Symptom Removal: The Nineteenth Century Experience

Andre Weitzenhoffer
Reno, NV

It has been said that traditional clinical hypnotists, essentially those practicing before 1900, made excessive use of symptom removal to the detriment of their patients. However, statements of this kind have never been documented. This article is based on a search of the relevant literature that examines the hypnotic methods and results of that era. One finding is that available clinical data support the claim that clinical hypnotists practicing before 1900 made considerable use of symptom removal. The data also indicate that they achieved substantial success without any detrimental effects. This information is considered relevant for the scientifically based practice of hypnosis.

Key Words: Traditional, nineteenth century, symptom removal, Bernheim, Liébeault

Introduction

The term, “traditional”, has been used to refer to hypnotic practices in several contexts. For instance, following T. X. Barber (1969), some writers applied the term to all clinical work based on “state” theories of hypnosis. The more prevalent definition was initiated by the students and followers of Milton H. Erickson’s post-1960 teachings. It focuses instead on a number of procedural features, one of which is an excessive use of symptom removal (more detail can be found in Yapko [1984] and Weitzenhoffer [2000]). In essence, “traditional” hypnosis is hypnosis as it was practiced prior to 1900. By extension the term has been applied to practices in this style at any time including the present. The term “non-traditional” is used in this article to indicate any hypnotists who cannot be labeled as being traditional.

The hypnosis literature of the past 40 years contains many statements (Araoz, 1985; Yapko, 1984, 1995; Gilligan, 1987; Zeig, 1995) that traditional hypnosis (hypnosis practiced in the nineteenth century) had been limited, essentially, to the removal of symptoms. This impression of nineteenth and early twentieth century hypnosis has also prevailed in conference presentations (Gravitz, 2000) and teaching seminars of recognized authorities such as Zeig, Cheek, and Godin. An additional message about the direct symptom removal of traditional hypnotists has been that it is, at the best, ineffective; and at the worst, dangerous.
However no documentation from the literature of the twentieth or twenty-first centuries has been offered to substantiate such negative views of nineteenth century hypnotic symptom removal. Since clinical practice should be founded, as much as possible, on established facts, a careful and circumspect examination of the topic is advisable. Research into the nineteenth century experience could have implications for the contemporary practice of symptom removal.

This article attempts to answer three questions:

(1) How extensively did the traditional clinical hypnotists of the nineteenth century use symptom removal?
(2) To the extent they used it, what successes or failures did they have?
(3) What, if any, ill effects did they actually encounter?

Symptom Removal in the Early Days of Clinical Hypnosis

Definitions

Although true cures effectively remove all symptoms, the term “symptom removal” usually refers to the removal of a symptom without eliminating its cause. Direct hypnotic symptom removal is defined as some clear, deliberate action directed at the symptom. This definition eliminates case reports that do not explicitly describe direct activity of this type (such as those made by Braid in his seminal 1843 work). It also eliminates reports on magnetic healings.

It is also important to establish who the nineteenth century traditional hypnotists associated with symptom removal are. Specific names are not usually given by their critics. Stage, lay and amateur hypnotists can be eliminated automatically, as none of consequence published any clinical accounts, nor could such a practitioner be considered as a proper source of information regarding clinical matters.

Documentation

A number of sources was used to identify the nineteenth century traditional hypnotists and to investigate the efficacy and possible dangers of suggestive hypnosis in their work. Although there are many clinical case reports, some quite extensive, in the old animal magnetic literature, deliberate symptom removal as a defined hypnotic technique had to wait for the introduction and widespread use of suggestion in the production of hypnotic phenomena. Specifically, it began with the publication of Bernheim’s (1884) seminal work, *De La Suggestion Dans l’état Hypnotique et Dans L’état de Veille* (Suggestion in the Hypnotic and in the Waking State). This book appears to have promoted the universal use of suggestion (Barrucand, 1967; Moll, 1909). Detailed case reports on the therapeutic uses of suggestion became available two years later (Bernheim, 1886). Historical accuracy and proper credit call for recognition that long before these dates, perhaps as far back as 1860, Liébeault was extensively and successfully using suggestion in his clinical practice.

Bernheim’s (1886/1947) book fortunately was translated into English in 1947 (Bernheim, 1886/1947). Two other sources of information about symptom removal through hypnotic suggestion are the journals: *La Revue de l’Hypnotisme Expérimental et Thérapeutique* (The Review of Clinical and Experimental Hypnosis, 1886-1910) and *Die Zeitschrift für Hypnotismus* (The Journal of Hypnotism, 1892-1902). Both contain numerous accounts of clinical uses of hypnosis that are fairly detailed, a listing of which can be found in a work of Bramwell (1903/1930, pp. 440-447). Unfortunately, these
two journals are in French and in German respectively and not readily available to the English language reader. There are also two books written by English physicians during the last quarter of the nineteenth century that contain a great deal of pertinent material and a fair number of case reports, some taken from the French and German journals.

These English language source books are Bramwell’s (1903/1930) Hypnotism. Its History, Practice and Theory and Tuckey’s (1907) Treatment by Hypnotism and Suggestion. The author used three books (Bernheim, Bramwell, and Tuckey) as primary documentation sources for this article. An additional document that could not be secured for this article (but is potentially valuable for those interested in pursuing the matter further) is a 92-page, detailed statistical summary (in French) of the first two years of operation (1887-1888) of a hypnosis clinic run by van Renthergem and van Eeden in Holland. This document was distributed to attendees of the first International Congress of Hypnotism held in Paris in 1889 (Bérillon, 1889). Later, it appears that statistical summaries also became available from this Dutch clinic. During the same period of time more clinics specializing in hypnotic therapy became established in other parts of Europe, and they also may have made other statistics available.

Finally, there are books by Liébeault (1891) and by Bernheim (1907) (reporting on Liébeault’s practice) that probably have considerable bearing on the subject of direct symptom removal. However, neither has been accessible at this time. Readers wishing to look further into the matter will also find a helpful list of 30 other pertinent works on pages 4 and 5 of Tuckey’s (1907) book. An investigation of direct hypnotic suggestive methods could reasonably begin with the publication of Bernheim’s book in 1886. The correct upper limit appears to be 1900.

Clinical Sources

Among the works mentioned there are 844 detailed case reports of the treatment of a large variety of ailments (some 57). Characteristically, however, not a single report provides any details regarding the form or content of the suggestions that were used. In general the authors limited themselves to repeatedly saying, “suggestions were given,” “therapeutic suggestion was used,” and/or “hypnotism was induced.” There are some rare exceptions, such as Bernheim’s (1886/1947) statement concerning one case, “I put him in somnambulism three consecutive times, and each time repeat the suggestion that all the morbid phenomena have disappeared” (p. 301).

Only three such examples of precisely what was suggested can be found in Bernheim’s book. We can reasonably assume that in these three cases out of 844 there was direct symptom removal. As for the remainder of the 844 cases, there is little basis for concluding that nineteenth century clinicians largely used hypnosis to remove symptoms and did little else with it. That is because we do not know specifically what forms the suggestions used by the clinicians took, what their contents were, nor what else the clinicians involved may have said and/or done that might have had suggestive effects upon the patients (e.g., indirect suggestions). It appears that opinions regarding the extensive use of symptom removal by pre-1900 clinical hypnotists have not come from direct examination of the available case histories.

Beliefs about nineteenth century practice may, however, have originated from other considerations that have led the author to agree that symptom removal most likely was, indeed, a major tool used by pre-1900 clinical hypnotists. In his description of Liébeault’s general approach to hypnotic treatment, Bernheim (1947/1886) states “The
subject being hypnotized, Mr. Liébeault’s method consists in affirming in a loud voice the disappearance of his symptoms” (p. 206).

Berheim (1886/1947) also writes, “Since 1882 I have experimented with the suggestive method which I had seen used by M. Liébeault... Today it is used daily in my clinic” (p. 207). A sentence later he writes of suppressing a variety of listed symptoms. Similarly, describing Liébeault’s general modus operandi, Tuckey (1907) states that, having induced hypnosis in the patient, “Dr. Liébeault then proceeded with the treatment proper. This consisted essentially in directing the invalid’s attention on the part affected, and suggesting an amelioration or disappearance of the morbid condition and symptoms” (p. 55).

Since Liébeault was also Tuckey’s mentor and teacher, it is probable that Tuckey used similar techniques. From a number of written records it seems clear that other eminent physicians, contemporaries of Bernheim and of Liébeault, such as van Eeden, van Renthergem, Schrenck-Notzing, Krafft-Ebing, Wetterstrand, Forel and Bérillon, all of whom created clinics specializing in hypnotic treatment, did so after either visiting Liébeault and Bernheim or after reading Bernheim’s books. One can reasonably speculate that they, too, centered their work around symptom removal. There are other considerations that suggest this to be the case. For one thing, we read extensively in these various reports about the disappearance of a large variety of symptoms as the result of the suggestions given, and it appears that it is entirely on this basis that the physicians usually concluded that they had obtained a cure or improvement by using suggestion.

Existing circumstances also made this approach to treatment highly reasonable and likely. Medical knowledge in the last quarter of the nineteenth century was still rather primitive, as the reports in our available documents well demonstrate. The etiology of many diseases was still largely unknown; there was a poor understanding of the underlying pathological physiology; and conventional treatments reflected this (Morowitz, 1976). In a great many cases the best a physician could do for a patient was to relieve his symptoms, hoping that the cause might also be remedied at the same time. That physicians were nevertheless aware their hypnotic treatment might not be getting to the cause is intimated by Bramwell (pp. 178, 435) and clearly shown by Tuckey (p.128), who cautions against believing otherwise. This is why Tuckey (1907) stated that Liébeault addressed himself to both the removal of the symptoms and the morbid condition.

Although it does not directly bear on the issues this article addresses, symptom removal does not appear to have been part of a cookbook approach to treatment. A careful reading of Tuckey’s (1907) and Bramwell’s (1903/1930) works and of cases detailed by them as well as by Bernheim (1886) shows no foundation for such an opinion. In the first place, traditional hypnotists were all followers of “the Bernheim dictum” (Weitzenhoffer, 2000) which more correctly should be referred to as “the Liébeault-Bernheim dictum,” namely, that the clinical use of hypnosis and suggestion consists in the methodical and reasoned application of suggestion to bring about beneficial changes.1 One implication of the dictum is that there can be no set procedures. They

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1Recently the author (Weitzenhoffer, 2000) erroneously cited Bernheim’s 1884 work as the source of this italicized statement. Actually it is to be found in a later work of his (Bernheim, 1891). No longer having the book, the author is unable to provide the page on which it will be found.
are to be determined by the attendant circumstances. It is also clear from the material examined that beneficial changes did not mean just producing a cure, but included palliative effects that made the symptoms less incapacitating and life more bearable for the patient.

**The Data for Efficacy**

It remains now to see how effective (or ineffective) this use of suggestion was and what kinds of ill effects it may have had. The number of patients thus treated could have been in the tens of thousand. Udolph (1987) reports that, jointly, Bernheim and Liébeault treated over 12,000 individuals. Assuming a like-number for the six other clinics, we are already looking at over 72,000 cases. Unfortunately, as we have just seen, records, especially sufficiently detailed ones, are available for only a very small fraction of these patients.

However, the authors cited are explicit about their results. Pooling their data with statistics reported by van Renterghem and van Eeden (1889), of 844 cases, 373 (44.2%) patients were considered cured, 304 (36%) improved to greatly improved, and only 167 were considered failures (19.8%). These are impressive figures. Other statistics separately reported by Tuckey (1907, p. 65) have not been included because they may have been based partly on some of the cases used in the above count. His report was that out of 95 cases 42% were cured, 37% improved and 21% unchanged. In most cases, there were follow-ups, some quite extensive, showing that the results were lasting, up to a number of years.

Using Bernheim’s (1886) data, which are quite typical and the most detailed, the length of the treatments ranged from 1 to possibly 40 and more sessions, but the average for 75 cases was 6.7. There were nine one-session treatments, 14 with two sessions, with only six requiring more than 20 sessions. According to Bernheim, in not a few cases very marked improvements were observed after the first and second sessions, but it is clear that, insofar as he was concerned, a full remission had to take place for him to consider terminating treatment. One should keep this in mind when considering how long, on the average, it took him to get satisfactory results.

It must be remembered that there is some ambiguity in the available data because many of the patients were hospitalized, and while a running account of their clinical progress is often given, it is not always clear whether hypnosis and suggestion were used each time they were seen. Many patients were seen on a daily basis and some of the reports give the impression they did not receive suggestions with each visit. Some visits may have consisted of a brief examination and/or the use of some other treatment modality. Such cases were not included in the above compilations. In general, with the data of Bernheim (1886) and of Tuckey (1907), only cases for which there were sufficient data to allow a clear picture of the nature of the treatments and their outcome were included. There were many more reported cases of successful treatment by suggestion that were not included in the count. The disappearance of some symptoms may have

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2References are made to far more cases than were counted, but many of these had too few details to allow the use of them for this article.

3Actually, Bernheim reports on 105 cases, but in only these 75 was it possible to have a clear picture of the number of hypnosis treatment sessions that were involved. Also, the author has included in this count only those case reports that clearly stated a permanent cure had resulted.
been justifiably considered a cure because some symptoms, such as an abnormal leucorrhoea, were considered to be the disease itself rather than symptoms of one.

As Bramwell (1903/1940, p. 435) points out, one should also keep in mind that other treatment modalities were often jointly used when judging the success of hypnosis and suggestion. It is, therefore, not possible to singularly credit hypnosis for the reported successes. However, nearly all the cases presented were ones for which accepted conventional forms of treatment had already been unsuccessfully tried, and hypnosis had been viewed as a last resort. This makes it more reasonable to attribute the success mostly to the use of hypnosis and suggestion (Bramwell, 1903/1930, p. 436). It is of interest to also note that, in his detailed accounts, Bernheim (1886) often mentions that the same suggestions were tried with and without hypnosis present and that, while non-hypnotic suggestions were effective, they were much more so when used with hypnosis.

Failures, as already noted, were not appreciable. In fact, considering that in nearly all cases other forms of treatment had failed, 20% is a remarkably low figure. As Tuckey (1907) points out, all treatments have their relapses and failures, and suggestion treatment was on a par with other treatment modalities in this regard. All cures did not go smoothly. In a number of cases, there were relapses, sometimes multiple ones, before a cure was finally obtained.

The Issue of Undesirable Effects

Tuckey’s (1907) survey of the leading European specialists in the medical use of hypnosis and suggestion revealed that no one had observed an undesirable effect from suggestive hypnotic treatment (p. 123). He reported that Liébeault had written him that he had encountered none in his thirty years of practice. Bramwell (1903/1930, p. 436) also minimizes the potential dangers of hypnotic treatment. Thus, it would appear that to the extent symptom removal was used by traditional clinical hypnotists, this was done with considerable success and without ill effects.

In light of the figures cited earlier, the availability of sufficient suggestibility and hypnotizability must not have been a problem. In fact, using a sample of 1,014 patients from the Liébeault/Bernheim clinic, Beaunis (1887) reports that only 3% of people were hypnotically uninfluenceable with 94% showing a light sleep to advanced somnambulism (3% merely became drowsy). Renthergem and Van Eeden (1889) report that of 413 patients, only 4% were refractory, with the rest, that is, 96%, falling in the category light sleep to somnambulism. It is particularly noteworthy that all authors cited observed that suggestion was often surprisingly effective with those in light sleep and even in the waking state.

Conclusions

If, by the expression traditional, Ericksonian and other non-traditional clinical hypnotists, such as Araoz (1985) have meant to designate clinical hypnotists practicing between 1886 and 1900, they have been justified in claiming these hypnotists extensively used symptom removal. On the other hand, assertions and inferences that this was a poor and even deleterious practice are not supported by the reported data. In the hands of these early workers this approach appears to have been highly successful and free of adverse effects. The later abandonment of direct hypnotic suggestive techniques can not be attributed to poor results nor on the need for protracted treatment. By the
same token, there was no shrinking of the population who could benefit from these techniques. Reasons for the decline of traditional hypnosis and symptom removal provide considerable food for thought but lie beyond the intended scope of this article. In a subsequent article the author will examine the twentieth century experience and some of the reasons for the successes of direct hypnotic symptom removals that are as true today as they were in the nineteenth century.

References


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