

Andrew Newton  
A brief history of  
Hypnosis

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From around 2000 to 1000 BC, the ancient Egyptians used 'Sleep Temples' – places used for healing a variety of ailments, usually psychosomatic. The treatment involved chanting (psychologist Emile Coué used a similar technique, as we shall see) or placing the patient into a trance-like state and analysing their dreams to determine treatment. Meditation and prayer were also part of the process, involving relaxation techniques which provided the recipient with an opportunity for introspection and to restore energy to mind and body.



*Hypnosis – from its earliest beginnings in ancient Egypt to ancient Greece and Rome.*

Hypnos was the god of sleep in Greek mythology and also the personification of sleep. He lived in a cave in the Underworld, where no light was cast by the Sun or the Moon. The earth in front of the cave was said to be full of poppies and other sleep-inducing plants. The river of forgetfulness flowed through the cave.

The Romans borrowed the idea of 'ypnos' – sleep healing – from the Greeks. In Greek mythology, Hypnos was the god and the personification of sleep. He lived in a cave in the Underworld, where no light was cast by the Sun or the Moon. The earth in front of the cave was said to be full of poppies and other sleep-inducing plants and the river of forgetfulness flowed through the cave.

To understand how mythology transformed into science, we have to fast forward a couple of thousand years to the early part of the 18th century, to meet a Catholic priest by the name of **Father Johann Joseph Gassner** (1727-1779). By 1770, Gassner had become a noted exorcist and while, he gained celebrity status by claiming to 'cast out devils' and cure the sick by means of prayer while they lay prostrate on the floor, he was also attacked as an impostor. Fortuitously for Gassner, the Bishop of Regensburg believed in his honesty and he was allowed to continue his successful, if dubious, mission.

Gassner's methods have been linked to a special form of the hypnotic process – it was certainly dramatic – and some think of him as a predecessor of the modern hypnotist. Gassner was no stranger to making an entrance, striding into church in flowing robes with an impressively large crucifix on a pole, often accompanied by loud religious music. He strikes me as the sort of person who, had they been available, would have had no hesitation including a laser show and a smoke machine!



Certainly, his reputation was formidable, something that undoubtedly bumped up his success rate, the poor possessed victims were already writhing on the floor before Gassner even got started. The formidable priest would incant a few words – something along the lines of ‘*get thee behind me Satan*’ or some other such nonsense, then merely touch the unfortunate victim with the large brass crucifix, and hey presto! the evil spirits and demons that possessed them were banished forever.

Fascinated medical doctors attended his gigs and most went away even more perplexed than they were at the start. One of those present at Father Gassner’s Vienna concert, part of his 1776 European tour, was a German physician who coincidentally also had an interest in astronomy, **Franz Friedrich Anton Mesmer**

*Left: An engraving of Johann Joseph Gassner*

Mesmer saw through Gassner’s theatrical charade almost immediately and quickly came to the inescapable conclusion that Gassner’s cures were not of a religious nature at all and in no way the result of demonic possession or evil spirits, but rather something to do with the properties of the metal in Gassner’s giant crucifix, which he (Gassner) placed on the head of each supplicant and which seemed to have an immediate calming effect, their psychosomatic illnesses cured on the spot.

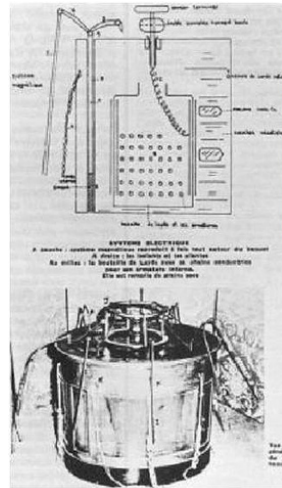
This was an observation that obsessed Mesmer for the rest of his life and the cause of a dispute between Gassner and Mesmer that would remain at the centre of hypnotherapy for the next two centuries. Today, psychologists and psychiatrists would recognise this for what it is – stand-up therapy.

Mesmer (1734-1815) immediately began experimenting with metals and magnets, theorising there must be a natural energetic transference that occurred between all animate and inanimate objects that he called Animal Magnetism. The theory attracted a wide following from around 1780 to 1850, and astonishingly, continues to have some influence today. and his work – and reputation – attracted the attention of the social elite, who bored spending Sunday afternoons at the lunatic asylum, flocked to Mesmer’s soirees instead.

One of the things that Mesmer discovered early on was that the more dramatic he made it, the more likely it was that people would be cured – and cured they were, especially when the illness was psychosomatic. One widely reported case of hysterical blindness being cured impressed nearly everybody.

There was only one problem which Mesmer hadn’t foreseen – in a fit of professional jealousy, other outraged members of the medical profession had Mesmer kicked out of

town without bothering to investigate his claims properly, and Mesmerism as it became known, became almost universally discredited for the next two hundred years. Not to be deterred, Mesmer set up shop again in fashionable Paris and became so famous that in 1784 a Royal Commission was set up by none other than King Louis XVI to inquire into Mesmer's activities.



*Franz Mesmer and his baquet, or 'tub', complete with instructions*

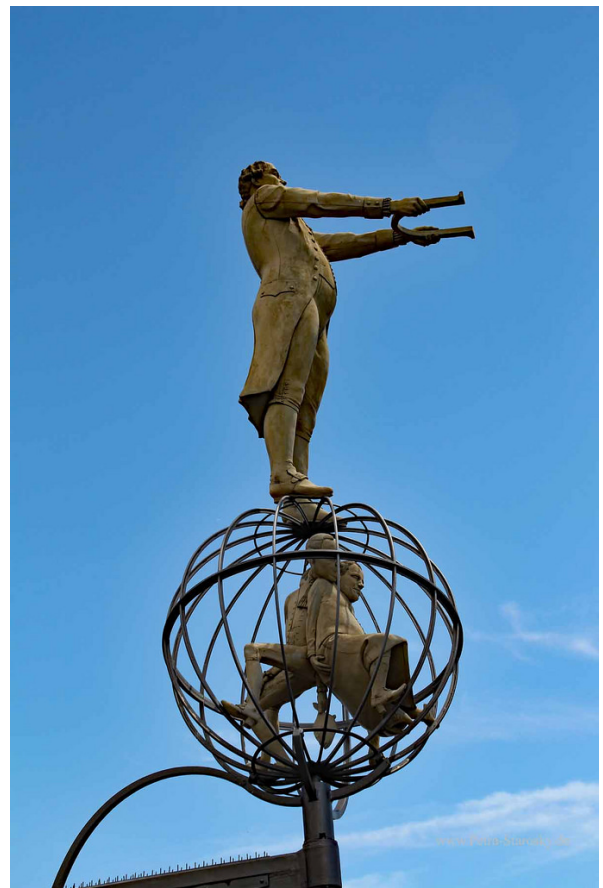
By 1775, Mesmer was treating patients in Vienna using magnets. The patients would hold on to metal rods connected to magnets in a barrel of water, supposedly the medium by which the magnetic fluids would then enter the body. Sadly, the magnets were not having any effect at all – it was expectation and suggestion that was working the real magic. Nonetheless, Mesmer's demonstrations became extremely popular and soon attracted the attention of the authorities. Among cries of 'charlatan!' Mesmer was run out of town by outraged doctors and fled to Paris where he set up shop again.

In 1784, King Louis XVI appointed a Royal Commission to investigate 'animal magnetism'. It included four members of the Faculty of Medicine and five additional commissioners from the Royal Academy of Sciences.

Another member the Commission was someone who had a great interest in the newly discovered electricity and magnetism, the American ambassador to France, Benjamin Franklin. The commission conducted a series of experiments aimed not at determining whether Mesmer's treatment worked, but whether he had discovered a new physical fluid. It concluded there was no evidence of such a fluid – instead they dismissed whatever benefits the treatment produced, and attributed the whole thing to imagination.

Of course, the commission was correct, but they failed to recognise the enormous potential of harnessing the imagination as a cure, and Mesmer had achieved plenty of those.

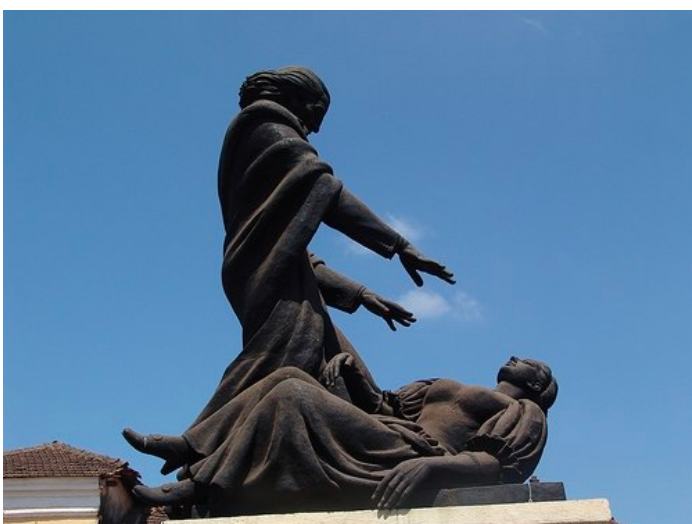
In 1785 Mesmer left Paris, again driven into exile after the investigations into animal magnetism. By 1790 he had returned to Vienna to settle the estate of his deceased wife



Maria Anna. Mesmer continued to practice in Frauenfeld, Switzerland, for a number of years and died in Meersburg, Germany in 1815, where his statue stands today.

*Above: An engraving of one of Mesmer's 'healing' soirées / Mesmer's statue, overlooking the lake in Meersburg, Baden-Wurtemberg, Germany.*

Other mesmerists were to appear during this period, including one Abbé José Custódio – a Catholic monk/missionary working in India – more popularly known as **the Abbé Faria**. Faria was a pioneer of the scientific study of mesmerism. Unlike Mesmer's 'magnetism', Faria understood that suggestion and autosuggestion were the real forces at work. In the early 19th century, Abbé Faria reintroduced mesmerism to Paris.



Faria believed that what he termed 'nervous sleep' belonged to the natural order. From his earliest magnetising séances in 1814, he boldly developed his theory that nothing came from the 'magnetiser' – everything emanated from the subject – generated in their imagination.

*Left: Statue of the Abbé Faria hypnotising a woman in Panjim, Goa, India.*



Scottish surgeon **James Braid** (1795-1860) became the first, in 1840, to coin the word hypnosis, after the Greek 'ypnos', meaning 'sleep'. He was a significant, important and influential pioneer of hypnotism and hypnotherapy and is regarded by many as the first genuine hypnotherapist and the father of modern hypnotism.

Although Braid believed that hypnotic suggestion was a valuable remedy in functional nervous disorders, he did not regard it as a rival to other forms of treatment, nor wish in any way to separate its practice from that of medicine in general. He held that whoever talked of a 'universal remedy' was either a fool or a knave: similar diseases often arose from opposite pathological conditions, and the treatment ought to be varied accordingly.' (John Milne Bramwell, 1910.)

Another a Scottish surgeon, **James Esdaile**, M.D., (1808-1859) served for twenty years with the East India Company. He is a notable figure in the history of Hypnotism – he performed over 300 operations – including amputations – using hypno-anaesthesia.



In 1830, Esdaile was appointed as Civil Assistant Surgeon to the British East India Company and was based in Calcutta, Bengal, at that time the capital of British India.

On 4 April 1845, Esdaile performed his first 'mesmeric procedure.' By his own admission, he had never seen a mesmeric act, but given the level of pain of this specific patient, and the understanding that he had gained from what he had read, it occurred to him that mesmerism might be of great value. In a short time, Esdaile gained a wide reputation amongst the European and indigenous communities for painless surgery.

By 1846, Esdaile's work with mesmerism-assisted painless surgery had attracted the attention of the Deputy Governor of Bengal, Sir Herbert Maddocks. Maddocks appointed a committee of seven reputable medical and

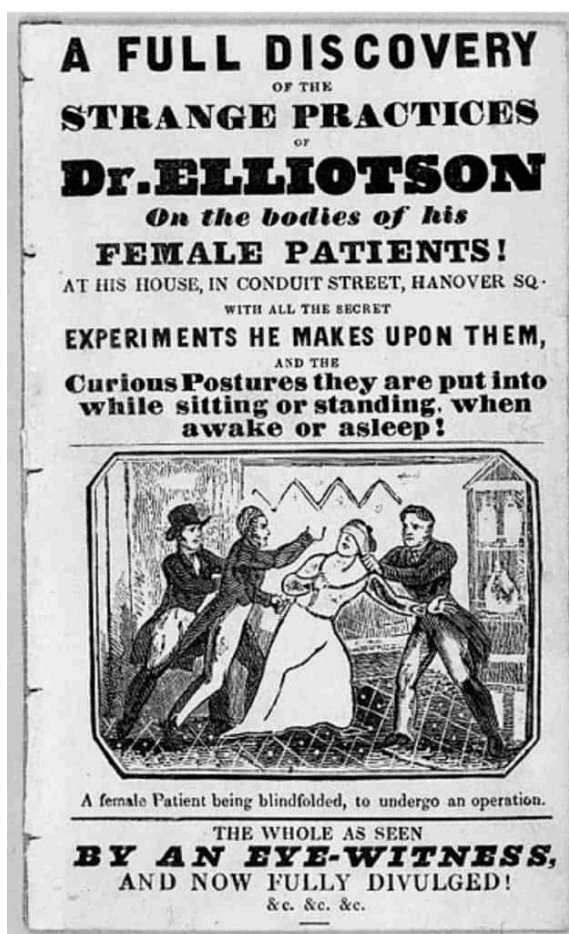
non-medical officials to investigate Esdaile's claims. They submitted a positive report on 9 October 1846, and a small hospital in Calcutta was put at his disposal.

By 1848, a mesmeric hospital supported entirely by public subscription was opened in Calcutta especially for Esdaile's work but was closed 18 months later by the new Deputy

Governor of Bengal, Sir John Littler. Esdaile's colleague, John Elliotson, continued to practise hypnotism at the Sukeas Street Dispensary until he left India in 1851.

In 1848, Esdaile was appointed to the position of Presidency Surgeon and, in 1849, appointed to the position of Marine Surgeon. Retiring from the British East India Company in 1853 on the expiration of his 20 years' contract, he became a Vice-President of the London Mesmeric Infirmary and a Vice-President of the Scottish Curative Mesmeric Association. He briefly returned to Scotland before his death on 10 January 1859.

**John Elliotson** (1791-1868) was by any standards a highly qualified medical doctor. He gained his M.D. in Edinburgh in 1810, another M.D. at Oxford in 1821, an F.R.C.P. in London in 1822, was made a Fellow of the Royal Society in 1829, Professor of the Principles and Practice of Medicine at University College London in 1832, and senior physician to University College Hospital in 1834.



*Above: John Elliotson M.D.*

Elliotson became interested first in phrenology, and was the founder and first President of the London Phrenological Society in 1823. His interest in hypnotism was initially aroused by the demonstrations given by Richard Chenevix in 1829 and re-awakened by Baron Dupotet de Sennevoy's demonstrations in 1837.

Elliotson began experimenting with the Okey sisters – Elizabeth (17) and Jane (15) – who had been admitted to his hospital in April 1837 for treatment for epilepsy.

Elliotson soon began using the sisters as subjects and in 1837 he inserted a needle into Jane Okey entirely painlessly, without her even being aware that it had taken place. He did the same into the neck of Elizabeth Okey (the older sister) whilst she was hypnotised.

The great stage hypnotist Peter Casson used to do the same in his act in theatres around the country in the post World War II era. Casson would insert a long surgical needle through the flesh of the arm and out the other side and then remove it, much to the delight of the audience. He would then 'awaken' the subject and tell him he was going to insert a surgical needle through the flesh of their arm and then remove it. An argument would then ensue, culminating in Casson telling the subject that in fact he had just done it. Absolutely hysterical I'm sure.

Elliotson was interested in the so-called 'higher states' of mesmerism – clairvoyance, transposition of the senses (for example seeing with the fingers) thought transmission, physical rapport or 'community of sensation,' psychical rapport, and so on.

Convinced that the elder sister, Elizabeth Okey, had a talent for medical clairvoyance and that she was able to see into the body, diagnose illness, prescribe treatment, and deliver a prognosis, Elliotson took her down into the wards in the dead of night and had her both diagnose and prescribe treatments.

But in August 1838, Thomas Wakley, a senior surgeon at the hospital, conducted a series of experiments on the sisters in front of several witnesses. His tests focussed on whether the girls could tell 'mesmerised' from 'unmesmerised' water, an utterly pointless experiment if ever there was one. When they failed to do this consistently, he denounced them as frauds and proclaimed mesmerism a complete fallacy. In reality, the experiments did not prove the girls were faking nor did they show that mesmerism was false.

By the end of 1838, Elliotson was forced to resign from the hospital. The Council of the University College, after months of deliberation, passed a resolution on 27 December 1838 '*That the Hospital Committee be instructed to take such steps as they shall deem most advisable, to prevent the practice of Mesmerism or Animal Magnetism within the Hospital.*'

Elliotson, on reading the contents of the resolution, immediately resigned all his appointments.

But Elliotson's fall from grace was by no means the end of the matter. Wakley did all that he could, as editor of *The Lancet* and as an individual, to oppose Elliotson, and to place all of his endeavours and enterprises in the worst possible light.

For example, in addition to an extensive range of articles in *The Lancet* over a number of years, there is also an anti-Elliotson pseudonymous work attributed to Wakley – *Undeniable facts concerning the strange practices of Dr. Elliotson... with his female patients; and his medical experiments upon the bodies of... E. & J. Okey, etc. (1842)* a copy of which is held in the British Library.

Another, also most likely written by either Wakley or one of his associates, is held in the collection of the Wellcome Library. What an unpleasant mean-spirited jealous obsessive twat Wakley must have been!

French physician **Ambroise-Auguste Liébeault** (1823-1904) began his studies in 1850 at the University of Strasbourg at the age of 26. He established a practice in the village of Pont-Saint-Vincent, near the town of Nancy. He made many advances in the field of hypnosis and hypnotherapy and co-founded the Nancy School of Hypnosis.





*Above: Liébeault (standing, left) at his clinic in Paris.*

The Nancy School was based on a hypnosis-centered approach to therapy as opposed to the previously adopted hysteria-centered approach used by the Paris School and the Salpêtrière Hospital. The Nancy School was distinguished by being considered a 'Suggestion School' – whereas the Salpêtrière Hospital was the 'Paris' or 'Hysteria School.'

*A fundamental belief of the Nancy School was that hypnosis was a normal phenomenon and not a product of hysteria. In addition to the foundation of the Nancy School, while working with hypnosis, Liébeault published several books on his theories, techniques, and results.*

In 1886, **Dr. Hippolyte Bernheim** (1840-1919) a French physician and early neurologist published his book *Suggestion*, still considered a classic hypnosis text today. He is chiefly known for his theory of suggestibility in relation to hypnotism.

Bernheim graduated as doctor of medicine in 1867 and the same year, became a lecturer at the university and established himself as a physician in the city. When the medical faculty took up hypnotism, around 1880, Bernheim was very enthusiastic and soon became one of the leaders of the investigation.



Bernheim [Left] also had a significant influence on Sigmund Freud, who had visited him in 1889 and witnessed some of his experiments, and had already translated Bernheim's *On Suggestion and its Applications to Therapy* in 1888. (Freud had already studied with Charcot in Paris.)

Freud described how he 'was a spectator of Bernheim's astonishing experiments upon his hospital patients, and I received the profoundest impression of the possibility that there could be powerful mental processes which nevertheless remained hidden from the consciousness of man.'

Freud became a pupil of Bernheim's and it was as a result of Bernheim's influence that led to Freud's development of psychoanalysis.

Meanwhile, Bernheim increasingly turned away from hypnosis and toward the use of suggestion in the waking state.



**Dr. James Martin Charcot** [Left] is best known for his work on hypnosis and hysteria and in particular for his work with his 'star' hysteria patient Louise Augustine Gleizes. Perhaps more important is that Charcot is considered the founder of modern neurology.

Charcot initially believed that hysteria was a neurological disorder caused by hereditary features in patients' own nervous systems, but near the end of his life he concluded that hysteria was in fact a psychological disease.

Charcot's interest in hysteria and hypnosis came at a time when the general public was fascinated in 'animal magnetism' and Mesmerism. Charcot and his school considered the ability to be hypnotised was a clinical feature of hysteria. For the members of the Salpêtrière School, susceptibility to hypnotism was at this time still synonymous

with hysteria, although it was later recognised that ‘grand hypnotisme’ (with its link to hysterics) be differentiated from ‘petit hypnotisme’, which corresponded to the hypnosis of ordinary people. Both premises are mistaken.

The Salpêtrière School’s position on hypnosis was sharply criticised by the leading neurologist Dr. Hippolyte Bernheim, who argued that the hypnosis and hysteria phenomena Charcot had famously demonstrated were due to suggestion. But Charcot himself had harboured longstanding concerns about the use of hypnosis in treatment and its effect on patients. He was also concerned that the sensationalism hypnosis attracted had robbed it of its scientific interest and that the quarrel with Bernheim had somehow ‘damaged’ hypnotism.

**Josef Breuer** (1842-1925), a distinguished Austrian physician who made key discoveries in neurophysiology, and whose work in the 1880s with his patient Bertha Pappenheim – also known as Anna O – developed the ‘talking cure’.



Breuer [Left] laid the foundation for psychoanalysis as developed by his protégé Sigmund Freud. Breuer was then a mentor to the young Freud and had helped set him up in medical practice. Freud, he said, was looking for a grand theory that would make him famous and trying to identify a single cause of hysteria, such as sexual conflict. Breuer, on the other hand, was concerned about the many factors that produce symptoms, including the almost infinite different kinds of traumas.

Breuer, while he valued Freud’s contributions, did not agree that sexual issues were the only cause of neurotic symptoms. In 1907, he wrote a letter to a colleague stating that *‘Freud is a man given to absolute and exclusive formulations: this is a psychological need which, in my opinion, leads to excessive generalisation.’*

In 1894 Breuer was elected a Corresponding Member of the Vienna Academy of Sciences and in 1895 Freud and Breuer had followed up on their work together by publishing *Studies of Hysteria*. But Freud later turned on Breuer, no longer giving him any credit, and helped to spread a rumour that Breuer had not been able to handle erotic attention from Anna O and had abandoned her case, although research indicates this never happened – Breuer remained involved with her case for several years while she remained unwell.

**Émile Coué de la Châtaigneraie** (1857-1926) was a French psychologist and pharmacist who introduced a popular method of psychotherapy and self-improvement based on positive auto-suggestion. Coué had noticed that in certain cases he could improve the efficacy of medicine by praising its effectiveness. He found that those patients to whom he praised the medicine experienced a noticeable improvement compared to patients to whom he said nothing. So began Coué’s exploration of the use of hypnosis and the power of the imagination.

Coué discovered that patients could not be hypnotised against their will and more importantly, the effects of hypnosis waned when the subjects regained consciousness. He eventually turned to autosuggestion which he describes as *‘an instrument that we possess*

at birth, and with which we play unconsciously all our life, as a baby plays with its rattle. It is however a dangerous instrument; it can wound or even kill you if you handle it imprudently and unconsciously. It can on the contrary save your life when you know how to employ it consciously.'



Coué believed in the effects of medication but he also believed that people's mental state is able to affect and even amplify the action of medication. This is certainly true and more modern research has shown it to be so.

By consciously using autosuggestion he observed that his patients could cure themselves more efficiently by replacing their 'thought of illness' with a new 'thought of cure.' Coué discovered that repeating words or images enough times causes the unconscious to absorb them and cures resulted from using imagination or 'positive autosuggestion' to override one's own willpower.

Coué thus developed a method that relied on the simple principle that any idea exclusively occupying the mind turns into reality – but only to the extent the idea is within the realm of possibility.

For instance, positive autosuggestion cannot cause a severed limb to grow back, but if a person firmly believes that his or her asthma is disappearing, then it may indeed actually disappear – the body is able physically to overcome or control the illness, confirming the growing belief that you are a mind with a body, not a body with a mind!

Conversely... thinking negatively about the illness will also encourage both mind and body to accept this thought as fact.



Coué argued that no suggestion made by himself became reality unless it was translated by his patients into their own autosuggestion. In this way, they were really healing themselves, and could do this even without him if they used the formula *'Every day, in every way, I'm getting better and better.'*

Coué argued that the idea of the formula would penetrate the unconscious mind, where it would bring about the desired changes in both mind and body. He believed this would happen because the unconscious governs all our thoughts, behaviour, and organic functions. It so powerful that it controls us like puppets – unless we learn how to control it through autosuggestion.

*Left: Emile Coué de la Châtaigneraie*

Rather than employing any effort of will, they were to employ this suggestion while in a state of passive relaxation, such as upon awakening or before going to sleep at night. We now understand that rapid and ritualistic repeating of a mantra twenty times a day really does work. Emile Coué was not only right, he was a genius!

**By the late 19th and early 20th centuries, stage hypnotists were coining it in playing to capacity crowds in the music halls of Britain and in the one-man-one-horse traveling shows of North America. But still, the medical profession remained unconvinced, possibly because medical people rely more on empirical evidence rather than evidence which is intangible.**

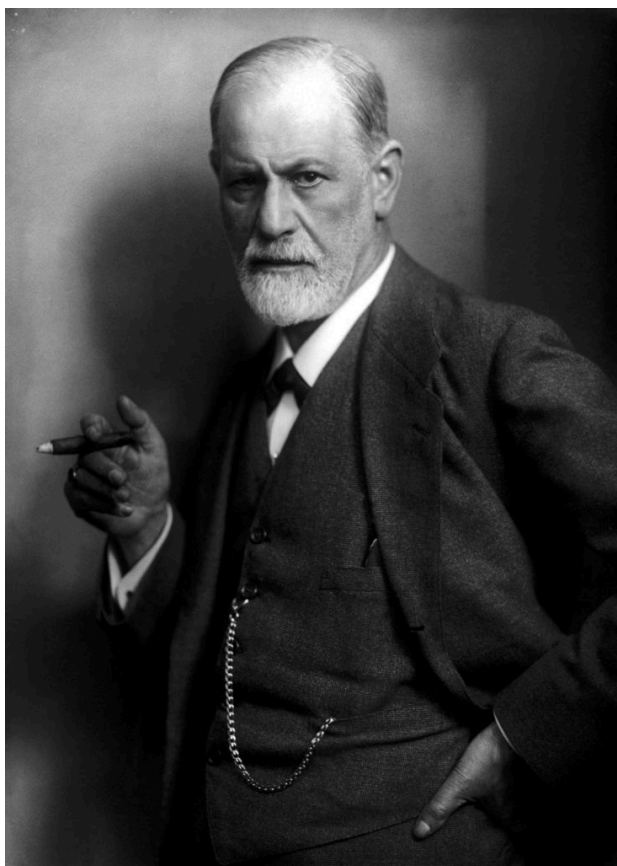
**This is a problem the early psychologists had – trying to study the mind is not the same as studying the brain, which is tangible. The study of the mind requires a very different approach and can only be accomplished by the study of behaviour, of cause and effect, and a generous helping of guesswork.**

**An article in the *British Medical Journal (BMJ)* stated that hypnosis was nothing more than *'an excitement of the imagination... nonetheless, its application to pain relief cannot be underestimated.'***

**How right the Journal was! But by the time the BMJ had lowered itself enough to even mention hypnosis, Mesmerism had gone through a series of brand-name makeovers, including the more cumbersome names of hypneurology, neurhypnology and hypnopsychometry. Eventually though, everyone agreed on the word 'hypnosis', probably because it was easier to spell.**

**But it was a mistake – the word 'hypnosis', borrowed from the Greek meaning 'sleep', still carried with it the idea of sleep and an air of charlatanism – hypnosis is not even distantly related to sleep. That single error of judgement has been the cause of much confusion ever since.**

In 1930 **Sigmund Freud** had been awarded the Goethe Prize in recognition of his contributions to psychology and to German literary culture. In January 1933, the Nazis took control of Germany, and Freud's books were prominent among those they burned and destroyed.



However, Freud continued with his optimistic underestimation of the growing Nazi threat and was determined to stay in Vienna, even after the Anschluss of 13 March 1938 when Nazi Germany annexed Austria, and the outbreaks of violent anti-Semitism that ensued. It was the shock of the detention and interrogation of Anna Freud by the Gestapo that finally convinced Freud it was time to leave Austria for America, where his strange cocaine-fuelled fixation with sexual repression resulted in the formulation of the laugh-out-loud *Oedipus Complex*.

In the end, Freud abandoned hypnosis altogether because he found it too unreliable. Instead, he pursued psychoanalysis where he concerned himself with asking patients embarrassing questions about their mothers.

*Left: Sigmund Freud*



During World War II, **Dabney Ewin M.D.** was drafted into the U.S. Army as a medic. As the Americans advanced across Europe, Ewin, in charge of an army field hospital, discovered his unit had run out of morphine. Ewin's inspired solution was to instruct the other medics and nurses to administer injections of distilled water. The effect was dramatic – nearly 70% of the wounded personnel reported a significant decrease in pain, proof of the power of suggestion if ever one were needed.

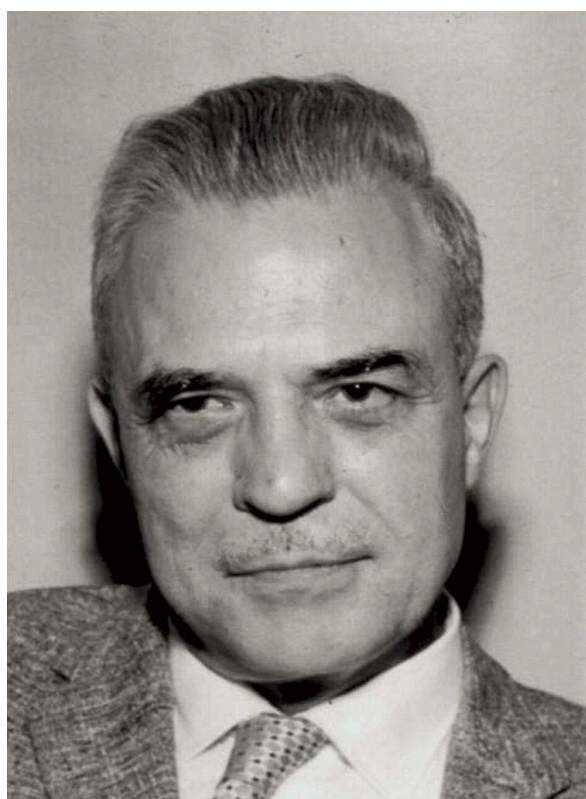
*Left: Dabney Ewin M.D.*

Word of Dabney Ewin's achievement made him famous. In my view, it was a watershed moment in the history of hypnosis. Even the skeptical medical community had to accept that there really was something to all this hocus-pocus, although it was almost certainly psychologically based and more research was needed.

**Milton Erickson** (1901-1980) American psychiatrist and psychologist specialising in medical hypnosis and family therapy took a sharp interest in the curative effects of hypnosis.

Erickson's unique talent was that he was able to think outside the box. He was founding president of the American Society for Clinical Hypnosis and a Fellow of the American Psychiatric Association, the American Psychological Association and the American Psychopathological Association. Astonishingly, he was largely self-taught. He also grew up dyslexic and colour blind and suffered from polio and frequently drew upon his own experiences to provide examples of the power of the unconscious mind.

As an avid medical student, Erickson was also curious about psychiatry and he achieved his psychology degree while still studying medicine. After a second bout of polio, he used self-hypnosis to manage his chronic pain.



Erickson was a master of indirect suggestion and would often use it in his lectures and even in his books. An Ericksonian hypnotist would be more likely to say 'you can comfortably learn how to go into a trance', thereby giving the subject the chance to accept the suggestions they are most comfortable with, at their own pace, and with an awareness of the benefits.

The subject feels they are not being hustled and they feel they can take full ownership of, and participate in, their transformation. Because the induction takes place during the course of a normal conversation, Ericksonian hypnosis is often known as Covert or Conversational Hypnosis.

*Left: Milton Erickson*

Erickson maintained that the unconscious mind responds to openings, opportunities, metaphors, symbols, and contradictions. Effective hypnotic suggestion, then, should be 'artfully vague,' leaving space for the subject to fill in the gaps with their own unconscious understandings, even if they don't consciously grasp what is happening.

An example – the authoritative '*You will stop smoking*' is likely to meet resistance on the unconscious level than '*You can become a non-smoker*' which is more likely to fit in with the wishes of the client. The first is a direct command, to be obeyed or ignored (and notice that it draws attention to the act of smoking) whereas the second is an opening, an invitation to possible lasting change without pressure.

Erickson's Confusion Technique is based on the premise that a confused person has their conscious mind busy and occupied, and is inclined to draw on unconscious learning to make sense of things. James Braid had claimed that focused attention was essential for

creating hypnotic trances and required extreme focus, but it can be difficult for people racked by pain, fear or suspicion to focus on anything at all, and so other techniques for inducing 'trance' become important.

Long and frequent use of the confusion technique has successfully effected exceedingly rapid hypnotic inductions under unfavourable conditions such as the acute pain of terminal malignant disease, and in persons interested but hostile, aggressive, and resistant.

A great many of Erickson's anecdotal and autobiographical teaching stories were collected by Sidney Rosen in the book *My Voice Will Go With You*.

**By the 1950's, both the British and American Medical Associations accepted hypnosis as a useful therapeutic tool. From then on, hypnotherapy grew in popularity and is considered by many as a significant contribution to the treatment of emotional, habitual and psychological problems.**

In the clinical setting, where hypnosis is practised for the purpose of therapeutic change and improvement, and where increasingly, as more disciplines such as Emotional Freedom Technique (EFT) and Neuro Linguistic Programming (NLP) are added to the therapist's toolbox, hypnotherapists are cutting short the hypnosis part of the session and opting for light relaxation. Many still have to explain to their clients that they are not going to fall asleep or lose consciousness or run around like a chicken.

To find out more about hypnosis and Hypnotherapy, please look for the downloadable eBooks on my website at [www.newtonhypnosis.com](http://www.newtonhypnosis.com).

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