage hypnotists are a menace. Certainly some individual stage hypnotists are doing harm. These are the few who are not fully trained, make fools of subjects, do "torture-type" stunts, etc. I personally am against this sort of thing and agree it hurts hypnosis. Nevertheless, the fact remains that not ALL stage hypnotists rate condemnation.

As for the qualifications of the stage hypnotist—no man can stay in the field very long unless he is an exceptionally good hypnotist. I have seen many of the academic hypnotists fail miserably on a subject only to have the same subject hypnotized quickly by a stage hypnotist. The stage hypnotists are certainly the fastest and most efficient hypnotists.

About the time that this issue comes off the press I'll be doing personal appearances for Lions, Rotary, Kiwanis and other civic groups. I'll be entertaining people with hypnosis. But these shows will be clean and dignified and underneath the sugar-coating of entertainment I'll be educating my audiences and giving them a better understanding of the art of hypnosis. I'll never do a show that harms the cause of hypnotism and I'll never do a show that I'm not proud of. That you can accept as Gospel Truth.

EDITORIAL

(Continued from page 3)

His first article, "The Therapeutic Value of The Hypnotic Situation" will be published in the next issue.

In addition to Ormand McGill we will have all of our regulars including Harry Arons with a detailed explanation of "Instantaneous Hypnosis," Lores M. Closkey, Vivian Hudson, Dr. Edouard Belgique, and several other writers who will be new to our pages.

HELP! The last couple months we have received so many letters from people who wish to contact a hypnotist in their area that we just have not been able to cope with the situation at all. We feel that the only way to serve as a clearing house for these people is to print a "Directory of Hypnotists" in each issue. We will start this directory in the next issue. It is designed as a service but we must make a nominal charge for listing to discourage those who just want to see their name in print. We will publish your name, address and phone number for only $1.00 per issue or $4.00 for a full year (6 issues). This will enable people to contact you easily.

Rexford L. North
If you have any questions about
Hypnotism . . .

Ask the Answer Man

(Note: Address all questions to Harry Arons, in care of this Magazine. Questions of general interest will be answered in this column. All questions with their answers, will be compiled in a special folio, mimeographed, and made available to readers at a nominal price. Questions of a medical nature, if received on the professional stationery of qualified physicians, together with stamped, self-addressed envelopes, will not be answered in this column but sent directly to the inquirer.)

Q. I am interested in that part of your booklet HOW TO DEVELOP AN ALARM-CLOCK MIND which deals with learning how to hypnotize oneself through hetero-hypnosis. Can you recommend a good hypnotist in Cincinnati who could teach me this method?

D. F., Cincinnati, O.

A. Sorry, I know of no hypnotist in Cincinnati qualified to do this work, though doubtless there are several who are unknown to me. I have suggested to Dr. North that we might supply a needed service to Journal readers if we established a "Directory of Hypnotists" from all over the country, so that inquiries such as yours could receive the proper attention. Hypnotists could be listed in this directory according to geographical location, qualifications and other pertinent factors, at a nominal fee.

Q. You state in one of your articles that hypnotizing a subject within a few seconds is no great feat, as even the party hypnotist can achieve this end with almost no more study or work than a general knowledge of and ability to use hypnosis. I have studied a good deal and have never come across this method. In your MASTER COURSE, you discuss Instantaneous Hypnotization Through Prestige, but you state that only a few of the most experienced hypnotists can do this with only a few of the most suggestible subjects. As a result, this could not be the method discussed in the Journal article. Could you straighten me out on this?

T. K., Washington, D. C.

A. You have taken a few statements out of context and made it appear that my article contradicts my book. Instantaneous Hypnotization Through Prestige is, as the name implies, a method used by expert hypnotists who have prestige; it is only one type of method. For less adept hypnotists, there are other kinds of methods, the easiest of which is the method employing post-hypnotic suggestion, explained elsewhere in my book. Speed hypnotism actually is no great feat, though it does require the development of a certain knack or flair. But most important, it requires that the operator understand the principles involved and be able to recognize suitable subjects. It is true that not many books go into detail in explaining the mechanics of instant hypnosis, but almost every modern course gives you enough information to serve the purpose, if you have enough imagination to fill in the gaps. I am at present preparing a folio in which I try to explain the induction of instantaneous hypnosis as clearly as possible, and perhaps will have it featured in a forthcoming issue of the Journal.

Q. I am a boy 12 years old. Could I learn to hypnotize an older person? I have ordered your book from Power Publishers and expect it to arrive any day now.

B. S., Atlantic City, N. J.

A. It is conceivable that a boy of 12 could master the hypnotic art and even hypnotize older persons, but it is not too likely. At any rate, I would have to know you personally before I could hazard a guess as to whether YOU could do it. As for the book you ordered, I would not wait for it too impatiently if I were you, as it is the business policy of Power Publishers not to sell these books to known minors unless the parents indicate their approval of the deal.

Q. There is a blind boy whom I am planning to hypnotize. I have already tested him and found him quite sug-
gestible, but I am not certain which method to use as I have had no experience with the blind subjects. My favorite method is the fixation method. Have you any suggestions for me?

M.N.L., New York, N. Y.

A. Since your favorite method is fixation, you are probably most adept with this type of method and should use a variation of it with your blind subject. Have him seated in a comfortable chair, with his head against the back, tilted slightly backward. Have him close his eyes. Place a dime on the center of his forehead, and press it firmly into the skin so that it sticks there by itself. This is your fixation object; not only can the subject feel it, but he can also “see” it with his mind’s eye. Proceed with the usual sleep-talk as if he were a normal subject. Since his eyes are closed to begin with, however, you will have to rely on other indications of approaching hypnosis, such as regularity of breathing, lolling of the head, etc.

Q. I was hypnotized nine years ago by a man with whom I was temporarily in love. I was taught self-hypnosis and could accomplish numerous desirable things thereby. But then my mind changed about the man and I terminated our relationship. In retaliation he gave me a post-hypnotic suggestion that I would never again be hypnotizable by any other operator and would lose my ability of self-hypnosis. In the past nine years I have tried every hypnotist I could contact, with no results? Do you think there is any hope left that someone will be able to hypnotize me again?

G.M.B., New York, N. Y.

A. In my opinion, it took more than a pure post-hypnotic suggestion to make you so completely recalcitrant. There is no doubt that something in your own mind has conspired to endow the suggestion with such tremendous and lasting effect. I feel that continued efforts to be hypnotized will be of no avail at present. My suggestion is that you seriously consider psychoanalysis (perhaps hypnoanalysis), as only an unravelling of your disordered mental processes will bring to light the reason behind your servile compliance with a suggestion which is foreign to your nature in the first place.

Q. What is narco-hypnosis?


A. Narco-hypnosis is supposed to be hypnosis induced by drugs. Actually, however, the mental state that results from the injection of these drugs is a semi-delirious condition in which the subject verbalizes rather freely, thus aiding ventilation of his subconscious. It has been found that hypnotic responses are few indeed; the subject is not in rapport with the operator and usually does not respond to post-hypnotic suggestion at all. From this it may be concluded that narco-hypnosis is really a misnomer.

LECTURERS
(The following lecturers are available. Listing in this department costs $2.00 per issue, payable in advance. Listing is confined to name, address and phone number.)

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Dr. Rexford L. North
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Hypnotism in the News

EYE Magazine has come out again in its November issue with an article on hypnosis. This very interesting story features Fred Schneider, popular hypnotist on the Hollywood night club circuit and his work with willing chorus subjects. The picture story tells a tale that not only shows a young hypnotist at work efficiently in very pleasant surroundings, but is certain to rouse the green-eyed monster lurking in the breasts of his brethren throughout the land, and may even precipitate another migration to California. After all, what is money where feminine pulchritude is concerned? It also mentions his thriving school for neophyte hyps and his sideline of treating the Hollywood highlights for ailments ranging from "... insomnia to an inferiority complex."

Another MUST for all interested in hypnosis is the August-September issue of FATE. This magazine, one of the most interesting and revealing on the market today, comes out often with excellent articles in this field and with most entertaining comments. This issue carries a story by Franz Polgar, a stage hypnotist, entitled "Hypnosis in Medicine," and as expected of FATE, it is worthy of perusal by all.

The use of Hypnosis as an aid in dieting—particularly in the maintenance of the will power there to necessary—is receiving a lot of attention, and rightly so, in today's news. UP's Frank L. Spencer is the author of a column appearing in subscribing newspapers. The piece featured Edwin L. Baron of Chicago, the reputed originator of a planned schedule of this type. Baron induces his subjects to partake of nonfattening foods to curb their appetites, building up in them a dislike for foods of fat producing properties.

INS also has distributed a picture of Baron offering a plate of sweets to an obese woman, Mrs. Esther Wittert, Chicago housewife, who disdains them. She has lost 15 pounds in two months under the direction of Baron.

Michael MacDougall, in an article appearing in the Newark, N. J., STAR LEDGER, on July 8, 1951, gave answer to a cynic who defied anyone to hypnotize her and said in effect that all hypnotists were "sheer bunk." The article was very amusing in content. It told of one fellow who hypnotized Two Ton Tony Galento. When Galento's mother got wind of such unusual proceedings, she chased the hypnotist down the street with a broom. This unusually comic take-off is entitled, Hypnotists Often Lead with their Chins.

The Verhovay Journal ran a two column article on a hypnotist member who is recognized as an expert in the field. Edmund Breda, stage hypnotist and conductor of a school of the art at the Hotel Fort Pitt in Pittsburgh, Pa., gave a good deal of information which will serve to clarify the art in the minds of many laymen. High praise has been "his lot from the foremost critics known, Mr. and Mrs. America."

Dr. James T. Killeen, Mansfield, Ohio, Chiropractor and Psychotherapist, has hit the news quite regularly lately due to his success in the demonstration of Hypnoanesthesia and Hypnoanalgesia to the dental and medical professions of Ohio. The August issue of the Central Ohio Bulletin, official dental organ of that section, carried photos of Dr. Killeen and Dr. Dean Miller, dentist, operating while the patient was under the spell induced by Dr. Killeen. It has come to the attention of this department that such anesthetic/analgesia is wrong since it subjects the patient's will to that of the operator. In reversion this department answers that if this be the case, and if the alleviation of pain and suffering by such outstanding men as Dr. Killeen and his associates is not right, then long may it wave! More "wrongdoers" of this order will certainly be welcomed upon the scene of shock and anguish by the sufferers, if not by mayhap well-meaning but surely uninform "do-gooders." Dr. Killeen is also a contributor to the British Journal of Medical Hypnotism.

The window sleep is in the news again. This time, the perennial favorite of the status quo was put on for the benefit of the people of Toronto, Ontario, Canada, according to a recent UP release. Ray Munroe, billed as "Master Hypnotist Raymond," put three beauties to sleep and, when asked when they would awaken, answered, "When I feel like it. I promise only a punch in the nose to anyone who tries to interfere." The reader may have gathered by this time that Ray is a former member of professions not-so-discreet as ours!
Hypnotic Conditioning for Childbirth

By HARRY ARONS

Editor's Note: This is an important article and has aroused much interest and comment. This article was to run in two parts and the first part was published in the last issue. Unfortunately, the printers were careless in proof reading and blotched the whole thing up, actually omitting an entire page of typewritten copy so that the last few paragraphs just didn't make sense. For this reason we are now reprinting last issue's part together with what was supposed to be the second part.

The press has brought to public attention the fact that in recent years hypnosis as anesthesia for childbirth has come into its own. We are left with the impression from these stories that hypnosis is an innovation in the practice of obstetrics. On the contrary, this method has been employed, not only for childbirth but also in general surgical procedures, since the time of Esdaile and Elliotson in the early 1840's. The discovery of chemical anaesthetics in the 1840's has, it is true, thrown hypnosis comparatively into the discard, but it is known in informed circles that natural anesthesia has continued to be utilized when specifically indicated, albeit surreptitiously, for the past century and a half.

The most deplorable fact, of course, is that physicians have hesitated to recommend this method for fear of repercussions from the opposition of their more conservative brethren. But this situation is rapidly changing. Not only are physicians coming into the open, but they are beginning to employ the more highly skilled 'hypnotic' technicians to aid in the conditioning of their patients. In the course of years a number of effective procedures have evolved which are not generally known either to the profession or the public. A brief exposition of the recommended procedures should not be amiss.

Conditioning Under Hypnosis
A Basic Technique

Whether the obstetrician handles the case alone, or calls in a consultant, the initial induction of hypnosis should not be undertaken too near the time of delivery. The only exceptions to this rule might be cases in which the patient has previously undergone conditioning or cases in which hypnosis is resorted to as a last contingency. In the latter instance a somnambulistic trance is absolutely essential and the hypnotist, if one is employed, should be in continuous attendance; otherwise results would be unpredictable.

Ideally, conditioning should begin with the third or fourth month of pregnancy. The reader is reminded that by the term conditioning we mean the induction of hypnosis and the gradual deepening of the trance state to the most profound degree possible, as well as the setting-up of adequate post-hypnotic responses, transference of control to the obstetrician and other responses consistent with the requirements of the case. Conditioning as employed here is not to be confused with "reflex conditioning" as used by Salter and others of the Pavlovian school. The writer puts no stock in the theory that hypnosis is strictly a result of reflex conditioning; he believes that "conditioned reflex therapy" is a make-shift ruse devised by some hypnotists to white-wash the word "hypnosis" and to circumvent medicolegal restrictions in the practice of psychotherapy.

Should the obstetrician be an expert hypnotist who has the time and facilities to do the conditioning himself, the matter becomes quite a simple one. He induces hypnosis in his patient by any method that is applicable and makes tests to determine the degree of trance. Rarely does a subject enter somnambulism at the first session; neither can a subject be rushed or pushed into deep trance. It is necessary to hypnotize her at regular intervals, once or twice a week, until six to eight sessions have brought her to the maximum depth of hypnosis possible. A subject will not usually go any deeper than the depth attained at the eighth hypnosis.

Now careful tests must be made to determine the degree of trance as accurately as possible. Using the six arbitrary stages described in my MASTER COURSE IN HYPNOTISM as a yardstick, it might be said that should
the subject not have progressed beyond the amnesic stages (the first three) hypnosis as an aid to painless childbirth should in this case be discarded. The fourth stage (the first of the amnesic stages, in which there is partial post-hypnotic amnesia) might serve the purpose if by continuing the sessions for a longer period it is possible to condition the patient into sustaining glove anaesthesia post-hypnotically for half an hour or more. Also, the conditioning process must be continued without interruption and perhaps at more frequent intervals. Unfortunately, it does occasionally happen with fourth stage subjects that instead of control becoming more complete with repeated hypnosis, the patient becomes so accustomed to it that the subjective mind gradually recedes, bringing the objective consciousness concomitantly to the fore, with the result that the hypnotic responses become nullified to the point of ineffectiveness.

Fourth or fifth stage somnambulism is ideal for the purpose. The former is characterized by complete amnesia (suggested or spontaneous), glove anaesthesia (analgesia), positive hallucinations, hyperamnesia, and good post-hypnotic responses. Profound somnambulism elicits complete anaesthesia (insensibility to all sensation as well as to pain), positive and negative hallucina-

The top photo shows the doctor testing the subject's reflexes. She was hypnotized by Harry Arons who then transferred control to the doctor.

By the time the second photo was taken Arons had bowed out. He had given the post-hypnotic suggestion that she would go into a deep trance for the doctor in the future and the photo shows her focusing her attention on the doctor's pencil while he commands that she "SLEEP!"

The third photo shows the subject just as she has responded to the command and entered a relaxed state. Note that the doctor is still in exactly the same position and has not yet had time to lower his left arm, holding the pencil.
tions, systemized amnesias, automatic writing (in some hysterical subjects) and instantaneous responses to post-hypnotic sleep suggestions. The somnambule is capable of learning (via post-hypnotic suggestion) how to induce self-hypnosis at will and to respond to self-directed post-hypnotic suggestions in the waking state.

With the degree of trance determined, the second phase of conditioning begins: the setting-up of specific responses for the particular job at hand. But before we go into this, let us consider the role of the hypnotic consultant in the scheme of things.

**Role of Hypnotic Consultant**

When the physician is not an adept hypnotist, or lacks the time for this phase of the work, he calls in a hypnotic consultant, who may be a psychiatrist, a psychologist, or a lay hypnotist with adequate background. Should the patient have initiated the suggestion of using hypnosis, and neither knows of a qualified hypnotist, the physician can make the appropriate contact through his local Medical Society and the local branch of the Psychological Association.

Ideally again, the hypnotist goes to work in the physician's office, directly under his supervision. However, because of time and facility limitations, the physician usually prefers to have the first phase of the conditioning done in the hypnotist's office. Of course, the periodic visits to the obstetrician remain unaffected by the hypnotic work. The hypnotist keeps the doctor informed of his progress.

Hypnosis is produced as in the former method and regular repetitions bring the subject to the maximum degree of trance. Throughout this phase of conditioning, the hypnotist, particularly if he should be a layman, is warned to refrain from any psychological probing not directly connected with attaining the desired trance state. The reason for this is that the patient, for best results, must be mentally free from the anxiety that is usually attendant upon psychotherapeutic procedures.

**Transference of Control to Physician**

When it is apparent that the maximum degree of trance has been reached, the consultant proceeds to transfer hypnotic control to the obstetrician. The procedure for this is very simple: with both men present, the hypnotist instructs the hypnotized patient to react to the physician in the same fashion as she reacts to him. He does not, however, relinquish his own control; both hypnotist and doctor now maintain the same degree of rapport with the patient.

**Setting-Up Instantaneous Hypnosis Responses**

In testing the subject for trance-depth, it has already been established that she will, as a result of a post-hypnotic suggestion, resume the hypnotic state almost instantly. This response is produced at a signal arranged between hypnotist and subject during hypnosis: she is to fall asleep at the sound of the word "Sleep!" (uttered by the hypnotist), at a snap of the fingers, at a meaningful glance, or at a command written on paper. It does not matter what the stimulus-signal is, so long as the subject understands that it is intended to produce hypnosis. When making the post-hypnotic suggestion, it should be specified that the subject will react to it only if it is given by the consultant or the doctor, and that she will so react only if she is willing to be hypnotized. At this stage of the game, the subject must not be taught to hypnotize herself through a post-hypnotic suggestion.

In some cases, particularly if the obstetrician is a busy man and is not certain that he can be in continuous attendance on the fateful day, it may be advisable to condition the patient to the post-hypnotic suggestion that she will fall asleep if she simply calls her on the phone and orders her to sleep. Similarly, he can have the stimulus-signal written on slips of paper which a trained nurse can deliver to the patient at the appropriate time.

With suitable post-hypnotic responses to the physician established, the hypnotist can, if it is considered desirable, bow out of the picture entirely. However, it is preferred that he remain at least on the outskirts of the proceedings throughout the remainder of pregnancy and during labor and parturition. Even should the patient turn out to be an ideal subject in every respect, contingencies of one sort or another may occur with which the hypnotist will be more adept in dealing than the physician, particularly if the latter is new at hypnotic work. For example, there are right and
HYPNOTISM AND CRIME

By DAVID HUDSON

An idea being very generally promul- gated among people is that the ability of one man to hypnotize another implies the possession of a very dangerous power; one, which in the hands of an unscrupulous man, may be used for criminal purposes. It is not strange that such an idea should prevail among those who have not studied the science except by observation of platform experiments, which are designed to amuse rather than to instruct. There is something so mysterious in the whole subject, viewed from the standpoint of the layman. It would be strange indeed if the average man were not impressed with the indefinable dread of the power of the hypnotist. He sees him, by what seems to be a series of mysterious manipulations, put his subject into a profound sleep and awaken him by a snap of a finger. He sees the subject impressed with a multitude of incongruous ideas,—made to believe that he is hot or cold, that he is stuck to a chair, or that the glass of water he is drinking is a glass of strong spirits. He is made to ride an imaginary horse or to go swimming on the bare floor. He can even be made to feel pain or pleasure, joy or sorrow,—all at the caprice of the man in whose power he has placed himself.

All this and more can be seen at public demonstrations of hypnotism, and under conditions which leave little doubt in the mind of the observer, of the genuineness of the phenomena. The unquestionable obedience of the subjects to the simple suggestions received under these conditions, will often lead the observer to believe that the hypnotist retains such complete control over his subject, this his will is theirs, and their will lies dormant. True,—the subject's will lies dormant, but by choice, and some trace is always intact, guarding the subject against the total loss of his personality.

Public demonstrations in hypnosis are tops in the field of entertainment, but rarely establish a criterion because of the need for variety in the show. Laboratory experiments are apt to produce more favorable results for the serious student. For example: within the confines of one's home, a subject may be hypnotised and put through one or a series of tests as many times as is deemed necessary to derive expected results. Often it is necessary to use several subjects for experiments of this type. (No two people react exactly the same to hypnotic suggestion). But let us now construct a superficial case and look at the results.

We will suppose that a group has assembled and the experiments are about to begin. It is best if the subjects are unaware of what is to take place. This is to insure that the reactions will be perfectly normal and not premeditated.

After the subjects are duly hypnotized, the inevitable 'paper' dagger is placed in one's hand and the suggestion given that one of his daily enemies is present and that he should stab him. Usually there will be a minimum of hesitation and the feat will be carried out with a great dramatic effect.

The next subject is informed that he is a noted pickpocket. The guests are pointed out as a wealthy crowd with bulging wallets. The subject accepts the suggestion at once, and with much show of cunning, proceeds to relieve the guests of whatever is within his reach.

The third subject is made to believe he is an accomplished burglar, and that he should loot the house. If all eyes are taken off the subject for any length of time, the burglary will be completed with much promptitude. My own experience was to find that the thief returned with a miscellaneous collection of valuables which he equitably divided with the hypnotist.

The above are fair examples of the "scientific" experiments which are now being largely indulged in, and which are believed to demonstrate the possibility of employing hypnotism as an instrument of crime. If the average subject, it is argued, in a state of profound hypnotic sleep, is so amenable to the power of suggestion as to plunge a paper dagger into an imaginary enemy at the bidding of a hypnotist, it follows that a criminal hypnotist possesses unlimited power to cause any one of his subjects to plunge a real dagger into any victim whom the hypnotist may select for slaughter.

If the conclusion were true, the power would indeed be a formidable wea-
pon in the hands of an unscrupulous person.

Much has been written on the subject of the possibility of sexual outrage by means of hypnotism, and a few cases are reported. None of them, however, bear the unmistakable stamp of genuineness, and most of them bear internal evidence of fraud. The best authorities on the subject are now free to confess to very grave doubts of the possibility of crime being instigated by this means.

There are important differences of opinion about the offences which hypnotic subjects may be induced to commit. There is no doubt that subjects may be induced to commit all sorts of imaginary crimes in one's study. Personal experience proves this. It is found though, that a repetition of the experiments is superfluous. If the conditions of the experiments are not changed, it is useless to repeat them merely to confirm what we already know.

Actually, these experiments prove nothing. Some trace of consciousness always remains to tell the subject he is playing a game. The subject knows he is among friends. He has confidence in the integrity of the hypnotist, and most likely he is aware of the nature of the experiments. This being so, he enters into the spirit of the occasion resolved to accept every suggestion offered him, and to carry out his part in the program, knowing that no possible harm can befall him. Moreover, he knows that if he performs his part to the satisfaction of the audience, he will receive their applause; and applause to the subjective mind is but welcome. The average hypnotic subject is incredibly vain of his accomplishments.

All these considerations are, however, merely negative evidence against the supposition that the innocent subject can be made the instrument of crime or the victim of criminal assault against his will.

These experiments prove nothing; nor do they disprove anything. We must, therefore, look elsewhere for positive evidence to demonstrate the impossibility of making the innocent subject the instrument of crime.

It will be unnecessary to travel outside the domain of admitted, recorded, and demonstrated facts to prove this impossibility. Indeed, it is difficult to understand how anyone who recognizes the law of suggestion and its universal application to psychological phenomena, can believe for one moment that hypnotism can be made the instrument of crime. Yet, we find a great many serious students who feel, that to hold that hypnotism cannot be so employed is equivalent to an admission that the law of suggestion is not in universal application. The fact is, just the opposite is true.

The first proposition in the line of argument is, that when two contrary suggestions are offered to the subject, the one most acceptable to the subconscious mind must prevail. This is self evident.

The next proposition, almost equally plain, is that auto-suggestion as a factor in hypnosis is equal with all other factors. For many years, auto-suggestion has been recognized in conjunction with hypnotism, and presents a very interesting field for investigation. The field being so broad, it would be impossible to relate its full significance here. I might say, however, that in the true sense of the word; all suggestion, whether hypnotic or not, must become auto-suggestion before full benefits can be derived thereof.

Professor Bernheim mentions it as an obstacle in the way of the cure of some patients. One case he cites is that of a young girl suffering with a bad sprain. "I tried to hypnotize her," says Bernheim; "She gave herself up to it with bad grace, saying that it would do no good. I succeeded, however, in putting her into a deep enough sleep two or three times, but the painful contractions persisted. She seemed to take a malicious delight in proving to the other patients that it did no good at all. She always claimed that she felt worse afterwards."

The inrooted idea, the "unconscious auto-suggestion" was such that it neutralized the efforts of the hypnotist.

Moll, more distinctly than Bernheim, recognizes the power of auto-suggestion as a potent factor to be taken into account when conducting experiments. Strangely enough, though, he too forgets to take it into account when discussing hypnotism in its relationship to crime.

Expressions of the will which spring from the individual character of the subject are of the deepest psychological interest. The more repulsive an action is to a subject, the greater resis-
An Unusual Positive Hallucination

The photo above illustrates a positive hallucination as suggested by Dr. Bruno Furst. While the subject was entranced she was given the suggestion that when Dr. Furst lit his cigarette she would see a mouse running around the floor. The suggestion was post-hypnotic and the photo shows what happened when Dr. Furst actually held a match to his cigarette.
AN OPEN LETTER

Dear Friend:
The idea of an organization for and by Hypnotists has been uppermost in my mind for several years. Two months ago I had a discussion with Dr. Rexford L. North and Frank Graham. The result was the article about myself and the Guild in the July issue of "The Journal of Hypnotism."

In response to this article I received hundreds of requests for additional information by men who are interested in Hypnotism. I wrote these men of our aims and aspirations and almost without exception they have joined our guild.

The "National Guild of Hypnotists" is a club of professional and amateur Hypnotists set up for the betterment and better understanding of a subject that is still taboo in many societies. Ours is the problem of enlightening and spreading the word on the good work that can be done through Hypnosis.

As a member of the Guild you are entitled to many benefits. They are herein enumerated.

1. Membership Card.
2. Membership Scroll (Suitable for framing).
3. Monthly Newsletter on what's going on in the field of Hypnotism.
5. Special Guild stationery and cards at reduced costs.
6. The privilege of buying books and courses at reduced rates.
7. Pins and rings at cost.

There will be other benefits as the organization gets rolling, such as receiving the names of fellow members from your locality.

It is the intention of the Guild to limit the membership to Hypnotists and the Guild has the right to refuse to accept or to bar any person or persons who becomes a member of this group through false statements.

Below is an application blank. Fill it out and send it to the address given with a check or money order for three ($3.00) which is one year's dues.

Fraternally Yours,

GEORGE ROGERS

APPLICATION FORM

NATIONAL GUILD OF HYPNOTISTS

48 Harlem St. Dorchester 21, Mass.

Name __________________________________________

Street __________________________________________

City ___________________________ Zone State __________

Age ___________________________ Sex __________________ Citizen __________________

Please state your reasons for wishing to join this organization.

________________________________________________________________________

How did you learn Hypnotism?

________________________________________________________________________

Amateur __________________________________ Professional __________________________

Kindly enclose check or money order for three ($3.00) dollars with this application; we cannot be responsible for cash.
HERBERT CHARLES TELLS
THE KEAUVER COMMITTEE

1060 Broad Street
Newark, New Jersey
March 30, 1951

Hon. Estes Kefauver,
Chairman Crime Commission
United States Senator of Tennessee
Senate Office Building
Washington, D. C.

Dear Senator:

Originally, my letter consisted of the pages following this one, but I realize that my presentation to the average layman must seem so bizarre, that I feel before you read it, I must submit to you the names of several people of some eminence, authority and prestige who I feel can verify my theorem as one possible of practical use. I have not submitted this matter to them and would have you make the first contact.

My references:

Dr. R. M. Lindner, (Lewisburg Penitentiary) author of “Rebel Without a Cause”—Subject confessed to murder as a by-product of hypno-analysis.

Dr. R. Grinker & Dr. Spiegel, Army psychiatrists.

Dr. R. W. Husband & Dr. F. W. Davis—Menninger Clinic, Topeka, Kans.

Worthwhile as the aims of crime commissions and punitive laws may be, they cannot hope to succeed unless cognizance is taken of the psychological factors which motivate the malefactor. Apparently the law makers totally ignore the dog and attempt to clip the tail. That is, the end result of gambling, crime and corruption, is their only concern. It seems that everyone takes gambling as an uncontrollable instinct which is an integrated of varied strength in all individuals. Accepted as such, the general opinions seem to be: “Everyone is looking for an easy dollar,” “the poor man has only that hope of getting rich quickly,” “the rich man wants to get richer quicker,” “everyone must have some hope,” and generally, “everyone gets a kick out of gambling, it adds zest to living.”

The above are true, of course, but only as the surface sublimation of an infantile desire for omniscience. Psycho analysis, and more modernly hypno analysis, has tended to prove over and over again, that in the infant it is an instinctive trait to think (feel) that the whole world revolves around him, that everything that exists is of importance only insofar as it relates to him. In the optimal adjustment of the individual, psychically, his biological growth would coincide with his understanding that his own importance is paramount to himself but only of relative importance in his environment and culture. We know that the individual does not adjust himself to many other infantile experiences and the feeling of omniscience may also be fixated in adult life.

As a result of parental influence, environment, sibling associations and cultural experience the individual is literally forced to accept his lack of omniscience and that feeling (desire) is repressed. Like all repressions the emotional charge attendant thereto remains dynamic and an unconscious disturbance is set up which constantly seeks conscious expression. The ego attempts to still this unconscious desire and as is usual in such adjustments the original desire which is not rational and therefore culturally unacceptable is resolved in a manner at a tangent to the original wish. The same unconscious desire will be resolved by various individuals in a variety of ways. The fixation of omniscience in the adult is behavior that may show itself in inordinate ambition, and insatiable desire for power, prestige and a seeking for magical means for attainment of the repressed desire. Certain individuals who attain high places in their society (Hitler, Mussolini, Stalin) seek fulfillment by attempting to obtain actual omniscience. Normally, however, it is found that the most common single manner in which the individual attains partial satisfaction is through gambling. This means is within his reach easily and does not carry too great environmental and cultural disapproval.

We are basically concerned in setting forth the postulation that gambling is a common outgrowth of the instinctual infantile desire for omniscience and it finally may reach a point in adult life where it (the gambling desire) is functionally autonomous. Perhaps the writer, having stated the theorem might better leave to research the best pos-
sible methods of therapy. The possibility exists, however, that law makers with their naturally practical approach to problems might very well say, “What shall we do, have the whole population psychoanalyzed?” There exists today a method that could be used in therapy in the convicted criminal class. Our military and law enforcement officers have proof of the effective use of hypnosis. The Nazis used it. The Russians use it to extract “confessions.” There is no other explanation for the fact that men stand up in open court and confess to acts that they know will lead to their execution. (Robert Vogeler, Cardinal Mindszenty) Convicted criminals as part of their sentence should receive enforced hypnosis with a view to re-education in their proper actions when again returned to society. During parole, examination could be made as to the actual activities and inclinations of the criminal.

The basic difference between psycho analysis and hypnotism or hypno-analysis is that in psycho analysis the patient must come willingly and with intense desire to rid himself of symptoms and with an awareness of his problems. Of course such an approach is not possible with the criminal. Hypnosis enables the enforced re-education. Society has as its present primary goal in punishing the criminal an attempt to instill fear of further punishment as a preventive against crime commission. How much better it would be if the criminal were deprived of the will and desire to commit further anti-social acts.

It must be stated realistically that there exists limits to this type therapy. Enforced hypno-analysis is possible only where the subject is a prisoner. The ideas of the hypnotist are most probably the ones that would outline the course of action that the criminal would take and safeguards (such as recordings) would have to be taken. In refractory cases narco synthesis with its toxic effect might be the method best suited. Finally, it is entirely possible that only one-fifth of the attempts would be successful, that is in natural somnambulists. This last difficulty may be overcome by improved technical methodology.

The writer’s explanations as to his arrival at the conclusion that gambling is an offspring of the repressed infantile omniscience instinct, are definitely open to controversy. His theory as to enforeed hypnosis therapy has sufficient data in the files of the War Department and in the F.B.I. to warrant exacting examination. No law, looking for the elimination of widespread crime, should ignore hypnosis as an agency of control.

I trust that you have found the above theory sufficiently stimulating to provoke some thought in future crime investigations.

Very truly yours,
Herbert Charles Hammer
(Professional name: Herbert Charles)
HCH/rc

HYPNOTISM AND CRIME

(Continued from page 29)

tance he offers. Habit and education play an important part here. It is extremely difficult to get positive results from suggesting anything which is opposed to the confirmed habits of the subject.

The surroundings play an important part too. In public, a subject will often decline a suggestion which is designed to make him look ridiculous. A person whom I easily made anesthetic and who reacted very well to all hypnotic suggestions, could not be induced to do a ‘fan dance’ in public. Another such case could only be induced to do so after several sittings. In some cases the suggestion must be repeated several times before it will have any effect, and occasionally a subject will interpret the repetition as a sign of the operator’s incapacity and/or their own ability to resist. Thus, it is necessary to take character into account. It is sometimes easier to induce actions by suggesting each separate movement rather than the action as a whole.

It is interesting to observe the way in which resistance is expressed, both in hypnotic and post-hypnotic suggestions. Often a subject will awaken when a suggestion displeases him, and many a subject will only carry out post-hypnotic suggestions to which he has assented.

Thousands of experiments are being carried on daily with intent to demonstrate the impossibility of controlling the hypnotic subject so far as to cause him to do that which he believes wrong. It frequently happens that one or several subjects at a public demonstration are conscientiously opposed to the use of strong beverages. If the hypnotist

(Continued on page 29)
Behind the Curtains

By FRANK GRAHAM

This issue we introduce Mr. Clark Fonda, able hypnotist who resides at Schenectady, N. Y., and who has won a name among the people of the Mohawk Valley region for his tremendously popular shows in which he gives a lecture demonstration on hypnosis. Mr. Fonda and his wife arrived at the Hypnotism Center on August 10th, and visited for the day. The picture accompanying this article was taken by Mrs. Fonda, and we thereby missed out on the chance to get her picture, also. A note received from the Fonas recently assures us that the visit was a vast success on their part as well as on ours. Mr. Fonda is presently averaging 50 club dates annually in the Albany area, and hopes to raise this figure considerably. He has our best wishes behind him.

Left to right: Mr. Fonda, Dr. North, Elaine Mitchell, Dr. North’s girl Friday, and Billy Weinberg, Public Relations Counsel for the Hypnotism Center.

Wm. W. (Pop) Garver, instructor in speech and journalism at the Black Hills Teachers College in Spearfish, S. Dak., is the moving spirit behind the organization of the local hypnotic society. Meetings are held weekly at the South Dakota School of Mines and Technology. Mr. Garver has done a huge amount of research in the field of hypnosis and has given over 5500 performances. He promises some pictures for the Journal some time this winter when his society gets into full swing.

Don Ainsworth, a student of Dr. North’s until he became proficient in the usage of hypnotic technique, gave a novel hypnotism party at his home recently that attracted the attention of the local press. He is really applying the North technique for fun and frolic and is mystifying friends and relatives. It is reported that all slept very well that momentous evening.

Don Ainsworth demonstrates how easy it is not to tear the paper under hyp.

WE STAND CORRECTED!! A letter from Tom Kilpatrick of Washington, D. C., informs us, among other things, that he is sixteen years old and has been conducting hypnotic lectures for seven months. Congratulations, Tom, that is the spirit we need in this profession. Young blood like yours will put hypnosis over the top in every phase. CARRY ON!!!

CAN SELF-HYPNOSIS HELP YOU?

(Continued from page 4)

Oblivious to staring passersby, she gripped a mail box and stared in dread at the stream of cars, cabs and trucks. Silently, her lips moved in the formula prescribed by the psychiatrist. At last, the repeated phrase touched off a trigger in her consciousness and she felt a surge of freedom and confidence. Slowly, incredulously, she walked across the street without flinching. From then on, she was all right, thanks to self-hypnosis practiced whenever she felt fear returning.
CLASSIFIED ADS
8c per word per insertion

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MISCELLANEOUS

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HYPNOTISM CONDITIONING FOR CHILDBIRTH

(Continued from page 18)

wrong ways of making verbal suggestions in hypnosis. The intelligent physician will invite instruction in this regard, and will consult the hypnotist whenever he is uncertain about any eventuality connected with hypnosis and its application to the individual patient. Moreover, the latter will derive a considerable amount of reassurance from the knowledge that an expert hypnotist is at her beck and call.

Tests for Anaesthesia

With both men en rapport with the patient, they proceed to determine the exact degree of anaesthesia that can be produced. It will usually suffice to stick a sterilized needle through the second layer of skin in the fleshy part of the forearm, after suitable suggestions have been made that the arm is insensitive to pain. Reactions may be as follows:

1. The subject will evince no pain whatsoever, and will deny feeling even the slightest sensation in the arm. This is complete anaesthesia and is sufficient evidence that the subject is under hypnosis. There can be no question that hypnosis will be adequate for any pain under childbirth without the aid of any other anaesthetic.

2. The patient feels no pain, but is aware of a light touch every time her arm is pricked with the needle. This is analgesia (insensibility to pain); anaesthesia (insensitivity to sensation or touch) is incomplete. To be safe, several other tests with which a physician is familiar should be made to ascertain that a sufficient degree of analgesia for the intended purpose exists. The same degree of analgesia should be attainable post-hypnotically.

3. The patient feels no sharp pain, but upon deep probing evinces unpleasant sensations. Modifications in respiration and pulse-rate further denote her distress, whereas in the previous instances no such changes are in evidence. With this type of subject hypnotic anaesthesia is not be relied upon, but may be employed instead of the usual chemical hypnotic to promote relaxation as well as to help prepare the patient for the coming ordeal mentally. Since the anticipation of pain is an important factor in the intensity with which it is felt, such expectations and fears can be effectively relieved with the aid of even light hypnosis.

In discussing the first type (complete anaesthesia), I mentioned that the subject "will deny feeling even the slightest sensation" when pricked with the needle. This statement is literally true, but requires some clarification. While there seem to be no modifications of respiration, heart-action, and pulse-rate, careful tests with the galvanometer ("lie-detector") indicate that the subject does know that she is being pricked and is even aware of the number of times she was pricked with the needle. This can be proved in a number of ways, one of which is simply by questioning her in a subsequent hypnosis. Another method involves the marking off of a rough rectangle on the forearm, with the suggestion that the area within this space will be anaesthetic while the rest of the arm will remain normal. With the subject's eyes closed, the arm is then pricked in different places, while she is instructed to say "Yes" every time she feels the prick, "No" when she doesn't. It is quite easy to deceive the subject by stimulating the uneven fringe areas. Moreover, a not too alert subject will often respond with "No" when stuck well within the anaesthetic area! In other words, she says in effect "No, I didn't feel it that time," although she is supposed to be totally unaware that she is being stuck with that needle!

Lest the uninitiated feel that fraud is involved here, let me hasten to stress that hypnosis is entirely a mental state, in which the dominant subjective mind believes implicitly whatever it is told to believe. Regarding anaesthesia specifically, the subject has to be aware that she is being pricked with the needle before she can deny that she feels the pain. This is putting it in the simplest terms possible. For all practical purposes, however, the anaesthesia is as effective as the chemical types, limited only by the degree of hypnosis, i.e., the extent to which the archaic and credulous subjective mind dominates the individual. Putting it somewhat differently, the pain-impulses are actually received by the brain, but the subjective mind immediately inhibits the pain-sensations.

I shall not presume to deal with the obstetrical aspects of childbirth. The application of hypnosis does not affect any of the usual routines employed in hospitals except the administration of anaesthetics. After the prospective mother is admitted, she is hypnotized
and one of two alternative procedures is followed:

**Post-Hypnosis**

If the patient is a profound somnambule with good post-hypnotic responses, it is entirely unnecessary to keep her under hypnosis for extended periods of time. It is simpler and far more convenient to "set her up" for post-hypnotic control. This is done somewhat as follows:

She is told that after she awakens from the hypnosis, she will be normal in every way, alert and happy, free from any but the pleasantest thoughts and anticipations; that for the remainder of labor, during parturition and even postnatally, she will feel no pain or distress of any sort; that throughout this period she will, though wide awake, obey none-theless all suggestions made by the obstetrician and/or the consultant in the same manner as when she is under hypnosis. These suggestions are repeated a number of times for emphasis. It is even possible, should she desire to experience some of the sensations of childbirth, to permit her to do so without feeling the attendant pain and distress. She is then awakened.

It must be understood that though the patient is awake to all appearances, and is able to converse, reason and behave as if in full control of all her conscious faculties, she is nevertheless to all intents and purposes in a condition tantamount to hypnosis. This condition is sometimes called "walking hypnosis." All suggestions made by doctor and hypnotist will be carried out as completely as if she were in the usual hypnotic trance. This startling fact can be fully appreciated only by persons who have observed and understand the phenomena of post-hypnosis.

**In the Trance State**

Should her post-hypnotic responses be inadequate, the patient can be hypnotized shortly after entering the hospital, given the necessary suggestions and then awakened. When the pains become severe, she can be quickly re-hypnotized and kept under as long as necessary. If this procedure is followed, the patient should not be awakened soon after delivery, but kept under hypnosis as long afterwards as it is expected that distress might be experienced. The hypnotic trance can be prolonged almost indefinitely, providing suggestion is administered from time to time to prevent the trance from becoming passive and lapsing into natural sleep.

**Some Advantages of Hypnotic Anaesthesia**

Through hypnosis, childbirth becomes as natural a phenomenon as can reasonably be expected.

A partial enumeration of the advantages of natural over chemical anaesthesia shows that this method certainly merits the attention of more medical men.

1. Elimination of fear, pain and distress before and during labor and parturition, as well as post-natally.
2. Possibility of allowing the mother to experience the sensations of childbirth without the attendant pain.
3. The contractions can be either accelerated or retarded, purely through the medium of verbal suggestion.
4. Hemorrhage is considerably reduced.
5. Elimination of pain after the baby is born facilitates recovery.
6. The patient will respond to the doctor's suggestions and cooperate in any way he desires.
7. There are no undesirable post-operative effects from the use of hypnosis as there are from other anaesthetics.
8. Frequently the baby is born narcotized or cyanotic or with excessive amounts of mucous due to the use of narcotics or chemical anaesthesia. Hypnosis precludes these possibilities.

**The Hypnotic IDEA EXCHANGE**

(The following are interested in corresponding and exchanging ideas about hypnosis. Listing in this department costs 50c per issue. Only names and addresses will be printed.)

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**KARL FLAME,** P. O. Box 171, Sta. "H", Montreal, Quebec, Canada.
HYPNOTISM AND CRIME

(Continued from page 24)

held a glass of water in his hand and
told one of the subjects that he would
become very ‘drunk’ upon drinking it;
he would probably meet with much op-
opposition and the ultimate refusal to
complete the task.

Like all such experiments on
the stage, they are passed by as simply
amusing, and no lesson is really learn-
ed from them. The intelligent student,
however, cannot fail to see the far-
reaching significance of the refusal of
a subject, to violate his temperance
principles.

Every platform experimenter knows
that while he can induce several of his
subjects to go swimming in an imagi-
nary pool, he can never induce one
of them to divest themselves of their
clothing beyond the limits of decency.

An attempt to contradict or argue with
a subject under these circumstances,
will cause confusion in the subject’s
subconscious mind, and generally re-
sult in restoring the subject back to
consciousness.

It will thus be seen then, that the
question as to whether hypnotism can
successfully be employed for criminal
purposes, must obviously be determined
in each individual case by the character
of the persons engaged in the experi-
ment. If the subject is a criminal,
or of criminal character, he might fol-
low the suggestions of a criminal hyp-
notist and actually perpetrate a crime.
In such a case, a resort to hypnotism
would be unnecessary and no possible
advantage could be gained by its em-
ployment.

The Best Books on Hypnotism

HYPNOTISM CAN HELP by S. Irwin Shaw. A Detroit dentist with a life long
interest in hypnotism found that many of his patients formed the habit of bringing
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DR. REXFORD L. NORTH

Book Reviews

For Fun -- For Health

by Dr. Clark R. Bellows

The author of the above entitled book is certainly among the elders of the present day school of hypnotists, one of the hardy pioneers in this much and abused field. The doctor has a very extensive background in all phases of hypnosis, and is director of The Institute of Applied Hypnology in New York. The gradual recognition accorded hypnosis by other professions owes itself largely to the author of this book and men of his ilk.

The book, which serves as an official text of the Institute of Applied Hypnology, completes a cycle in the removal of all sham and mystery from the hypnotic scene, and vividly sets forth its virtues, along with its failings, in cryptic style of which the author is master. While not too technical in scope, it has as its purpose the teaching of hypnosis as a medium of entertainment and the contents are directed along the lines of understanding of the intelligent layman. The very first chapter plainly states that "any normal person can become (within limits), a hypnotist and that one need not be a genius and should definitely not be mystic. A point upon which we are heartily in accord with the author.

The fifteen chapters of the book, along with its notable introduction by Robert Francis Kaufmann, director of the American Society of Hypnotists, inevitably will prove a favorite in the library of every devotee of the art. The beginner, as well as the accomplished professional, is exhorted to read this book thoroughly as it contains many methods previously unknown by many old-timers in the field that we have talked to.

An important point brought out by the book is the vast extreme between entertainment and therapy. It states, "... if you are not recognized as qualified to do so, do not attempt to cure anybody of anything! Leave curing to doctors! They are well aware of the therapeutic values of hypnosis!"

You are sure to gain much from this book, and will want it not only as a reference, but as keepsake. It makes a wonderful gift for hypnotically inclined friends too! !

EDOUARD J. BELGIQUE
(Cathy Publishing Co., New York: 1946. $1.00 — May be ordered from book department of this publication.)

Books Wanted

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BRAMWELL, J. Milne: "Hypnotism and Treatment by Suggestion."

HARTE, Richard: "Hypnotism and the Doctors" (2 volumes) L. N. Fowler: 1903.


LUSTIG, David J.: "Dunninger's Master Methods of Hypnotism."


CLARK, Hull: "Hypnosis and Suggestability".

FLOWER, Sidney: "Somnopathy".
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