

to doubt it, the subject, on this account, will experience a counter-suggestive influence; he will not sleep, or else wakes up. If it appear that it costs the operator much trouble to hypnotize the subject, the latter will think that he is difficult to hypnotize, and the more he dwells on the idea, the more does he resist the hypnotizing. Calmness, confidence, and simplicity in the procedures are the surest means of succeeding.

Whatever procedure may be adopted, every operator will acquire the habit of changing his methods and adapting them to the psychic individuality of each subject. Gentleness succeeds best in some cases, brusqueness in others. Closing the eyes, friction of the eyeballs, prolonged, continuous, and monotonous exhortation, an authoritative tone of voice, a material suggestion, such as heat, concentrating the attention upon one sensation, and making the sensorium captive so that it cannot be distracted by other objects, all these are not subject to any fixed rule. Every operator fashions in the course of time his own *modus faciendi*.

A word on awakening the hypnotized subjects. It takes place in the simplest manner possible by suggestion. Usually I say to them, "It is finished; wake up!" The most of them wake, but some seem to have some trouble in doing so, at least in the first few sittings. It seems that they do not hear the command. They have not enough initiative to emerge spontaneously from the hypnotic state. Then I say to them, "Open your eyes! You are awake." Or, re-enforcing the suggestion by means of a material practice I direct an assistant to touch any part of the head or body, and say, "It is only necessary to touch this point in order to make him open his eyes immediately." This measure hardly ever fails. It suffices that I merely touch or press the place mentioned; the patient immediately wakes. I never employ frictions or insufflations upon the eyes. Waking becomes a very simple matter, when it is remembered that it is all due to suggestion.

Hypnotism, from a medical point of view, has for its object to increase suggestibility and to place the cerebro-spinal system in such a state that suggestion incites it to perform acts conducive to cure.

Suggestion may take place without hypnosis. In subjects rebellious to hypnotic phenomena, we can, notwithstanding, practice therapeutic suggestion on them. I obtain notable effects without sleep; I request the patient to close his eyes and concentrate his attention upon me; I endeavour to impress him and enchain his will, and I affirm to him that certain functional disorders have disappeared. It is suggestion by speaking, without hypnotism.

Hypnotism and speaking do not enjoy a monopoly of suggestion. This may be produced by other agencies; in all times it has been practised by all physicians, consciously or unconsciously. Purging with bread-pills, the cure of convulsionists through fear of the guardians of public safety, sleep produced by peroxide of hydrogen, the miraculous water of Lourdes, the practices of the faith healers, of hydrotherapy, of metallotherapy, of electrotherapy, of secret ointments, of the granules of Mattei, of homœopathy, of suspension of persons afflicted with locomotor ataxia, act either wholly or partly by suggestion. No doubt, hydrotherapy and electrotherapy have themselves an undoubted action upon the functions of the organism, but this action is imperfectly known, and the statement of authors concerning the therapeutic value of these various methods are vague and conflicting, precisely because they did not eliminate the element of suggestion.

Electricity frequently relieves pains, neuralgias, rheumatism, lumbago, nervous aphonia, etc., when I state to the subject that the symptom ought to disappear under the influence of electricity, at the same time fixing his attention upon the effect obtained while the agent is being applied.

The suspension of ataxic patients has lately created a great stir. The surprising improvements obtained have been attributed to changes in the circulation in the spinal cord, or to the stretching of the nerves. From the beginning I thought that suspension constituted an eminently suggestive apparatus. Dr. Hans Halser, chief of clinic of my colleague Spillman, has tried the method in a great many cases, and has obtained happy results, not only in ataxic patients, but also in other varieties of myelitis, in rheumatism, hysteria, nocturnal incontinence of urine, and in the most varied neuroses; but