Herbert Spiegel, MD 1914-2009  
Art, Science and Poetry  
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Dr. Herbert Spiegel, my husband, best friend, teacher and collaborator of twenty one years, often said: “Therapy is both an art and a science. If you can measure it, it’s science; everything else is poetry.” He was a poet in his clinical work and a scientist in his ability to translate clinical observations into measureable entities. This man woke up every morning camera ready. While the rest of us rehearse to be ourselves, he didn’t have to. He just was.  

I loved his clarity and his focus. He believed in “sawing his own wood.” He followed his intuition, his observations and his interests. He stuck to his experience and what he knew to be true, without concerns about political correctness or the latest trends. From early on, this meant he defied tradition. As a young man, he chose medicine over a lucrative family business. Treating troops on the battlefield during the Tunisian Campaign in the invasion of North Africa (WW II), he found hypnosis more effective than his psychoanalytic training. In large part, due to his war time experience, he left analysis behind, discovering a short story could be even more effective than a long story, not only in combat, but in his patient work at home (H. Spiegel, 2000).  

Living with him over the past two decades, I admired his ability to translate large concepts, what he called “the big print,” into practical applications. Intrigued by different philosophical perspectives, he was a pragmatist. When he discovered that a three session treatment for smoking cessation meant that no one stopped until the third session, he shortened his treatment to one visit. It worked. People came to stop smoking with him from all over the world.  

As a scientist, concepts and results weren’t enough. He had the discipline to develop ways to measure his clinical intuition and observations. The size of his subject samples – in the thousands - was astonishing; his follow-up meticulous. In his research on smoking cessation, any patient lost to follow-up was counted a failure (D. Spiegel, Frischholz, Fleiss & H. Spiegel, 1993). Laurie Lipman, MD and Edward Frischholz, Ph.D. were on his research team in the early years and helped supply the rigor to validate his data.
Herb’s reputation in the use of hypnosis, which spread from Columbia University to medical schools around the world, led to his involvement in numerous medical and criminal cases for which he became well known: Sybil (Borch-Jacobson, 1997a; Borch-Jacobson, 1997b), Sirhan Sirhan (Turner & Christian, 1978) and Peter Reilly (Connery, 1977) among others. The bookshelves in our study are filled with popular and trade books which reference him.

As a result of his critical role in Peter Reilly’s exoneration in a case of false accusation and a forced false confession in the murder of his mother, he captured the attention and respect of reporter and author Donald Connery. Don was inspired to write a book about him: *The Inner Source: Exploring Hypnosis with Dr. Herbert Spiegel* (Connery, 1982; 2003). Herb was ever grateful that a book had been written about him during his life time.

As an author, Herb’s first publications focused on his experience as a battalion surgeon during the North African campaign in WW II. He was hit by shrapnel from a German tank and returned to the USA, the first psychiatrist to be sent home from the battlefield and receive a Purple Heart. Recovering in Walter Reed Hospital, he was asked to write his observations of men at war. He published his first papers on combat psychiatry (H. Spiegel, 1944a; H. Spiegel, 1944b;) and collaborated on a book *War, Stress and Neurotic Illness* (Kardiner, 1947). Scores of papers and chapters fill his CV. His textbook, *Trance & Treatment: the Clinical Uses of Hypnosis* co-authored with his son, David Spiegel was published in the 1970’s (H. Spiegel & D. Spiegel, 1978). In his late 80’s, still actively engaged in writing, clinical practice, teaching and keeping up with research in hypnosis, he and David revised the textbook (H. Spiegel & D. Spiegel, 2004).

As a clinician, Herb was respected, admired and loved by patients who came to see him from all over the world. Whether it was in a court room or in his private office, Herb had a consistent approach: define the problem, identify the attributes of the person and assess their resources. With this information, he was able to move quickly with effective treatment. Some patients and clinicians were threatened by his disciplined and forward moving approach. He did not change to cultivate agreement or admiration. His focus was to put the patient in charge by providing the proper tools for an individual to become independent of on-going therapy sessions. He believed that every patient was entitled to a new perspective. If a patient was unable to incorporate something new, Herb would make an appropriate referral. He didn’t belabor the work.

As a teacher, he was generous to a fault. He gave and gave some more. Teaching workshops and lecturing all over the world, his demonstrations could be so dazzling, some were discouraged while many more were inspired. His measurement of hypnotizability requires a degree of discipline that some rejected and many embraced.

At the beginning of our relationship, even though I had been trained “no need to measure clinically” and had only used the Eye Roll Sign (ERS) and Hypnotic Induction Profile (HIP) for my research, I put his theories and data to the test. Using his measures in my clinical practice, I was impressed with how the ERS indicated the promise of hypnotizability and is associated with both the capacity to dissociate and personality style as assessed by Herb’s Mind Style Questionnaire (Greenleaf, 2006). Scores on the HIP revealed whether the person’s responsivity matched the biological promise (capacity), and when there was a discrepancy, it was possible to assess the degree of health or illness. In fifteen minutes, one could identify healthy coping strategies to help medical patients and those dealing with lifestyle stress. In the presence of psychiatric disorders, the ERS and scores on the HIP correlated with Axis I and Axis II psychiatric diagnosis (H. Spiegel & Greenleaf, 1992; H. Spiegel & D. Spiegel, 1978; 2004; H. Spiegel, Greenleaf & D. Spiegel, 2005). What astounded me most was the uncanny association between the Eye Roll Sign and biological temperament – what we started to call brain-processing styles.
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Herb’s focus in day to day living and in his work: identify the reactive component, focus on what you’re for rather than what you’re against, minimize reasons to reify the problem, shorten ceremonies and concentrate on strategies. Trance enhanced the strategy but was not the treatment in itself (H. Spiegel & Greenleaf, 2006). He taught: avoid long explorations of the past but use hermeneutic thinking (H. Spiegel, 2000) – gather enough data to create a story that would provide a therapeutic momentum to move the patient forward.

As husband and wife, we loved the way our professional and personal lives intertwined. We were partners in every sense of the word. At the beginning, there was a steep learning curve on both sides. He, more process oriented, big print, and elegantly formal; me, more content oriented, nuanced, and accessible. I observed him with many cases and sometimes we saw patients together. His thinking continues to influence my work. A few days before he died, we went together to see a hospital patient. He did the assessments and then turned to me to combine trance with a treatment strategy.

Our work together was fitting. We had met at a meeting of ISCH in the The Hague, 1988. He came to hear me present my dissertation research. Intrigued I had used the Hypnotic Induction Profile to stratify the subject sample, he was even more intrigued that the results demonstrated the vulnerability of highly hypnotizable subjects under stress and that the degree of hypnotizability was associated with recovery in the ICU after open-heart surgery (Greenleaf, Fisher, Miaskowski & DuHamel, 1992). Motivated to attend my second paper, he heard a description of my work as Director of Training in Medical Hypnosis at the Albert Einstein College of Medicine. I was using the same principles with medical patients that he had discovered were effective in combat. It was a match.

Herb became less physically active in his late 80’s. He stopped horseback riding and jumping at the age of 86, because, as he put it: “My horse got too old.” (Boots was 27 – actually too elderly to jump.) He read voraciously - but never a novel. Dr. Philip Muskin, Professor of Clinical Psychiatry at Columbia University Medical Center, who along with our family, friends and former students, helped start The Herbert Spiegel Lectureship at Columbia in 2006, kept both of us actively engaged in teaching hypnosis to psychiatric residents to his last year.

Herb’s last paper, The Neural Trance: A New Look at Hypnosis, integrated new developments in brain-mind processing research with his theories, data and clinical observations over seven decades. This paper won the Ernest and Josephine Hilgard Award for Best Theoretical Paper in October of 2009 (H. Spiegel, 2007; marciagreenleaf.com for text). At the same time, Richard Kluft and Stephen Kahn, President and Past-President of The Society for Clinical and Experimental Hypnosis, presented Herb with the Living Treasure Award “for making important contributions to the field of hypnosis and for inspiring succeeding generations by example of excellence.”

All of us - his students, patients and colleagues - will need a life-time to incorporate the many levels of his thinking. Herb’s assessments and clinical strategies were innovative. His work is still considered trailblazing. A long time colleague, Dr. Francis Mas said of him: “He was always ahead of his time; and even at his death, he still is.”

Dr. Herbert Spiegel is survived by his wife, Dr. Marcia Greenleaf; his son, Dr. David Spiegel; his daughter, Dr. Ann Spiegel; his daughter-in-law, Dr. Helen Blau; his son-in-law, Dr. James Clark; and his grandchildren, Julia and Daniel Spiegel, Lisa and Julie Clark; and extended family of cousins and nephews. Dr. Herbert Spiegel is also survived by the many thousands of students, colleagues and patients for whom he was a life-long inspiration.

A very dear friend wrote: “Why did we think we would have him forever?” But many of us did. We lost him too soon.
Herbert Spiegel, MD

Brief Biographical Summary:
Dr. Herbert Spiegel: 1914-2009

Clinician, researcher, author and teacher in New York City, Dr. Herbert Spiegel developed treatment strategies with hypnosis for smoking cessation, habit control, anxiety, insomnia, dissociative disorders, personality disorders, trauma and psychological issues as a result of medical problems. He has observed and treated over 50,000 people.

He trained in psychoanalysis at the William A. White Institute under the supervision of Harry Stack Sullivan, Erich Fromm and Frieda Fromm-Reichman. As a battalion surgeon during WWII, he learned the psycho-physiological effects of trauma, the effectiveness of immediate psychological treatment to prevent psychiatric illness and the role of hypnosis in crisis management.

In the 1960’s Dr. Spiegel discovered the Eye Roll Sign as a measure of personality style & dissociative capacity and developed the Hypnotic Induction Profile, a measure of hypnotizability, which is also a tool to diagnose the presence or absense of psychological health and to individualize treatment strategies.

From 1960 – 1982, Dr. Spiegel was Clinical Professor of Psychiatry on the faculty at the College of Physicians & Surgeons at Columbia University, where he later served as Special Lecturer in Psychiatry. For twenty two years he introduced mind-body concepts with hypnosis to medical students, residents, physicians and surgeons in the Department of Psychiatry at Columbia, conducting the longest running post-graduate course on clinical hypnosis. For decades, Dr. Spiegel conducted annual courses for the American Psychiatric Association on hypnosis and brief psychotherapy and was an Adjunct Professor of Psychology at John Jay College of Criminal Justice, sharing his expertise on brain-washing, high hypnotizability and the “honest liar” syndrome.

Publications

War Stress and Neurotic Illness, Abram Kardiner, MD with the collaboration of Herbert Spiegel, M.D., New York: Paul B. Hoeber, Inc., 1947


Chapters in the records of the Library of Congress & textbooks on military psychiatry, neurology, forensics, pain management, habit control, hypnosis as an adjunct to psychotherapy, psychosomatics, obstetrical anesthesia and perinatology.

Journal articles on hypnosis and brief psychotherapy – 1944-2007

First Awards

1943 - Purple Heart, American Campaign Medal, World War II Victory Medal for Meritorious Service.

Recent Awards

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2009 - The Living Treasure Award, an ancient Japanese tradition, honoring him for contributions in the field of hypnosis - The Society for Clinical and Experimental Hypnosis.


References


