

TABLE OF CONTENTS

EDITORIAL PREFACE	v
EDITORIAL NOTE TO THE SECOND EDITION	ix

I

On the Psychology and Pathology of So-called Occult Phenomena	3
---	---

Translated from *Zur Psychologie und Pathologie sogenannter occulter Phänomene* (Leipzig, 1902).

1. INTRODUCTION

2. A CASE OF SOMNAMBULISM IN A GIRL WITH POOR INHERITANCE (Spiritualistic Medium)

Anamnesis, 17. — Somnambulistic States, 19. — Records of Séances, 25. — Development of the Somnambulistic Personalities, 30. — The Romances, 36. — Mystic Science, 39. — Termination of the Disorder, 43

3. DISCUSSION OF THE CASE

The Waking State, 44. — Semi-Somnambulism, 47. — Automatisms, 48. — The Change in Character, 61. — Nature of the Somnambulistic Attacks, 70. — Origin of the Unconscious Personalities, 77. — Course of the Disorder, 78. — Heightened Unconscious Performance, 80

4. CONCLUSION

On Hysterical Misreading	89
--------------------------	----

Translated from "Über hysterisches Verlesen," *Archiv für die gesamte Psychologie* (Leipzig), III (1904).

CONTENTS

- II
- Cryptomnesia 95
- Translated from "Kryptomnesie," *Die Zukunft* (Berlin), 13th year (1905), L.

- III
- On Manic Mood Disorder 109
- Translated from "Über manische Verstimmung," *Allgemeine Zeitschrift für Psychiatrie und psychisch-gerichtliche Medizin* (Berlin), LXI (1903).

- IV
- A Case of Hysterical Stupor in a Prisoner in Detention 137
- Translated from "Ein Fall von hysterischem Stupor bei einer Untersuchungsgefangenen," *Journal für Psychologie und Neurologie* (Leipzig), I (1902).

- V
- On Simulated Insanity 159
- Translated from "Über Simulation von Geistesstörung," *Journal für Psychologie und Neurologie* (Leipzig), II (1903).
- A Medical Opinion on a Case of Simulated Insanity 188
- Translated from "Ärztliches Gutachten über einen Fall von simulierter geistiger Störung," *Schweizerische Zeitung für Strafrecht* (Zurich), XVII (1904).

- VI
- A Third and Final Opinion on Two Contradictory Psychiatric Diagnoses 209
- Translated from "Obergutachten über zwei sich widersprechende psychiatrische Gutachten," *Monatsschrift für*

CONTENTS

Kriminalpsychologie und Strafrechtsreform (Heidelberg), II
(1906).

On the Psychological Diagnosis of Facts 219

Translated from "Zur psychologischen Tatbestandsdiagnostik," *Zentralblatt für Nervenheilkunde und Psychiatrie* (Leipzig), XXVIII (1905).

BIBLIOGRAPHY 225

INDEX 239

I

ON THE PSYCHOLOGY AND PATHOLOGY OF SO-CALLED OCCULT PHENOMENA

ON HYSTERICAL MISREADING

© Copyright, Princeton University Press. No part of this book may be distributed, posted, or reproduced in any form by digital or mechanical means without prior written permission of the publisher.

ON THE PSYCHOLOGY AND PATHOLOGY OF SO-CALLED OCCULT PHENOMENA ¹

[1. INTRODUCTION]

- ¹ In that wide domain of psychopathic inferiority from which science has marked off the clinical pictures of epilepsy, hysteria, and neurasthenia, we find scattered observations on certain rare states of consciousness as to whose meaning the authors are not yet agreed. These observations crop up sporadically in the literature on narcolepsy, lethargy, *automatisme ambulatoire*, periodic amnesia, double consciousness, somnambulism, pathological dreaminess, pathological lying, etc.
- ² The above-mentioned states are sometimes attributed to epilepsy, sometimes to hysteria, sometimes to exhaustion of the nervous system—neurasthenia—and sometimes they may even be accorded the dignity of a disease *sui generis*. The patients

¹ [Translated from *Zur Psychologie und Pathologie sogenannter occulter Phänomene* (Leipzig, 1902). It was Professor Jung's inaugural dissertation for his medical degree and was delivered before the Faculty of Medicine, University of Zurich. The 1902 title-page stated that the author was at that time "First Assistant Physician in the Burghölzli Clinic" and that the dissertation was approved on the motion of Professor Eugen Bleuler. The book was dedicated to the author's wife, Emma Rauschenbach Jung (1882-1955). A translation by M. D. Eder was published in *Collected Papers on Analytical Psychology* (London and New York, 1916; 2nd edn., 1917). In the following version, the headings have been somewhat re-ordered and some new headings supplied in brackets in an attempt to clarify the structure of the monograph.—EDITORS.

concerned occasionally go through the whole gamut of diagnoses from epilepsy to hysteria and simulated insanity.

- 3 It is, in fact, exceedingly difficult, and sometimes impossible, to distinguish these states from the various types of neurosis, but on the other hand certain features point beyond pathological inferiority to something more than a merely analogical relationship with the phenomena of normal psychology, and even with the psychology of the supranormal, that of genius.
- 4 However varied the individual phenomena may be in themselves, there is certainly no case that cannot be related by means of some intermediate case to others that are typical. This relationship extends deep into the clinical pictures of hysteria and epilepsy. Recently it has even been suggested that there is no definite borderline between epilepsy and hysteria, and that a difference becomes apparent only in extreme cases. Steffens, for example, says: "We are forced to the conclusion that in essence hysteria and epilepsy are not fundamentally different, that the cause of the disease is the same, only it manifests itself in different forms and in different degrees of intensity and duration."²
- 5 The delimitation of hysteria and certain borderline forms of epilepsy from congenital or acquired psychopathic inferiority likewise presents great difficulties. The symptoms overlap at every point, so that violence is done to the facts if they are regarded separately as belonging to this or that particular group. To delimit psychopathic inferiority from the normal is an absolutely impossible task, for the difference is always only "more" or "less." Classification in the field of inferiority itself meets with the same difficulties. At best, one can only single out certain groups which crystallize round a nucleus with specially marked typical features. If we disregard the two large groups of intellectual and emotional inferiority, we are left with those which are coloured pre-eminently by hysterical, epileptic (epileptoid), or neurasthenic symptoms, and which are not characterized by an inferiority either of intellect or of emotion. It is chiefly in this field, insusceptible of any sure classification, that the above-mentioned states are to be found. As is well known, they can appear as partial manifestations of a typical epilepsy or hysteria, or can exist separately as psychopathic inferiorities, in which case the qualification "epileptic" or "hys-²" "Über drei Fälle von 'Hysteria magna'" (1900), p. 928.

terical" is often due to relatively unimportant subsidiary symptoms. Thus somnambulism is usually classed among the hysterical illnesses because it is sometimes a partial manifestation of severe hysteria, or because it may be accompanied by milder so-called "hysterical" symptoms. Binet says: "Somnambulism is not one particular and unchanging nervous condition; there are many somnambulisms."³ As a partial manifestation of severe hysteria, somnambulism is not an unknown phenomenon, but as a separate pathological entity, a disease *sui generis*, it must be somewhat rare, to judge by the paucity of German literature on this subject. So-called spontaneous somnambulism based on a slightly hysterical psychopathic inferiority is not very common, and it is worth while to examine such cases more closely, as they sometimes afford us a wealth of interesting observations.

- ⁶ CASE OF MISS E., aged 40, single, book-keeper in a large business. No hereditary taint, except that a brother suffered from "nerves" after a family misfortune and illness. Good education, of a cheerful disposition, not able to save money; "always had some big idea in my head." She was very kind-hearted and gentle, did a great deal for her parents, who were living in modest circumstances, and for strangers. Nevertheless she was not happy because she felt she was misunderstood. She had always enjoyed good health till a few years ago, when she said she was treated for dilatation of the stomach and tapeworm. During this illness her hair turned rapidly white. Later she had typhoid. An engagement was terminated by the death of her fiancé from paralysis. She was in a highly nervous state for a year and a half. In the summer of 1897 she went away for a change of air and hydrotherapy. She herself said that for about a year there were moments in her work when her thoughts seemed to stand still, though she did not fall asleep. She made no mistakes in her accounts, however. In the street she often went to the wrong place and then suddenly realized that she was not in the right street. She had no giddiness or fainting-fits. Formerly menstruation occurred regularly every four weeks with no bother; latterly, since she was nervous and overworked, every fourteen days. For a long time she suffered from constant headache. As accountant and book-keeper in a large business she had a very strenuous
- ³ *Alterations of Personality* (orig. 1892), p. 2, modified.

job, which she did well and conscientiously. In the present year, in addition to the strains of her work, she had all sorts of new worries. Her brother suddenly got divorced, and besides her own work she looked after his housekeeping, nursed him and his child through a serious illness, and so on. To recuperate, she went on September 13 to see a woman friend in southern Germany. Her great joy at seeing her friend again after such a long absence, and their celebration of a party, made the necessary rest impossible. On the 15th, quite contrary to her usual habit, she and her friend drank a bottle of claret. Afterwards they went for a walk in a cemetery, where she began to tear up flowers and scratch at the graves. She remembered absolutely nothing of this afterwards. On the 16th she stayed with her friend without anything of importance happening. On the 17th, her friend brought her to Zurich. An acquaintance came with her to the asylum; on the way she talked quite sensibly but was very tired. Outside the asylum they met three boys whom she described as "three dead people she had dug up." She then wanted to go to the neighbouring cemetery, and only with difficulty would be persuaded to enter the asylum.

- 7 The patient was small, delicately built, slightly anaemic. Left side of the heart slightly enlarged; no murmurs, but a few double beats; accentuated sounds in the mitral region. The liver dulness extended only to the edge of the upper ribs. Patellar reflexes rather brisk, but otherwise no tendon reflexes. No anaesthesia or analgesia, no paralysis. Rough examination of the field of vision with the hands showed no restriction. Hair of a very pale, yellowish-white colour. On the whole, the patient looked her age. She recounted her history and the events of the last few days quite clearly, but had no recollection of what happened in the cemetery at C. or outside the asylum. During the night of the 17th/18th she spoke to the attendant and said she saw the whole room full of dead people looking like skeletons. She was not at all frightened, but was rather surprised that the attendant did not see them too. Once she ran to the window, but was otherwise quiet. The next morning in bed she still saw skeletons, but not in the afternoon. The following night she woke up at four o'clock and heard the dead children in the adjoining cemetery crying out that they had been buried alive. She wanted to go and dig them up but allowed herself to be

ON THE PSYCHOLOGY OF SO-CALLED OCCULT PHENOMENA

restrained. Next morning at seven o'clock she was still delirious, but could now remember quite well the events in the cemetery at C. and on her way to the asylum. She said that at C. she wanted to dig up the dead children who were calling to her. She had only torn up the flowers in order to clear the graves and be able to open them. While she was in this state, Professor Bleuler explained to her that she would remember everything afterwards, too, when she came to herself again. The patient slept for a few hours in the morning; afterwards she was quite clear-headed and felt fairly well. She did indeed remember the attacks, but maintained a remarkable indifference towards them. The following nights, except on those of September 22 and 25, she again had short attacks of delirium in which she had to deal with the dead, though the attacks differed in detail. Twice she saw dead people in her bed; she did not appear to be frightened of them, but got out of bed so as not to "embarrass" them. Several times she tried to leave the room.

8 After a few nights free from attacks, she had a mild one on September 30, when she called to the dead from the window. During the day her mind was quite clear. On October 3, while fully conscious, as she related afterwards, she saw a whole crowd of skeletons in the drawing-room. Although she doubted the reality of the skeletons she could not convince herself that it was an hallucination. The next night, between twelve and one o'clock—the earlier attacks usually happened about this time—she was plagued by the dead for about ten minutes. She sat up in bed, stared into a corner of the room, and said: "Now they're coming, but they're not all here yet. Come along, the room's big enough, there's room for all. When they're all there I'll come too." Then she lay down, with the words: "Now they're all there," and fell asleep. In the morning she had not the slightest recollection of any of these attacks. Very short attacks occurred again on the nights of October 4, 6, 9, 13, and 15, all between twelve and one o'clock. The last three coincided with the menstrual period. The attendant tried to talk to her several times, showed her the lighted street-lamps and the trees, but she did not react to these overtures. Since then the attacks have stopped altogether. The patient complained about a number of troubles she had had during her stay here. She suffered especially from headaches, and these got worse the morning

PSYCHIATRIC STUDIES

after the attacks. She said it was unbearable. Five grains of Sacch. lactis promptly alleviated this. Then she complained of a pain in both forearms, which she described as though it were tendovaginitis. She thought the bulging of the flexed biceps was a swelling and asked to have it massaged. Actually, there was nothing the matter, and when her complaints were ignored the trouble disappeared. She complained loud and long about the thickening of a toe-nail, even after the thickened part had been removed. Sleep was often disturbed. She would not give her consent to be hypnotized against the night attacks. Finally, on account of headache and disturbed sleep, she agreed to hypnotic treatment. She proved a good subject, and at the first sitting fell into a deep sleep with analgesia and amnesia.

9 In November she was again asked whether she could remember the attack of September 19, which it had been suggested she would recall. She had great difficulty recollecting it, and in the end she could only recount the main facts; she had forgotten the details.

10 It remains to be said that the patient was not at all superstitious and in her healthy days had never been particularly interested in the supernatural. All through the treatment, which ended on November 14, she maintained a remarkable indifference both to the illness and its improvement. The following spring she returned as an outpatient for treatment of the headaches, which had slowly come back because of strenuous work during the intervening months. For the rest, her condition left nothing to be desired. It was established that she had no remembrance of the attacks of the previous autumn, not even those of September 19 and earlier. On the other hand, under hypnosis she could still give a good account of the events in the cemetery, outside the asylum, and during the night attacks.

11 The peculiar hallucinations and general appearance of our case are reminiscent of those states which Krafft-Ebing describes as "protracted states of hysterical delirium." He says:

It is in the milder cases of hysteria that such delirious states occur. . . . Protracted hysterical delirium depends upon temporary exhaustion. . . . Emotional disturbances seem to favour its outbreak. It is prone to relapse. . . . Most frequently we find delusions of persecution, with often very violent reactive fear. . . then religious and erotic delusions. Hallucinations of all the senses are not uncom-

ON THE PSYCHOLOGY OF SO-CALLED OCCULT PHENOMENA

mon. The most frequent and most important are delusions of sight, smell, and touch. The visual hallucinations are mostly visions of animals, funerals, fantastic processions swarming with corpses, devils, ghosts, and what not. . . . The auditory delusions are simply noises in the ear (shrieks, crashes, bangs), or actual hallucinations, often with sexual content.⁴

¹² The corpse visions of our patient and their appearance during attacks remind us of states occasionally observed in hysterio-epilepsy. Here too there are specific visions which, in contrast to protracted delirium, are associated with individual attacks. I will give two examples:

¹³ A 30-year-old lady with *grande hystérie* had delirious twilight states in which she was tormented by frightful hallucinations. She saw her children being torn away from her, devoured by wild beasts, etc. She had no remembrance of the individual attacks.⁵

¹⁴ A girl of 17, also a severe hysteric. In her attacks she always saw the corpse of her dead mother approaching her, as if to draw her to itself. No memory of the attacks.⁶

¹⁵ These are cases of severe hysteria where consciousness works at a deep dream level. The nature of the attacks and the stability of the hallucinations alone show a certain affinity to our case, which in this respect has numerous analogies with the corresponding states of hysteria, as for instance with cases where a psychic shock (rape, etc.) occasioned the outbreak of hysterical attacks, or where the traumatic event is re-experienced in stereotyped hallucinatory form. Our case, however, gets its specific character from the identity of consciousness during the different attacks. It is a "second state," with a memory of its own, but separated from the waking state by total amnesia. This distinguishes it from the above-mentioned twilight states and relates it to those found in somnambulism.

¹⁶ Charcot ⁷ divides somnambulism into two basic forms:

a. Delirium with marked inco-ordination of ideas and actions.

⁴ *Text-Book of Insanity* (orig. 1879), p. 498, modified.

⁵ Richer, *Études cliniques* (1881), p. 483.

⁶ *Ibid.*, p. 487; cf. also Erler, "Hysterisches und hysterio-epileptisches Irresein" (1879), p. 28, and Cullerre, "Un Cas de somnambulisme hystérique" (1888), p. 356*.

⁷ In Guinon, "Documents pour servir à l'histoire des somnambulismes" (1891).

b. Delirium with co-ordinated actions. This comes nearer to the waking state.

17 Our case belongs to the second group. If by somnambulism we understand a state of systematic partial wakefulness,⁸ we must when discussing this ailment also consider those isolated attacks of amnesia which are occasionally observed. Except for noctambulism, they are the simplest states of systematic partial wakefulness. The most remarkable in the literature is undoubtedly Naef's case.^{8a} It concerns a gentleman of 32 with a bad family history and numerous signs of degeneracy, partly functional, partly organic. As a result of overwork he had, at the early age of 17, a peculiar twilight state with delusions, which lasted a few days and then cleared up with sudden recovery of memory. Later he was subject to frequent attacks of giddiness with palpitations and vomiting, but these attacks were never attended by loss of consciousness. At the end of a feverish illness he suddenly left Australia for Zurich, where he spent some weeks in carefree and merry living, only coming to himself when he read of his sudden disappearance from Australia in the newspapers. He had complete retrograde amnesia for the period of several months that included his journey to Australia, his stay there, and the journey back. A case of periodic amnesia is published by Azam: ⁹ Albert X., 12½ years old, with hysterical symptoms, had several attacks of amnesia in the course of a few years, during which he forgot how to read, write, count, and even how to speak his own language, for weeks at a stretch. In between times he was normal.

18 A case of *automatisme ambulatoire* on a decidedly hysterical basis, but differing from Naef's case in that the attacks were recurrent, is published by Proust: ¹⁰ An educated man, aged 30, exhibited all the symptoms of *grande hystérie*. He was very suggestible, and from time to time, under the stress of emo-

⁸ "Sleepwalking must be regarded as systematic partial wakefulness, during which a limited but logically consistent complex of ideas enters into consciousness. No opposing ideas present themselves, and at the same time mental activity continues with increased energy within the limited sphere of wakefulness." Loewenfeld, *Hypnotismus* (1901), p. 289. ^{8a} [See Bibliography.—EDITORS.]

⁹ *Hypnotisme, double conscience* (1887). A similar case in Winslow, *Obscure Diseases of the Brain and Mind* (1863), quoted in *Allg Z f Psych*, XXII (1865), p. 405.

¹⁰ *Tribune médicale*, 23rd year (1890).

tional excitement, had attacks of amnesia lasting from two days to several weeks. While in these states he wandered about, visited relatives, smashed various things in their houses, contracted debts, and was even arrested and convicted for picking pockets.

¹⁹ There is a similar case of vagrancy in Boeteau: ¹¹ A widow of 22, highly hysterical, became terrified at the prospect of an operation for salpingitis, left the hospital where she had been till then, and fell into a somnambulistic condition, from which she awoke after three days with total amnesia. In those three days she had walked about thirty miles looking for her child.

²⁰ William James ¹² describes a case of an "ambulatory sort": the Reverend Ansel Bourne, itinerant preacher, 30 years old, psychopath, had on several occasions attacks of unconsciousness lasting an hour. One day (January 17, 1887) he suddenly disappeared from Greene, Rhode Island, after having lifted \$551 from a bank. He was missing for two months, during which time he ran a little grocery store in Norristown, Pennsylvania, under the name of A. J. Brown, carefully attending to all the purchases himself, although he had never done this sort of work before. On March 14 he suddenly awoke and went back home. Complete amnesia for the interval.

²¹ Mesnet ¹³ published this case: F., 27 years old, sergeant in the African regiment, sustained an injury of the parietal bone at Bazeilles. Suffered for a year from hemiplegia, which disappeared when the wound healed. During the illness he had somnambulistic attacks with marked restriction of consciousness; all the sense functions were paralysed except for the sense of taste and a little bit of the sense of sight. Movements were co-ordinated, but their performance in overcoming obstacles was severely limited. During attacks the patient had a senseless collecting mania. Through various manipulations his consciousness could be given an hallucinatory content; for instance, if a stick was placed in his hand, the patient would immediately

¹¹ "Automatisme somnambulique avec dédoublement de la personnalité" (1892).

¹² *The Principles of Psychology* (1890) I, p. 391.

¹³ "De l'automatisme de la mémoire et du souvenir dans la somnambulisme pathologique" (1874), pp. 105-12, cited in Binet, *Alterations*, pp. 42ff. Cf. also Mesnet, "Somnambulisme spontané dans ses rapports avec l'hystérie" (1892).

feel himself transported to a battle scene, would put himself on guard, see the enemy approaching, etc.

²² Guinon and Sophie Woltke made the following experiments with hysterics: ¹⁴ A blue glass was held in front of a female patient during an hysterical attack, and she regularly saw a picture of her mother in the blue sky. A red glass showed her a bleeding wound, a yellow one an orange-seller or a lady in a yellow dress.

²³ Mesnet's case recalls the cases of sudden restriction of memory.

²⁴ MacNish ¹⁵ tells of a case of this sort: An apparently healthy young woman suddenly fell into an abnormally long sleep, apparently with no prodromal symptoms. On waking she had forgotten the words for and all knowledge of the simplest things. She had to learn how to read, write, and count all over again, at which she made rapid progress. After a second prolonged sleep she awoke as her normal self with no recollection of the intervening state. These states alternated for more than four years, during which time consciousness showed continuity within the two states, but was separated by amnesia from the consciousness of the normal state.

²⁵ These selected cases of various kinds of changes in consciousness each throw some light on our case. Naef's case presents two hysteriform lapses of memory, one of which is characterized by delusional ideas, and the other by its long duration, restriction of consciousness, and the desire to wander. The peculiar, unexpected impulses are particularly clear in Proust and Mesnet. In our case the corresponding features would be the impulsive tearing up of flowers and the digging up of graves. The patient's continuity of consciousness during attacks reminds us of the way consciousness behaved in the MacNish case; hence it may be regarded as a temporary phenomenon of alternating consciousness. The dreamlike hallucinatory content of restricted consciousness in our case does not, however, appear to justify us in assigning it without qualification to this "double consciousness" group. The hallucinations in the second state show a certain creativeness which seems to be due to its auto-sug-

¹⁴ "De l'influence des excitations des organes des sens sur les hallucinations de la phase passionnelle de l'attaque hystérique" (1891).

¹⁵ *The Philosophy of Sleep* (1830), cited in Binet, p. 4.

gestibility. In Mesnet's case we observe the appearance of hallucinatory processes through simple stimulations of touch. The patient's subconscious uses these simple perceptions for the automatic construction of complicated scenes which then take possession of his restricted consciousness. We have to take a somewhat similar view of the hallucinations of our patient; at any rate the outward circumstances in which they arose seem to strengthen this conjecture.

²⁶ The walk in the cemetery induced the vision of the skeletons, and the meeting with the three boys evoked the hallucination of children buried alive, whose voices the patient heard at night. She came to the cemetery in a somnambulistic condition, which on this occasion was particularly intense in consequence of her having taken alcohol. She then performed impulsive actions of which her subconscious, at least, received certain impressions. (The part played here by alcohol should not be underestimated. We know from experience that it not only acts adversely on these conditions, but, like every other narcotic, increases suggestibility.) The impressions received in somnambulism go on working in the subconscious to form independent growths, and finally reach perception as hallucinations. Consequently our case is closely allied to the somnambulistic dream-states that have recently been subjected to penetrating study in England and France.

²⁷ The gaps of memory, apparently lacking content at first, acquire such through incidental auto-suggestions, and this content builds itself up automatically to a certain point. Then, probably under the influence of the improvement now beginning, its further development comes to a standstill and finally it disappears altogether as recovery sets in.

²⁸ Binet and Féré have made numerous experiments with the implanting of suggestions in states of partial sleep. They have shown, for instance, that when a pencil is put into the anaesthetic hand of an hysteric, she will immediately produce long letters in automatic writing whose content is completely foreign to her consciousness. Cutaneous stimuli in anaesthetic regions are sometimes perceived as visual images, or at least as vivid and unexpected visual ideas. These independent transmutations of simple stimuli must be regarded as the primary phenomenon in the formation of somnambulistic dream pictures. In excep-

tional cases, analogous phenomena occur even within the sphere of waking consciousness. Goethe,¹⁶ for instance, says that when he sat down, lowered his head, and vividly conjured up the image of a flower, he saw it undergoing changes of its own accord, as if entering into new combinations of form. In the half-waking state these phenomena occur fairly often as hypnagogic hallucinations. Goethe's automatisms differ from truly somnambulistic ones, because in his case the initial idea is conscious, and the development of the automatism keeps within the bounds laid down by the initial idea, that is to say, within the purely motor or visual area.

- ²⁹ If the initial idea sinks below the threshold, or if it was never conscious at all and its automatic development encroaches on areas in the immediate vicinity, then it is impossible to differentiate between waking automatisms and those of the somnambulistic state. This happens, for instance, if the perception of a flower associates itself with the idea of a hand plucking the flower, or with the idea of the smell of a flower. The only criterion of distinction is then simply "more" or "less": in one case we speak of "normal waking hallucinations" and in the other of "somnambulistic dream visions." The interpretation of our patient's attacks as hysterical becomes more certain if we can prove that the hallucinations were probably psychogenic in origin. This is further supported by her complaints (headache and tendovaginitis), which proved amenable to treatment by suggestion. The only aspect that the diagnosis of "hysteria" does not take sufficiently into account is the aetiological factor, for we would after all expect *a priori* that, in the course of an illness which responds so completely to a rest cure, features would now and then be observed which could be interpreted as symptoms of exhaustion. The question then arises whether the early lapses of memory and the later somnambulistic attacks can be regarded as states of exhaustion or as "neurasthenic crises." We
- ¹⁶ "I had the gift, when I closed my eyes and bent my head, of being able to conjure up in my mind's eye the imaginary picture of a flower. This flower did not retain its first shape for a single instant, but unfolded out of itself new flowers with coloured petals and green leaves. They were not natural flowers, but fantastic ones, and were as regular in shape as a sculptor's rosettes. It was impossible to fix the creative images that sprang up, yet they lasted as long as I desired them to last, neither weakening nor increasing in strength." *Zur Naturwissenschaft.*

know that psychopathic inferiority can give rise to various kinds of epileptoid attacks whose classification under epilepsy or hysteria is at least doubtful. To quote Westphal:

On the basis of numerous observations I maintain that the so-called epileptoid attacks form one of the commonest and most frequent symptoms in the group of diseases we reckon among the mental diseases and neuropathies, and that the mere appearance of one or more epileptic or epileptoid attacks is not decisive either for the character and form of the disease or for its course and prognosis. . . . As already mentioned, I have used the term "epileptoid" in the widest sense for the attack itself.¹⁷

³⁰ The epileptoid elements in our case are not far to seek; on the other hand, one can object that the colouring of the whole picture is hysterical in the extreme. As against this we must point out that not every case of somnambulism is *ipso facto* hysterical. Occasionally states occur in typical epilepsy which to experts seem directly parallel with somnambulistic states, or which can be distinguished from hysteria only by the occurrence of genuine convulsions.¹⁸

³¹ As Diehl¹⁹ has shown, neurasthenic inferiority may also give rise to "crises" which often confuse the diagnosis. A definite content of ideas can even repeat itself in stereotyped form in each crisis. Mörchen, too, has recently published the case of an epileptoid neurasthenic twilight state.²⁰

³² I am indebted to Professor Bleuler for the following case: An educated gentleman of middle age, with no epileptic antecedents, had worn himself out with years of mental overwork. Without any other prodromal symptoms (such as depression, etc.), he attempted suicide on a holiday: in a peculiar twilight state he suddenly threw himself into the water from a crowded spot on the river bank. He was immediately hauled out and had only a vague memory of the incident.

¹⁷ "Agoraphobie" (1872), p. 158.

¹⁸ Pick, "Vom Bewusstsein in Zuständen sogenannter Bewusstlosigkeit" (1884), p. 202; and Pelman, "Über das Verhalten des Gedächtnisses bei den verschiedenen Formen des Irreseins" (1864), p. 78.

¹⁹ "Neurasthenische Krisen" (1902): "When the patients first describe their crises, they generally give a picture that makes us think of epileptic depression. I have often been deceived in this way."

²⁰ *Über Dämmerzustände* (1901), case 32, p. 75.

- 33 With these observations in mind, we must certainly allow neurasthenia a considerable share in the attacks of our patient. The headaches and the "tendovaginitis" point to a mild degree of hysteria, normally latent but becoming manifest under the stress of exhaustion. The genesis of this peculiar illness explains the above-described relationship to epilepsy, hysteria, and neurasthenia. To sum up: Miss E. suffers from a psychopathic inferiority with a tendency to hysteria. Under the influence of nervous exhaustion she has fits of epileptoid stupor whose interpretation is uncertain at first sight. As a result of an unusually large dose of alcohol, the attacks develop into definite somnambulism with hallucinations, which attach themselves to fortuitous external perceptions in the same way as dreams. When the nervous exhaustion is cured, the hysteriform symptoms disappear.
- 34 In the realm of psychopathic inferiority with hysterical colouring, we meet with numerous phenomena which show, as in this case, symptoms belonging to several different clinical pictures, but which cannot with certainty be assigned to any one of them. Some of these states are already recognized as disorders in their own right: e.g., pathological lying, pathological dreaminess, etc. But many of them still await thorough scientific investigation; at present they belong more or less to the domain of scientific gossip. Persons with habitual hallucinations, and also those who are inspired, exhibit these states; they draw the attention of the crowd to themselves, now as poets or artists, now as saviours, prophets, or founders of new sects.
- 35 The genesis of the peculiar mentality of these people is for the most part lost in obscurity, for it is only very rarely that one of these singular personalities can be subjected to exact observation. In view of the—sometimes—great historical significance of such persons, it were much to be wished that we had enough scientific material to give us closer insight into the psychological development of their peculiarities. Apart from the now practically useless productions of the pneumatological school at the beginning of the nineteenth century, there is a remarkable dearth of competent observations in the German scientific literature of the subject; indeed, there seems to be a real aversion to investigation in this field. For the facts so far gathered we are indebted almost exclusively to the labours of

French and English workers. It therefore seems at least desirable that our literature should be enlarged in this respect. These reflections have prompted me to publish some observations which will perhaps help to broaden our knowledge of the relations between hysterical twilight states and the problems of normal psychology.

[2.] A CASE OF SOMNAMBULISM IN A GIRL WITH
POOR INHERITANCE (SPIRITUALISTIC MEDIUM)

- 36 The following case was under my observation during the years 1899 and 1900. As I was not in medical attendance upon Miss S. W., unfortunately no physical examination for hysterical stigmata could be made. I kept a detailed diary of the séances, which I wrote down after each sitting. The report that follows is a condensed account from these notes. Out of regard for Miss S. W. and her family, a few unimportant data have been altered and various details omitted from her "romances," which for the most part are composed of very intimate material.

[*Anamnesis*]

- 37 Miss S. W., 15½ years old, Protestant. The paternal grandfather was very intelligent, a clergyman who frequently had waking hallucinations (mostly visions, often whole dramatic scenes with dialogues, etc.). A brother of her grandfather was feeble-minded, an eccentric who also saw visions. One of his sisters was also a peculiar, odd character. The paternal grandmother, after a feverish illness in her twentieth year—typhoid fever?—had a trance lasting for three days, from which she did not begin to awake until the crown of her head was burnt with a red-hot iron. Later on, when emotionally excited, she had fainting-fits; these were nearly always followed by a brief somnambulism during which she uttered prophecies. The father too was an odd, original personality with bizarre ideas. Two of his brothers were the same. All three had waking hallucinations. (Second sight, premonitions, etc.) A third brother was also eccentric and odd, talented but one-sided. The mother has a congenital psychopathic inferiority often bordering on psychosis. One sister

is an hysteric and a visionary, another sister suffers from “nervous heart-attacks.”

³⁸ S. W. is of delicate build, skull somewhat rachitic though not noticeably hydrocephalic, face rather pale, eyes dark, with a peculiar penetrating look. She has had no serious illnesses. At school she passed for average, showed little interest, was inattentive. In general, her behaviour was rather reserved, but this would suddenly give place to the most exuberant joy and exaltation. Of mediocre intelligence, with no special gifts, neither musical nor fond of books, she prefers handwork or just sitting around day-dreaming. Even at school she was often absent-minded, misread in a peculiar way when reading aloud—for instance, instead of the word “Ziege” (goat) she would say “Geiss,” and instead of “Treppe” (stair) she would say “Stege”; this happened so often that her brothers and sisters used to laugh at her.²¹ Otherwise there were no abnormalities to be noticed about S. W., and especially no serious hysterical symptoms. Her family were all artisans and business people with very limited interests. Books of a mystical nature were never allowed in the family. Her education was deficient; apart from the fact that there were many brothers and sisters, all given a very casual education, the children suffered a great deal from the inconsequent, vulgar, and often brutal treatment they received from their mother. The father, a very preoccupied business man, could not devote much time to his children and died when S. W. was still adolescent. In these distressing circumstances it is no wonder that she felt shut in and unhappy. She was often afraid to go home and preferred to be anywhere rather than there. Hence she was left a great deal with her playmates and grew up without much polish. Her educational level was accordingly pretty low and her interests were correspondingly limited. Her knowledge of literature was likewise very limited. She knew the usual poems of Schiller and Goethe and a few other poets learnt by heart at school, some snatches from a song-book, and fragments of the Psalms. Newspaper and magazine stories probably represented the upper limit in prose. Up to the time of her somnambulism she had never read anything of a more cultured nature.

²¹ [The alternative terms are Swiss dialect. Cf. par. 73, and also the following paper, pars. 151ff., below.—EDITORS.]

[*Somnambulistic States*]

39 At home and from friends she heard about table-turning and began to take an interest in it. She asked to be allowed to take part in such experiments, and her desire was soon gratified. In July 1899, she did some table-turning several times in the family circle with friends, but as a joke. It was then discovered that she was an excellent medium. Communications of a serious nature arrived and were received amid general astonishment. Their pastoral tone was surprising. The spirit gave himself out to be the grandfather of the medium. As I was acquainted with the family, I was able to take part in these experiments. At the beginning of August 1899, I witnessed the first attacks of somnambulism. Their course was usually as follows: S. W. grew very pale, slowly sank to the ground or into a chair, closed her eyes, became cataleptic, drew several deep breaths, and began to speak. At this stage she was generally quite relaxed, the eyelid reflexes remained normal and so did tactile sensibility. She was sensitive to unexpected touches and easily frightened, especially in the initial stage.

40 She did not react when called by name. In her somnambulistic dialogues she copied in a remarkably clever way her dead relatives and acquaintances, with all their foibles, so that she made a lasting impression even on persons not easily influenced. She could also hit off people whom she knew only from hearsay, doing it so well that none of the spectators could deny her at least considerable talent as an actress. Gradually gestures began to accompany the words, and these finally led up to "attitudes passionnelles" and whole dramatic scenes. She flung herself into postures of prayer and rapture, with staring eyes, and spoke with impassioned and glowing rhetoric. On these occasions she made exclusive use of literary German, which she spoke with perfect ease and assurance, in complete contrast to her usual uncertain and embarrassed manner in the waking state. Her movements were free and of a noble grace, mirroring most beautifully her changing emotions. At this stage her behaviour during the attacks was irregular and extraordinarily varied. Now she would lie for ten minutes to two hours on the sofa or the floor, motionless, with closed eyes; now she assumed a half-sitting

posture and spoke with altered voice and diction; now she was in constant movement, going through every possible pantomimic gesture. The content of her speeches was equally variable and irregular. Sometimes she spoke in the first person, but never for long, and then only to prophesy her next attack; sometimes—and this was the most usual—she spoke of herself in the third person. She then acted some other person, either a dead acquaintance or somebody she had invented, whose part she carried out consistently according to the characteristics she herself conceived. The ecstasy was generally followed by a cataleptic stage with *flexibilitas cerea*, which gradually passed over into the waking state. An almost constant feature was the sudden pallor which gave her face a waxen anaemic hue that was positively frightening. This sometimes occurred right at the beginning of the attack, but often in the second half only. Her pulse was then low but regular and of normal frequency; the breathing gentle, shallow, often barely perceptible. As we have already remarked, S. W. frequently predicted her attacks beforehand; just before the attacks she had strange sensations, became excited, rather anxious, and occasionally expressed thoughts of death, saying that she would probably die in one of these attacks, that her soul only hung on to her body by a very thin thread, so that her body could scarcely go on living. On one occasion after the cataleptic stage, tachypnoea was observed, lasting for two minutes with a respiration of 100 per minute. At first the attacks occurred spontaneously, but later S. W. could induce them by sitting in a dark corner and covering her face with her hands. But often the experiment did not succeed, as she had what she called “good” and “bad” days.

- 4¹ The question of amnesia after the attacks is unfortunately very unclear. This much is certain, that after each attack she was perfectly oriented about the specific experiences she had undergone in the “rapture.” It is, however, uncertain how much she remembered of the conversations for which she served as a medium, and of changes in her surroundings during the attack. It often looked as if she did have a vague recollection, for often she would ask immediately on waking: “Who was there? Wasn’t X or Y there? What did he say?” She also showed that she was superficially aware of the content of the conversations. She often remarked that the spirits told her before waking what

they had said. But frequently this was not the case at all. If at her request someone repeated the trance speeches to her, she was very often indignant about them and would be sad and depressed for hours on end, especially if any unpleasant indiscretions had occurred. She would rail against the spirits and assert that next time she would ask her guide to keep such spirits away from her. Her indignation was not faked, for in the waking state she could barely control herself and her affects, so that any change of mood was immediately reflected in her face. At times she seemed barely, if at all, aware of what went on around her during the attack. She seldom noticed when anyone left the room or came into it. Once she forbade me to enter the room when she was expecting special communications which she wished to keep secret from me. I went in, nevertheless, sat down with the three other sitters, and listened to everything. S. W. had her eyes open and spoke to the others without noticing me. She only noticed me when I began to speak, which gave rise to a veritable storm of indignation. She remembered better, but still only vaguely, the remarks of participants which referred to the trance speeches or directly to herself. I could never discover any definite rapport in this connection.

- 42 Besides these "big" attacks, which seemed to follow a certain law, S. W. also exhibited a large number of other automatisms. Premonitions, forebodings, unaccountable moods, and rapidly changing fancies were all in the day's work. I never observed simple states of sleep. On the other hand, I soon noticed that in the middle of a lively conversation she would become all confused and go on talking senselessly in a peculiar monotonous way, looking in front of her dreamily with half-closed eyes. These lapses usually lasted only a few minutes. Then she would suddenly go on: "Yes, what did you say?" At first she would not give any information about these lapses, saying evasively that she felt a bit giddy, had a headache, etc. Later she simply said: "They were there again," meaning her spirits. She succumbed to these lapses very much against her will; often she struggled against them: "I don't want to, not now, let them come another time, they seem to think I'm there only for them." The lapses came over her in the street, in shops, in fact anywhere. If they happened in the street, she would lean against a house and wait till the attack was over. During these attacks, whose intensity

varied considerably, she had visions; very often, and especially during attacks when she turned extremely pale, she “wandered,” or, as she put it, lost her body and was wafted to distant places where the spirits led her. Distant journeys during ecstasy tired her exceedingly; she was often completely exhausted for hours afterward, and many times complained that the spirits had again drained the strength from her, such exertions were too much, the spirits must get another medium, etc. Once she went hysterically blind for half an hour after the ecstasy. Her gait was unsteady, groping; she had to be led, did not see the light that stood on the table, though the pupils reacted.

43 Visions also came in large numbers even without proper lapses (if we use this word only for higher-grade disturbances of attention). At first they were confined to the onset of sleep. A little while after she had gone to bed the room would suddenly light up, and shining white figures detached themselves from the foggy brightness. They were all wrapped in white veil-like robes, the women had things resembling turbans on their heads and wore girdles. Later (according to her own statement) “the spirits were already there” when she went to bed. Finally she saw the figures in broad daylight, though only blurred and fleetingly if there was no real lapse (then the figures became solid enough to touch). But she always preferred the darkness. According to her account, the visions were generally of a pleasant nature. Gazing at the beautiful figures gave her a feeling of delicious bliss. Terrifying visions of a daemonic character were much rarer. These were entirely confined to night-time or dark rooms. Occasionally she saw black figures in the street at night or in her room; once in the dark hallway she saw a terrible copper-red face which suddenly glared at her from very near and terrified her. I could not find out anything satisfactory about the first occurrence of the visions. She stated that in her fifth or sixth year she once saw her “guide” at night—her grandfather (whom she had never known in life). I could not obtain any objective clues about this early vision from her relatives. Nothing more of the kind is said to have happened until the first séance. Except for the hypnagogic brightness and “seeing sparks” there were never any rudimentary hallucinations; from the beginning the hallucinations were of a systematic nature involving all the sense organs equally. So far as the intellectual

ON THE PSYCHOLOGY OF SO-CALLED OCCULT PHENOMENA

reaction to these phenomena is concerned, what is remarkable is the amazing matter-of-factness with which she regarded them. Her whole development into a somnambulist, her innumerable weird experiences, seemed to her entirely natural. She saw her whole past only in this light. Every in any way striking event from her earlier years stood in a clear and necessary relationship to her present situation. She was happy in the consciousness of having found her true vocation. Naturally she was unshakably convinced of the reality of her visions. I often tried to give her some critical explanation, but she would have none of it, since in her normal state she could not grasp a rational explanation anyway, and in her semi-somnambulistic state she regarded it as senseless in view of the facts staring her in the face. She once said: "I do not know if what the spirits say and teach me is true, nor do I know if they really are the people they call themselves; but that my spirits exist is beyond question. I see them before me, I can touch them. I speak to them about everything I wish as naturally as I'm talking to you. They must be real." She absolutely would not listen to the idea that the manifestations were a kind of illness. Doubts about her health or about the reality of her dream-world distressed her deeply; she felt so hurt by my remarks that she closed up in my presence and for a long time refused to experiment if I was there; hence I took care not to express my doubts and misgivings aloud. On the other hand she enjoyed the undivided respect and admiration of her immediate relatives and acquaintances, who asked her advice about all sorts of things. In time she obtained such an influence over her followers that three of her sisters began to hallucinate too. The hallucinations usually began as night-dreams of a very vivid and dramatic kind which gradually passed over into the waking state—partly hypnagogic, partly hypnopompic. A married sister in particular had extraordinarily vivid dreams that developed logically from night to night and finally appeared in her waking consciousness first as indistinct delusions and then as real hallucinations, but they never reached the plastic clearness of S. W.'s visions. Thus, she once saw in a dream a black daemonic figure at her bedside in vigorous argument with a beautiful white figure who was trying to restrain the black; nevertheless the black figure seized her by the throat and started to choke her; then she awoke. Bending over her she saw a black shadow with hu-

man outlines, and near it a cloudy white figure. The vision disappeared only when she lighted the candle. Similar visions were repeated dozens of times. The visions of the other two sisters were similar but less intense.

- 44 The type of attack we have described, with its wealth of fantastic visions and ideas, had developed in less than a month, reaching a climax which was never to be surpassed. What came later was only an elaboration of all the thoughts and the cycles of visions that had been more or less foreshadowed right at the beginning. In addition to the "big attacks" and the "little lapses," whose content however was materially the same, there was a third category that deserves mention. These were the semi-somnambulistic states. They occurred at the beginning or end of the big attacks, but also independently of them. They developed slowly in the course of the first month. It is not possible to give a more precise date for their appearance. What was especially noticeable in this state was the rigid expression of the face, the shining eyes, and a certain dignity and stateliness of movement. In this condition S. W. was herself, or rather her somnambulist ego. She was fully oriented to the external world but seemed to have one foot in her dream-world. She saw and heard her spirits, saw how they walked round the room among those present, standing now by one person and now by another. She had a clear memory of her visions, of her journeys, and the instructions she received. She spoke quietly, clearly, and firmly, and was always in a serious, almost solemn, mood. Her whole being glowed with deep religious feeling, free from any pietistic flavour, and her speech was in no way influenced by the Biblical jargon of her guide. Her solemn behaviour had something sorrowful and melancholy about it. She was painfully conscious of the great difference between her nocturnal ideal world and the crude reality of day. This state was in sharp contrast to her waking existence; in it there was no trace of that unstable and inharmonious creature, of that brittle nervous temperament which was so characteristic of her usual behaviour. Speaking with her, you had the impression of speaking with a much older person, who through numerous experiences had arrived at a state of calm composure. It was in this state that she achieved her best results, whereas her romances corresponded more closely to her waking interests. The semi-somnambulism usually appeared

spontaneously, as a rule during the table-turning experiments, and it always began by S. W.'s knowing beforehand what the table was going to say. She would then stop table-turning and after a short pause would pass suddenly into an ecstasy. She proved to be very sensitive. She could guess and answer simple questions devised by a member of the circle who was not himself a medium. It was enough to lay a hand on the table, or on her hands, to give her the necessary clues. Direct thought transference could never be established. Beside the obvious broadening of her whole personality the continued existence of her ordinary character was all the more startling. She talked with unconcealed pleasure about all her little childish experiences, the flirtations and love secrets, the naughtiness and rudeness of her companions and playmates. To anyone who did not know her secret she was just a girl of 15½, no different from thousands of other girls. So much the greater was people's astonishment when they came to know her other side. Her relatives could not grasp the change at first; part of it they never understood at all, so that there were often bitter arguments in the family, some of them siding with S. W. and others against her, either with gushing enthusiasm or with contemptuous censure of her "superstition." Thus S. W., during the time that I knew her, led a curiously contradictory life, a real "double life" with two personalities existing side by side or in succession, each continually striving for mastery. I will now give some of the most interesting details of the séances in chronological order.

[*Records of Séances*]

- 45 FIRST AND SECOND SITTINGS (August 1899). S. W. at once took control of the "communications." The "psychograph," for which an overturned tumbler was used, the two fingers of the right hand being placed upon it, moved with lightning speed from letter to letter. (Slips of paper, marked with letters and numbers, had been arranged in a circle round the glass.) It was communicated that the medium's grandfather was present and would speak to us. There now followed numerous communications in quick succession, mostly of an edifying religious character, partly in properly formed words and partly with the letters transposed or in reverse order. These latter words and

sentences were often produced so rapidly that one could not follow the meaning and only discovered it afterwards by reversing the letters. Once the messages were interrupted in brusque fashion by a new communication announcing the presence of the writer's grandfather. Someone remarked jokingly: "Evidently the two spirits don't get on very well together." Darkness came on during the experiment. Suddenly S. W. became very agitated, jumped up nervously, fell on her knees, and cried: "There, there, don't you see that light, that star there?" She grew more and more excited, and called for a lamp in terror. She was pale, wept, said she felt queer, did not know what was the matter with her. When a lamp was brought she quieted down. The experiments were suspended.

46 At the next sitting, which took place two days later, also in the evening, similar communications were obtained from S. W.'s grandfather. When darkness fell she suddenly lay back on the sofa, grew pale, closed her eyes to a slit, and lay there motionless. The eyeballs were turned upwards, the eye-lid reflex was present, also tactile sensibility. Respiration gentle, almost imperceptible. Pulse low and feeble. This condition lasted about half an hour, whereupon she suddenly got up with a sigh. The extreme pallor of the face, which had lasted all through the attack, now gave way to her usual rosy colour. She was somewhat confused and embarrassed, said she had seen "all sorts" of things, but would tell nothing. Only after insistent questioning would she admit that in a peculiar waking condition she had seen her grandfather arm-in-arm with my grandfather. Then they suddenly drove past sitting side by side in an open carriage.

47 **THIRD SITTING.** In this, which took place a few days later, there was a similar attack of more than half an hour's duration. S. W. afterwards told of many white transfigured forms who each gave her a flower of special symbolic significance. Most of them were dead relatives. Concerning the details of their talk she maintained an obstinate silence.

48 **FOURTH SITTING.** After S. W. had passed into the somnambulist state she began to make peculiar movements with her lips, emitting at the same time gulping and gurgling noises. Then she whispered something unintelligible very softly. When this had gone on for some minutes she suddenly began speaking in

an altered, deep tone of voice. She spoke of herself in the third person: "She is not here. she has gone away." There now followed several sentences in a religious vein. From their content and language one could see that she was imitating her grandfather, who had been a clergyman. The gist of the talk did not rise above the mental level of the "communications." The tone of voice had something artificial and forced about it, and only became natural when in due course it grew more like the medium's own. (In later sittings the voice only altered for a few moments when a new spirit manifested itself.) Afterwards she had no remembrance of the trance conversation. She gave hints about a sojourn in the other world and spoke of the unimaginable blessedness she felt. It should be noted that during the attack her talk was absolutely spontaneous and not prompted by any suggestions.

- 49 Immediately after this sitting S. W. became acquainted with Justinus Kerner's book *Die Seherin von Prevorst*.²² She thereupon began to magnetize herself towards the end of the attacks, partly by means of regular passes, partly by strange circles and figures of eight which she executed symmetrically with both arms at once. She did this, she said, to dispel the severe headaches that came after the attacks. In other August sittings (not detailed here) the grandfather was joined by numerous kindred spirits who did not produce anything very remarkable. Each time a new spirit appeared, the movements of the glass altered in a startling way: it ran along the row of letters, knocking against some of them, but no sense could be made of it. The spelling was very uncertain and arbitrary, and the first sentences were often incomplete or broken up into meaningless jumbles of letters. In most cases fluent writing suddenly began at this point. Sometimes automatic writing was attempted in complete darkness. The movements began with violent jerkings of the whole arm, so that the pencil went right through the paper. The first attempt consisted of numerous strokes and zigzag lines about 8 cm. high. Further attempts first produced illegible words written very large, then the writing gradually grew smaller and more distinct. It was not much different from the ²² ["The Clairvoyante of Prevorst," pub. 1829; trans. as *The Seeress of Prevorst*, 1859.—EDITORS.]

medium's own. The control spirit was once again the grandfather.

50 FIFTH SITTING. Somnambulistic attacks in September 1899. S. W. sat on the sofa, leant back, shut her eyes, breathing lightly and regularly. She gradually became cataleptic. The catalepsy disappeared after about two minutes, whereupon she lay there apparently sleeping quietly, muscles quite relaxed. Suddenly she began talking in a low voice: "No, you take the red, I'll take the white. You can take the green, and you the blue. Are you ready? Let's go." (Pause of several minutes, during which her face assumed a corpse-like pallor. Her hands felt cold and were quite bloodless.) Suddenly she called out in a loud solemn voice: "Albert, Albert, Albert," then in a whisper: "Now you speak," followed by a longer pause during which the pallor of her face reached its highest conceivable intensity. Again in a loud solemn voice: "Albert, Albert, don't you believe your father? I tell you there are many mistakes in N's teaching. Think about it." Pause. The pallor decreased. "He's very frightened, he couldn't speak any more." (These words in her usual conversational tone.) Pause. "He will certainly think about it." She went on speaking in the same conversational tone but in a strange idiom that sounded like French and Italian mixed, recalling now one and now the other. She spoke fluently, rapidly, and with charm. It was possible to make out a few words, but not to memorize them, because the language was so strange. From time to time certain words recurred, like *wena*, *wenes*, *wenai*, *wene*, etc. The absolute naturalness of the performance was amazing. Now and then she paused as if someone were answering her. Suddenly she said, in German: "Oh dear, is it time already?" (In a sad voice.) "Must I go? Goodbye, goodbye!" At these words there passed over her face an indescribable expression of ecstatic happiness. She raised her arms, opened her eyes, till now closed, and looked upwards radiantly. For a moment she remained in this position, then her arms sank down slackly, her face became tired and exhausted. After a short cataleptic stage she woke up with a sigh. "I've slept again, haven't I?" She was told she had been talking in her sleep, whereupon she became wildly annoyed, and her anger increased still more when she learned that she was talking in a foreign language. "But I told the spirits I didn't want to, I can't do it, it tires me too much." (Began to cry.)

“Oh God, must everything, everything come back again like last time, am I to be spared nothing?”

51 The next day at the same time there was another attack. After S. W. had dropped off, Ulrich von Gerbenstein suddenly announced himself. He proved to be an amusing gossip, speaking fluent High German with a North German accent. Asked what S. W. was doing, he explained with much circumlocution that she was far away, and that he was here meanwhile to look after her body, its circulation, respiration, etc. He must take care that no black person got hold of her and harmed her. On insistent questioning he said that S. W. had gone with the others to Japan, to look up a distant relative and stop him from a stupid marriage. He then announced in a whisper the exact moment when the meeting took place. Forbidden to talk for a few minutes, he pointed to S. W.'s sudden pallor, remarking that materialization at such great distances cost a corresponding amount of strength. He then ordered cold compresses to be applied to her head so as to alleviate the severe headache which would come afterwards. With the gradual return of colour to her face, the conversation became more animated. There were all sorts of childish jokes and trivialities, then U. v. G. suddenly said: “I see them coming, but they are still very far off; I see her there like a little star.” S. W. pointed to the north. We naturally asked in astonishment why they were not coming from the east, whereupon U. v. G. laughingly replied: “They come the direct way over the North Pole. I must go now, goodbye.” Immediately afterwards S. W. awoke with a sigh, in a bad temper, complaining of violent headache. She said she had seen U. v. G. standing by her body; what had he told us? She was furious about the “silly chatter,” why couldn't he lay off it for once?

52 SIXTH SITTING. Began in the usual way. Extreme pallor; lay stretched out, scarcely breathing. Suddenly she spoke in a loud solemn voice: “Well then, be frightened; I am. I warn you about N's teaching. Look, in hope there is everything needed for faith. You want to know who I am? God gives where one least expects it. Don't you know me?” Then unintelligible whispering. After a few minutes she woke up.

53 SEVENTH SITTING. S. W. soon fell asleep, stretched out on the sofa. Very pale. Said nothing, sighed deeply from time to time. Opened her eyes, stood up, sat down on the sofa, bent forward,

saying softly: "You have sinned grievously, have fallen far." Bent still further forward as if speaking to someone kneeling in front of her. Stood up, turned to the right, stretched out her hand, and pointed to the spot over which she had been bending: "Will you forgive her?" she asked loudly. "Do not forgive men, but their spirits. Not she, but her human body has sinned." Then she knelt down, remained for about ten minutes in an attitude of prayer. Suddenly she got up, looked to heaven with an ecstatic expression, and then threw herself on her knees again, her face in her hands, whispering incomprehensible words. Remained motionless in this attitude for several minutes. Then she got up, gazed heavenward again with radiant countenance, and lay down on the sofa, waking soon afterwards.

Development of the Somnambulistic Personalities

54 At the beginning of many séances, the glass was allowed to move by itself, and this was always followed by the stereotyped invitation: "You must ask a question." Since several convinced spiritualists were attending the séances, there was of course an immediate demand for all manner of spiritualistic marvels, especially for the "protecting spirits." At these requests the names of well-known dead persons were sometimes produced, and sometimes unknown names such as Berthe de Valours, Elisabeth von Thierfelsenburg, Ulrich von Gerbenstein, etc. The control spirit was almost without exception the medium's grandfather, who once declared that "he loved her more than anyone in this world because he had protected her from childhood up and knew all her thoughts." This personality produced a flood of Biblical maxims, edifying observations, and song-book verses, also verses he had presumably composed himself, like the following:

Be firm and true in thy believing,
To faith in God cling ever nigh,
Thy heavenly comfort never leaving,
Which having, man can never die.
Refuge in God is peace for ever
When earthly cares oppress the mind;
Who from the heart can pray is never
Bow'd down by fate howe'er unkind.

INDEX

A

- abnormality, emotional, 119, 134
accident, and affect, 164
accusation, false, effect of, 184
acoustic control: defective, and misreading, 90
Acta Sanctorum, glossolalia in, 84
acting: excellence of performance in simulation, 179, 202; skill of hysterics at, 215; submersion of self in assumed role, 66, 69, 162
action(s): automatic, 69, 92; dependence on emotions, 132*f*; symptomatic, 98, 100
activity: mental, 110*f*, 180*n*, 202*f*; motor, *see* motor; pressure of, 131
Adam, 38
adaptability: poor, of mental defectives, 169*f*
adolescent: character of, 63; *see also* puberty
Aesop's fable, patient's reproduction of, 197
affect(s): and abnormal action, 133; aetiological role of, 180; *re* detention, 142; dissociating effect of, 181; effect of, on hysterical persons, 170*f*, 217; and hysteria, 215; influence on consciousness, 203; lack of control of, 21; pleasure/pain, 120; produced by arrest, trial, and confinement, 188*f*; and psychic automatisms, 187; and psychogenic disturbances, 184*f*; repressed, 185; unreacted, 155; violent, effect of, 164
aggression, 176, 195
alcohol, use of, 6, 13, 16; *see also* alcoholism
alcoholism, 90, 111, 112*f*, 124; dependent on emotional lability, 119; and manic behaviour, 120; resulting from depression and despair, 115*ff*
amnesia: anterograde, 172, 183; for automatic phenomena during ecstasy, 33; caused by affects, 171; difficulty of determining extent of, 150; disappearance under hypnosis, 147; in lethargy, 72; penetrated by trick, 145*f*; periodic, 3, 10*ff*; retrograde, 10, 143*f*, 172; and somnambulistic states, 20, 61*ff*; for unpleasant episode, 155
anaesthesia: cerebral, 49; of entire body surface, 63*f*; hysterical, 44; systematic, 64
analgesia, 145; total, for pinpricks, 139; *see also* hypalgesia
anamnesis, in simulated insanity, 177*f*
anger: reaction to censure, 118*f*; at trifles, 129
animal noises, made by manic patient, 128, 129
animals, life-forces of, 41
answers: irrelevant, 92; senseless, 140*ff*, 148*f*, 172, 173*n*, 174, 183, 193
anxiety: effect of, 151; precordial, 100
apathy, 166, 174*f*, 184, 192, 195; behaviour contradictory to, 196, 203
apperception, reduced, 197
appetite, lack of, after 4-day fast, 177
arm, motor area isolated from consciousness by auto-suggestion, 51
artist(s), 16, 106, 131

INDEX

- Aschaffenburg, Gustav, 167*n*, 220
assimilation: of affects, 188*f*; and association, 168*f*
association(s): without aid of consciousness, 96; automatic substitution of, 46; concord of, 86; conscious, and senseless answers, 149; and distraction of attention, 168; effect of attention on quality of, 168; feeling-toned, as creative force, 105*f*; inhibited, as embarrassment, 166; law of, and memory-image, 95; minimum of, and cryptomnesic idea, 81, 83*f*; in psychological diagnosis, 219; repression of, and perception, 45; restriction of, 86*n*; and songs or tunes, 97; substitutions of, 46; and supraliminal consciousness, 152; and suggestion, 52; unlimited, in hysterical subjects, 181
association tests, 166–70; in discovery of theft, 221
astronomy, as source of names in S. W.'s mystic system, 85
asylum: fear of, 188; as institution for mentally ill and not for criminals, 218
attention: concentration of, and new ideas, 86*n*; —, and automatic actions, 69; distracted by fixed idea, 168; disturbances of, 21*ff*, 44, 148, 180*f*; and fatigability, 144; subliminal, 68*n*; and train of thought, 69*n*; *see also* distractibility
auditory hallucinations, and silence, 58
authority, reaction to, 113, 116, 120
auto-hypnosis: in cases of simulation, 187; induced by simulation, 203
automatic phenomena, *see* phenomena, automatic
automatic writing, *see* writing, automatic
automatism(s): and auto-suggestion, 58; creation of, by feeling-toned idea, 162; creative force of, 105*f*; feeling of strangeness invoked by, 52, 53; fostered by distractibility, 181; in hysteria, 171; in minor somnambulistic attacks, 21; motor, as hypnotist, 74*f*; and partial hypnosis, 49; in semi-somnambulism, 48–61; subconscious, hypnotic influence of, 70; and submersion in dream role, 69; in visual sphere, 57*f*; waking and somnambulistic, 14
automatisme ambulatoire, 3, 10
auto-suggestibility, 12*f*
auto-suggestion, 49; and automatisms, 58; and daydreaming, 66*f*; deeper hypnosis through, 55; and development of automatic motor phenomena, 51; and loss of knowledge, 155; malingerers and, 163; and self-deception, 210*ff*; and simulated insanity, 203
Azam, C. M. É. E.: on periodic amnesia, 10*ff*; on spontaneous somnambulism, 62*f*, 79, 150
- B**
- Baetz, E. von, 71*n*, 164
Bain, Alexander, 51*n*
Ballet, Gilbert, 51*n*
"Baumann, August," in hysterical patient's fantasy, 210*ff*, 215, 216*f*
Baumann, Julius, 133
Baynes, H. G., and Cary F. Baynes, on "emotionally toned complex," 97*n*
behaviour: aggressive, 176; apathetic, 192, 195; boisterous, 116*f*; in detention, 138; manic, 118*ff*; outward, and mental activity, 180*n*; psychic, sudden alterations in, 189; social, in manic mood disorder, 115*ff*; in solitary confinement, 174, 191; in somnambulistic

INDEX

states, 19f; stupid, in simulation of insanity, 165, 174; stuporous, 149ff
Behr, Albert, 67n
Beyond, the, trance journeys to, 33-35, 42
Billod, E., 186
Binet, Alfred, 11n, 12n; on automatic actions, 69; on automatization, 181; experiments with patient's anaesthetic hand, 57f, 80, 91; on hysterical patients, 67n; on influence of darkness, 56; on Janet's experiment in unconscious personality, 53; on substitution of associations, 46; on semi-somnambulism, 48; on somnambulism, 5
—, and Féré, 13f, 55n
blaspheming, 129
Bleuler, Eugen, 3n, 88, 134, 156, 187; on case of attempted suicide, 15
blindness, hysterical, 22
bliss: facial expression of, 28; feeling of, 22, 27
Blumhardt, J. C., 84
Böcker, F. W., 183f
Böcklin, Arnold, 100
Boeteau, M., 11
Bohn, Wolfgang, 67
Bolte, August, 159f, 185n
Bonamaison, L., 71f
Bourne, Ansel, 11
Bourru, Henri, 63
brain, physiology of, and reproduction of impressions, 103f
Brentano, Bettina, 71
Bresler, Johann, 84
Breuer, Josef (with Sigmund Freud), 78n; on hysterical conversion, 155
brightness, hypnagogic, 22
Broca's convolution, 106
brooch, lost and found, 85
brooding, 173n
Burghölzli Mental Hospital (Zürich), 113, 117f, 125, 126, 127, 137, 218, 220
Burot, Ferdinand, 63

C

Camuset, Louis, 63
Cardan, Jerome, 59n
CASES IN SUMMARY, *listed alphabetically by reporting physician*:
Azam: boy, 121½, illustrating periodic amnesia, 10ff, 150n; Felida, somnambulistic girl whose second state became dominant, 62f
Bleuler: male, middle aged, suddenly attempting suicide without prodromal symptoms, 15
Boeteau: widow, 22, with somnambulism and amnesia, 11
Bourru and Burot: Louis V., male hysteric with amnesic alternating character, 63
Flournoy, *see* Smith, Héléne
Guinon and Woltke: hysterical female, illustrating associations with colour, 12
James: male, 30, of "ambulatory sort," a psychopath with amnesia, 11
Janet: hystero-epileptic, male, whose attacks were associated with vision of fire, 76; Léonie, 63-65
Jung: *see s.v.*
Landgraf: male, habitual thief, who simulated imbecility, 182f
Leppmann: mentally defective murderer who simulated imbecility, 182
MacNish: young female showing sleep disorder followed by amnesia, 12, 150
Marandon de Montyel: psychopathic woman who drowned her child and shammed amnesia, 183
Mesnet: soldier, 27, with somnambulistic attacks with restriction of consciousness, 11f
Mitchell: Mary Reynolds, young woman with character change

INDEX

CASES IN SUMMARY (*cont.*)

- after deep sleep of 20 hours, 61*f*, 79, 150*n*
Naef: male, 32, illustrating retrograde amnesia, 10
Pick: young girl whose daydream passed into twilight state, 162
Proust: male, 30, with *automatisme ambulatoire*, 10*f*
Renaudin: character change in young man with periodic anaesthesia of entire body surface, 63*f*
Richer: woman, 30, a hysteric with hallucinations of children being devoured, 9; hysterical girl, 17, with hallucinations of dead mother, 9
Rüdin: male, convicted of theft and offences against decency and declared irresponsible because of epileptic stupor, 182
Schroeder van der Kolk: girl, 15, exhibiting change of character in periods separated by amnesia, 62, 150
Siefert: male, 36, illustrating chronic manic state, 109
Siemens: young male, day-labourer, falsely accused of murder, 184
Van Deventer: male, with hereditary taint, illustrating sanguine inferiority, 110
catalepsy, 19*f*, 28, 145
catamnesis, 180; in doubtful cases of simulation, 164
catatonia: imitation of, 165; impression of, 192; masked by hysteriform symptoms, 149
Cellini, Benvenuto, sun vision of, 60
cemetery: Miss E.'s behaviour in, 6*ff*; walk in, 13
censure, angry reaction to, 118*f*
chain of ideas, 133
character: and actions, 133; development at puberty, 92; psychological fluctuations of, 44; quality of affects determined by, 215
character, change in, 47, 61–70; without amnesic split, 63*f*; literary use of amnesic, 63; in somnambulistic state, 87*n*; second state, 61*f*
Charcot, Jean Martin: on somnambulism, 9*f*; scheme for word-picture composition, 51*n*
cheating, pathological, 66
Chevreul, Michel Eugène, 48
childhood: and later abnormal emotional state, 123; *see also* puberty
children: dead, hallucinations of, 6*f*, 13; gibberish of, 85*n*; hallucinations of devouring of, 9
Clairvoyante of Prevorst (Frau Hauffe), 27, 34, 36, 42, 44, 66, 84, 85, 87
clang-reaction, 166*ff*
Claus, — (Sachsenberg), 185*n*
collecting, mania for, 11
colour, associations in hysterical attacks, 12
communications: automatic, 19, 25*ff*, 31, 44; trance, origin of, 31
complex(es): associated, objectivation of, 77*n*; feeling-toned, 97*n*, 219; psychic, 53
composition, literary: of manic patient, 126, 128*f*; patient's, autobiographical, 198
comprehension: and association, 168; and distractibility, 142; faulty, 180; reduced, 178*f*; retention of, despite loss of knowledge, 152; and senseless answers, 193*f*
compulsion: negativistic, 149; pathological, 214
concepts, and feelings, 87
concert, unpleasant episode at, 146*f*, 154*f*
confession: and forgiveness, trance pantomime of, 30; of simulation, 176, 196*f*
conflagration, vision of, 76
confusion: emotional, 204; —, disturbance of memory in, 171*f*; —,

INDEX

- as motivation for simulating insanity, 172*f*; —, and “stage fright,” etc., 164; hallucinatory, 148*ff*; mental, 165*f*, 174, 177, 204
- conscience, effect on psychic life, 173
- conscious mind: and associations, 98*f*; tyrannized by memories, 100
- consciousness: alternating states of, 12, 149; amnesic split, 76; dissociability of, 204; dissociated, and memory, 63; disturbances of, 163; division of, 69; double, *see* double consciousness; entry of cryptomnesic image, 81–87, 96; and feeling-toned memory complexes, 98; and fraud, 215*f*; hysterical splits of, 76; identity of, in somnambulistic attacks, 9; loss of previous impressions, 104; rare states of, 3*ff*; reconstitution of scope of, 153*f*; restriction of, 11*f*, 45*f*, 151*f*, 203; —, and cryptomnesia, 86; —, and the senseless answer, 149; secondary complexes, 72*f*; in semi-somnambulism, 47*f*; in severe hysteria, 9; split, in misreading, 91; supraliminal, 71, 152; threshold of, 14, 45; tyrannized by unconsciousness, 105
- consideration for others, lack of, 131
- control, mediumistic, 30*ff*
- Conventi, Italian murderer, somnambulistic personality, 35
- conversation, trance, 20*f*, 28, 29; impression of wilful deception, 43; by means of intended tremors, 54; memory of, 27; with somnambulist personality, 31*f*
- convulsions, hysterical attacks of, 115
- Cook, Florence, medium, 36
- counter-suggestion: and prevention of automatisms, 54; *see also* suggestion
- creation, original, 41, 82
- creativity: and ecstasy, 104*f*; of hallucinations, 12; and memory complex, 100*f*; and wish-fulfilment, 99; *see also* originality
- crime: psychological diagnosis of, 219*ff*; *see also* fraud; murder; rape; suicide; swindling; theft; vagrancy
- criminal(s): energy and self-control in deception, 161; influence of hysteria on actions of, 215; reason for simulated insanity, 186; stuporous behaviour of, 150; unjustifiable presence of, in asylums, 218; *see also* prisoners
- Crookes, Sir William, 36
- cryptomnesia, 81–87, 95–106; defined, 101; enrichment of conscious memory, 86
- Cullerre, A., 9*n*

D

- Daltonism, 201
- dark, powers of, 41*f*
- darkness, 22; automatic writing in, 27*f*, 55; effect of, 26, 56; solitary confinement in, 164; and suggestibility, 57
- David, Jacques Louis, 37
- daydream(ing): passing into twilight state, 162; pathological, 66*f*
- dead, the: hallucinations of, 6*ff*, 26; spirits of, 47
- death, thoughts of, 20
- deathbed, and cryptomnesic reproduction, 84, 104
- deception: in hallucinatory phenomena, 78; *see also* malingering; self-deception
- decisions: and feeling-values, 133; voluntary, and feeling-tone, 132*f*
- degeneracy: congenital, 204; effect of detention on, 169*f*; and hypalgesia, 180; hysteria as mark of, 99*f*; inherited, 64; and malingering, 160; psychic, symptoms of, 130; signs of, 201; and simulation, 188; symptoms of, 111
- degenerate(s): case of simulation,

INDEX

- degenerate(s) (*cont.*)
183*f*; energy and self-control of, 161
- dejection, 173*n*
- Delbrück, Anton, 66&*n*, 68*n*, 162
- delirium: delusions of grandeur in, 125; hysterical, 7, 8*f*, 67; with motor excitement, 151; syndromes of degeneracy, 130
- delirium tremens, 117, 118
- delusion(s): of being wronged, 151; in hysterical delirium, 8*f*; of grandeur, 125, 126*f*, 151; *see also* self-deception
- dementia, and outer associations, 169
- dementia paralytica*, and intellectual deficiency, 151
- dementia praecox*, 159, 202
- depression, 115, 117, 119; epileptic, 15*n*; source of, 123
- "depressive melancholia," 182
- Dessoir, Max, 76*n*, 80
- detention: characteristic states of prisoners in, 148*ff*; fear of, 188; and hysterical psychoses, 160; hysterical stupor of prisoner in, 137-56; influence of, 150*f*; patient's affect *re*, 142, 169*f*
- diagnoses: contradictory psychiatric, 209-18; difficulty of differentiation in certain states of epilepsy, somnambulism, and hysteria, 15; modern requirements for, 160; optimistic, in cases of simulation, 185*f*; psychological, of facts, 219-21; of rare states of consciousness, 3*f*
- dialect word, *see* word substitution
- Diehl, August, 15
- diphtheria, in case history, 112, 114
- disorientation: following unpleasant episode, 146*f*; patient's, as to location of room, 195, 199; in senseless answers, 140*ff*; *see also* orientation
- disposition: hysterical, 161; —, outstanding feature of, 204; —, subsidiary symptoms, 213; mental, and assimilation of affects, 170; —, and simulation, 173; pleasure-seeking, 132, 210
- dissociation: and affect, 171, 181; of consciousness, 204
- distractibility, 111, 120; and automatizations, 181; effect on comprehension, 142; and faulty memory, 143; hysterical, 45; and interest, 82; and lethargy, 72; low-grade states of, 46*f*; and misreading, 45, 90
- distraction, outer: experiments with, 168
- disturbance(s): of attention, 44*f*; of emotions, 8*f*; of memory, 8; psychogenic, 184*f*; of sensibility, 150; of thinking, 110; of writing, 140*f*
- dizziness, 146*f*; *see also* fainting-fits; giddiness
- Donath, Julius, 62*n*
- double consciousness, 3, 12, 149; and amnesia, 76; and new character formations, 79; and submersion in role, 162
- "double life," S. W.'s, 25
- dream (s): of black and white figures, 23*f*; hysterical thinking in, 67; of kittens and cats, 144; level, consciousness and, in severe hysteria, 9; objectivation of, 68; origin of, 69; pictures, somnambulist, 13*f*; realization of ideal state, 66; somnambulist, 32, 46, 66*f*; symbolism in, 57; symbols, and memories, 100; uninhibited by conscious mind, 99; visual, and light sensations of retina, 59
- dreaminess: lapses into, 21*f*; pathological, 3, 16, 68*f*, 173
- dream-state: pathological, 46; somnambulist, 13
- dream-world, reality of, 23
- drowsiness, and darkness, 56
- drunkenness, *see* alcohol; alcoholism
- dualism, derivation of idea of, 87

INDEX

dull-wittedness, 165*f*
Dyce, —, 79

E

E., Miss, case of spontaneous somnambulism, 5–17; hallucinations of dead children, 6*f*, 13
earthquake: and amnesia, 172; paralysis of movement and feeling caused by, 164
Eckermann, J. P., 84*n*; on deathbed memories, 104
ecstasy: and creativity, 104; fantasy activity in, 32*f*; and glossolalia, 84; and intellectual exaltation, 87; in manic mood disorder, 126; Nietzsche on, 84*n*; poetic, 84; in somnambulist states, 19*f*; and table-turning experiments, 25
Eder, M. D., 3*n*
Edmond, Laura, daughter of judge, 84
educational level, improvement of, in somnambulist states, 18, 19, 88
ego: pubertal changes in constitution of, 64; somnambulist, 24, 32, 36, 80; —, and patient's distractibility, 72; —, *see also* Ivenes
ego-complex: and cryptomnesic idea, 81; link between twilight and waking states, 76, 78; splitting off of psychic functions from, 91
egotism, extreme, 213; *see also* megalomania
Einfall, word, 96
elation, 120, 124*ff*; in chronic mania, 110*f*; continuous state of, 125*f*
embarrassment: and attention, 168; and inhibited association, 166
Emmerich, Katharina, 186
Emminghaus, H., 62*n*
emotion(s): changes in, in feeble-mindedness, 189; disturbances of, and hysterical delirium, 8*f*; domination over intellect, 131*f*; influ-

ence on actions, 132*f*; and paralysis, 164; and psychogenic disturbances, 185; repressed, 56; violent, after-effect of, 187; *see also* affect employment, frequent change of, 121, 123, 124*f*, 173*ff*
enchantment of spirits, S. W.'s attempts at, 34
energy, impulsive, of criminals, 191
entoptic phenomena, 58
environment, falsified perception of, 202*f*
epilepsy, 3; depression in, 15*n*; diagnostic difficulty in certain states of, 4*f*, 15; epileptic stupor, 182; and hysteria, 4; *see also* hysterolepilepsy
epileptoid, term, 15
Erler, — (Eberswalde), 9*n*, 67
eroticism, 118; in manic mood disorders, 121*f*
ethical feelings: effect of lack of, 132; *see also* moral defect
exaggeration, conscious: in abnormal affective states, 189
examination, fear of, 165*f*
excitability, 122*f*; and alcoholism, 125; emotional, 117, 138, 201; —, in morally defective persons, 134
exhaustion, 14*f*; after ecstasy, 22; and manifestation of hysteria, 16; temporary, and protracted hysterical delirium, 8
expectation, feeling of, 56, 59
external world: isolation of ego-consciousness from, 73; orientation to, 24; relation of subconscious personality to, 64

F

facial expression: blissful, 28; rigidity of, 175, 179, 192; stupid, 166
facts, psychological diagnosis of, 218–21
fainting-fits, 5, 17, 175, 179, 202*f*

INDEX

- fantasy(ies): pathological, 67; and romance, 162; in somnambulistic states, 32*f*, 36*ff*, 68
- fatigue, 143; *see also* exhaustion
- fear: of detention, 183*f*, 188; of examination, 165*f*; and rage, 138*f*; and simulation, 165*f*
- feeble-mindedness, 110; and compulsive talking, 105; and doubtful simulation, 166*ff*; and defective critical faculty, 131; heightened by emotionality, 169; imbecility induced by emotional changes, 189; and social incapacity, 132
- feelings, and concepts, 87
- feeling-tone(d), 97*f*; associations, 105*f*; and decisions reached by the will, 132; ideas, 68, 162, 219; memory, 146*f*, 155; motivation, 163; relationship to character and actions, 133; thought-processes, 203*f*; train of thought, 97*f*
- feeling-values, influence on decisions, 133
- feet, burned with sulphuric acid, 163
- Felida (Azam's case), 62*f*, 79, 150
- Féré, Charles, 13*f*, 55*n*
- figures: black and white, 22, 42; hallucinatory, 144, 151; white, 26
- Flaubert, Gustave, 71*n*
- flexibilitas cerea*, 20
- flight of ideas, 111, 113, 118, 122*f*, 125, 128, 130*f*
- Flournoy, Théodore, 55*n*, 57*n*, 71*n*; case, *see* Smith, Hélène; on cryptomania, 101; on glossolalia, 84; on somnambulistic dreams, 66*n*; on speech automatisms, 73*n*
- flower: Goethe's image of, 14; in visions, 26, 60
- food: delusion of poisoning of, 138; refusal of, 174*f*, 192, 196*f*, 203
- forces, attractive and repulsive, 39*ff*
- foreign words, manic patient's use of, 126, 129
- Forel, Auguste: on dissociation, 181; on pathological cheating and day-dreaming, 66
- forgetfulness, hysterical, 68*f*; *see also* amnesia
- forgetting, idea of, 155
- forgiveness, trance pantomime of, 30
- Förster-Nietzsche, Elisabeth, 83, 103
- fraud: case of, 209–18; conscious and intentional, 216*ff*; and self-deception, 214
- French language, words derived from, 85
- Freud, Sigmund: dream investigations of, 56, 78, 99; on hysterical identification, 67; on psychogenic disturbances, 185; on symptomatic actions, 98; theory of hysteria, 92, 155, 170; on train of thought and attention, 69*n*; *see also* Breuer, Josef
- Fritsch, —, 161
- Fürstner, C., 160, 186
- future: adventurous plans for, 123; optimism *re*, 117, 123, 126, 129

G

- Galton, Francis, 220
- Ganser, Sigbert, 137, 154; on hysterical ailments, 184*f*; on "senseless answer," 149; on states observed in prisoners in detention, 148*ff*; studies of twilight states, 160, 172*f*, 179; syndrome, 185, 187
- "Geiss," *see* "Ziege"
- genius: creative, and wish-fulfilment, 99; and degeneracy, 99*n*; "possessed" nature of, 82; psychology of, 4; and sensibility, 99; symptomatic actions of, 100; work of, 105
- Gerbenstein, Ulrich von (somnambulistic personality), 29, 32, 36, 37, 43; gay-hilarious type, 77; increased influence of, 78
- gibberish, 85*n*

INDEX

- giddiness, 5; *see also* fainting-fits
Gilles de la Tourette, Georges, 87*n*
glass tumbler, as "psychograph," 25, 27
Gley, M. E. E., 48
glossolalia, 84*f*
gnostic system, parallels in S. W.'s mystic science, 88
Godwina F.: case of hysterical stupor, 137–56; peculiarities of case, 148*ff*; physical examination, 139; tests, 144
Goethe, J. W. von, 59*n*; and Bettina Brentano, 71; conjuration of flower image, 14; in S. W.'s trance fantasies, 37; *see also* Eckermann, J. P.
Görres, J. J. von, 67*n*, 84*n*
Graeter, C., 76*n*
grande hystérie, symptoms of, 10*f*
grandeur, delusion of, 125, 126*f*, 151
grandfather: Jung's, 26, 56; S. W.'s, as spiritualistic control, 19, 26, 31, 73, 74*f*, 77
"graphomaniacs," 131
Greek: deathbed memory of, 104; mystic terms derived from, 85
Gross, Hans, 161*n*
Guinon, Georges, 9*n*; and Sophie Woltke, experiments with hysterics, 12, 46
- H
- haemoptysis, simulation of, 163
Hagen, F. W., 56*n*, 59*n*, 60*n*, 71*n*
Hahn, R., 89*ff*
hallucinations: auditory, *see* auditory hallucinations; complex, in partial waking state, 61; creative, 12; of dead people and skeletons, 6*f*; in *grande hystérie*, 9; habitual, 16; hypnagogic, 14, 23, 59; induced, 11*f*; intuitive, 61; and passage from night-dreams to waking state, 23; in prodromal stage, 150; psychogenic, 14; reasons for appearance of, 58*f*; of the senses, in hysterical delirium, 8*f*; in solitary confinement, 192; systematic nature of, 22*f*; teleological, 79; of theft of money, 144; transition to somnambulism, 55*f*; voices, 125, 127, 128, 130; waking, 17
hand: anaesthetic, 57, 80, 91; thrust into fire, 163*n*
Harden, Maximilian, 106
Hauffe, Frau, *see* Clairvoyante of Prevorst
Hauptmann, Carl, 77*n*
head, patient's banging of, against door, 176*ff*, 195, 199
headache, 5, 7*f*, 14, 16, 29; cured by suggestion, 145; in hysterical stupor, 142*ff*; self-magnetization to dispel, 27
hebephrenics, irrelevant talk of, 149
Hebrew, deathbed memory of, 104
Hecker, J. F. C., 59*n*, 61
Heidelberg Clinic, 182
heightened unconscious performance, *see* unconscious performance
Hélène Smith, *see* Smith
hell, journey to, 82*f*, 101*ff*
heredity: and degeneracy, 64, 201; in case of fraud, 213; and hysterical stupor, 137; manic mood disorder and, 112, 115, 120, 124, 130; and psychopathic inferiority, 5; and simulated insanity, 173, 190
Hertz, Carl, 183*f*
Hoche, A. E., 163*n*
Höfelt, J. A., 62
hunch, cryptomnesic image as, 81
hydrotherapy, 5
hypalgesia, 178, 179, 197; and degeneracy, 180
hyperactivity, motor, 131
hypermnesia, 81*n*, 86
hypnosis: continuity of memory under, 145*f*; deepening of, 55, 56; double, 145*f*, 147, 154; effect on amnesia, 145; hystero-, 74; partial, *see below*; patients' denial of being hypnotized, 164; self-, partial,

INDEX

hypnosis (*cont.*)

- 73; treatment by, 8; word, derivation of mystic terms from, 85
- hypnosis, partial, 49; and automatic writing, 54*f*; influence of, 70*f*; penetration into speech area, 51*f*; and response to suggestion, 54; self-, 73
- hypnotist, automatism as, 74*f*
- hypomaniac: behaviour, chronic, 109; complex of symptoms, 134; state, chronic, 111
- hysteria, 3*ff*; and affects, 215; and assimilation of affects, 170; associations with colour in attacks of, 12; automatization of psychic functions, 91; diagnosis of, 14; and epilepsy, relationship between clinical pictures of, 4; and feeling-toned memory complex, 98; and genius, 99*f*; and memory, 152; modern theory of, 160; and moral defect, 214*ff*; periodic changes in personality in, 63; psychopathology of, 137*ff*; severe, 9; and simulation, 187; and somnambulism, 5*ff*; strength-producing mechanisms of, 163; symptoms, 180, 201; *see also grande hystérie*
- hysterical conversion, 155
- hysterical misreading, *see* misreading
- hysterical subjects: constitutional lying and fraud, 211; and forgetfulness, 68*n*; identification of, with object of interest, 181; influence of affects on, 171, 217; influence of darkness on, 56; irrelevant answers of, 92; lying of, 160; phenomena observed in, 203; self-torture by, 186; sensibility of, 80*f*; systematic anaesthesia among, 64; young, moria states of, 150
- hystero-epilepsy: attacks induced by open fire or lighted match, 76; visions in, 9
- hystero-hypnosis, 74

I

- idea(s): affective, 155; associations with ego-complex, 81; automatization of, 181; chain of, and feeling-value, 133; combinations of, 100*f*; delusional, 215; feeling-toned, 68, 162, 219; "levelling-down" of, 133; motor components of, 73; new, development of, in somnambulism, 86*n*; new combinations of, 99; original, 81; predominating, influence of, on intended tremors, 49*n*; —, and retinal phenomena, 60; —, surrender to, 67*f*; *see also* flight of ideas
- ideal, subconscious personality as, 65*f*, 77*f*
- identification, hysterical, 67
- image(s): combination of, *vs.* new formation, 96; cryptomnesic, intrapsychic entry into consciousness, 81–86; hypnagogic, and dream-images, 59; formed from spots of light, 58*ff*; visual, and cutaneous stimuli, 13
- imagination: and fantastic figures, 58*f*; and visions, 61
- imbecility, simulation of, 182*f*
- impostors, intentional fraud of, 216
- impressions: forgotten, reappearance of, in cryptomnesia, 103; subjective, of the malingerer, 159*f*
- impulse, unexpected, 12, 13
- incarnation of Parisian poisoner, 38
- inclinations, evil: and hysteria, 216
- inferiority: hysterical, 180; intellectual and emotional, 4; neurasthenic, diagnostic difficulty, 15
- inferiority, psychopathic, 3*ff*; borderlines between clinical pictures of, 111; character of affects, 189; classification of cases, 4*f*, 15; and hysteria and epilepsy, 4*ff*; influence of affects on, 171; phenomena related to other clinical pictures, 16
- influence, magnetic, 41

INDEX

inhibition(s): of association, 166;
imposed by conscious mind, 98f
insanity: cyclic, 63; feeling-toned
complexes of associations in, 219;
legal conception of, 218; and legal
responsibility, 204; simulated, case
of, 159–205; —, medical opinion
on, 188–205
insight: of defendant, as to her
swindling, 217; during psychic
disturbance, 164; increased, in
question of simulation, 159; pa-
tient's, as to illness, 106, 113, 118,
119, 123, 126, 176
inspiration, Nietzsche on, 82n, 105
instability: and inner unrest, 200f;
psychopathic, 112ff; social, in pa-
tient with manic mood disorder,
120ff
instinct, pathological, 215
instinctual drives, excess of, 132
instructions, response to, in case of
simulated insanity, 175ff
intellect: and action, 133; effect of
emotional lability on, 134; exal-
tation of, in ecstasy, 87; under
sway of emotions, 131f; and will,
132
intelligence, 128; defective, in hys-
terical stupor, 149f; in manic
mood disorder, 112ff, 115, 120,
124, 132
interest, and object, 81f
internment: in case of fraud, 213;
and simulation, 182f; *see also* de-
tention
inventors: crackpot, 131f; “para-
noia” of, 130
irreparabile damnum, 76
irresponsibility, legal, *see* responsi-
bility
irritability, 109, 122f, 125, 130, 133,
173n; in chronic mania, 110f
Ivenes (S. W.'s somnambulistic ego),
32, 36; character and reincarna-
tions of, 36ff; deterioration of,
78f; improvement over normal

personality of S. W., 65; mental
products grouped around grand-
father, 74f; study of, 64ff; subcon-
scious personalities' knowledge of,
74

J

Jacobi, —, 183
Jacobi-Jenssen, —, 164
Jacobsohn, Siegfried, 106
James, William, 61n; on case of psy-
chopath with amnesia, 11
Janet, Pierre: on disturbance of at-
tention, 44f; on hystero-epilepsy,
76; on influence of affects, 170f,
181; Léonie, case of, 63, 65; on
lies of hysterical subjects, 68n; on
unconscious personality of sub-
ject, 53, 54n; use of double hyp-
nosis, 154; whispered suggestions,
experiment with, 51n, 70f
Japan: earthquake, 164; proverb,
163
Jessen, W., 79n, 183n
Joan of Arc, 60, 79
journeys, trance, 22, 27, 29, 33f
Jung, C. G.: on “feeling-tone,” 97n;
his grandfather in S. W.'s séances,
26, 56; inaugural dissertation, 3n,
219; professional career, v–viii; S.
W. and, 21; in S. W.'s trance fan-
tasies, 35, 37ff
CASES IN SUMMARY (*in order of
presentation, numbered for refer-
ence*):
[1] Miss E., 40, showing hallucina-
tions of skeletons and dead
children. Illustrates concept of
spontaneous somnambulism
based on hysterical psychopath-
ic inferiority. — 5ff
[2] Miss S. W., 15½, somnambu-
listic girl (spiritualistic medi-
um) with poor inheritance. —
17–88; *see also* S. W., Miss

INDEX

Jung (*cont.*)

- [3] Hysterical young woman, illustrating feeling-toned memory complex. — 98
 - [4] Business man, 27, illustrating mild form of manic mood disorder. — 112–15
 - [5] Woman, 44, with manic mood disorder, illustrating alcoholism dependent on emotional abnormality. — 115–20
 - [6] Nurse, 26, exhibiting manic mood disorder with social instability. — 120–24
 - [7] Male, 55, painter, charged with theft, whose intense manic symptoms ruled out even “partial responsibility.” — 124–32
 - [8] Godwina F., 48, illustrating hysterical stupor in a prisoner in detention. — 137–56
 - [9] Doubtful simulation in male mental defective charged with rape. — 165f
 - [10] Doubtful simulation in boy, 17, charged with rape. — 166ff
 - [11] Male, 35, mill-hand, degenerate, illustrating simulation of insanity. — 173–80, 189–205
 - [12] Youth, 18, whose theft was discovered through the associations of a feeling-toned complex relating to the crime. — 220f
- WORKS: “A Review of the Complex Theory,” 97n; *Collected Papers on Analytical Psychology*, 3n; *Experimental Researches*, 168n, 219n; “On Psychological Energy,” 97n; “The Reaction-Time Ratio in the Association Experiment,” 219; *Symbols of Transformation*, 186n; “The Psychology of Dementia Praecox,” 168n; and Riklin, “The Associations of Normal Subjects,” 219ff; for account of works, see v–x

K

- Kant, Immanuel, 39f
- Karplus, J. P., 77n
- Kerner, Justinus, 27, 34, 44, 66; *Blätter aus Prevorst* passage paralleled by Nietzsche, 82f, 102ff; and Frau Hauffe, 87; see also Clairvoyante of Prevorst
- Klein, Julius, 219ff
- knowledge: cosmic, plane of, 42; intuitive, of somnambulists, 86; loss of, 12, 61, 140ff, 148, 151; —, and not wanting to know, 155; retention of, 178; see also educational level; quality of being known
- Koch, —, 110
- Kraepelin, Emil, 167n; arithmetic tests, 178
- Krafft-Ebing, Richard von, vi, 86n, 110, 134n; on hysterical ecstasy and memory, 104; on protracted states of hysterical delirium, 8f
- Krauss, A., 161

L

- lability, emotional, 111ff, 116, 119, 123ff, 213; see also instability
- Ladd, C., 59
- Landgraf, Karl, 182f
- language, 101; exaggerated, in manic mood disorder, 118; French, 85; Greek, 85, 104; Hebrew, 104; idiom used by S. W., 20, 28, 35; Latin, 85; loftiness of, 126; Martian, 85; of the spirits, 33f; Swiss dialect, 18, 89ff; see also glossolalia
- lapses, 65; see also preoccupation
- Latin, mystic terms derived from, 85
- Laurent, Armand, 180n; on patient who simulated, 186
- Legrand du Saule, Henri, 63
- Lehmann, A. G. L., 48, 49n, 73n, 162n

INDEX

- Léonie (Janet's case), 63, 65
Leppmann, A., 182
lethargy, 3, 70*f*; changed into hypnosis, 72; hallucinations in, 72; hysterical, induced by hypnosis, 71*f*
letters, transposed or reversed, 25*f*, 52; *see also* love letters
liar, pathological, 67; *see also* lying
light: entoptic perceptions of, 58*f*; formless, vision of, 59*n*; powers of, 41*f*
Lindau, Paul, 63
Ljubljana earthquake, 172
Loewenfeld, Leopold, 87*n*; on development of new ideas, 86*n*; on lethargy, 70–72; on sleepwalking, 10*n*
Lombroso, Cesare: on genius, 99; “graphomaniacs,” 131
lottery tickets, case involving, 209–18
Lotz, — (Frankfurt a. M.), 186*n*
love letters, from imaginary fiancé, 67, 162
Lücke, Robert, 172*n*, 185
lung, hysterical haemorrhage of, 186
lying, 3; hysterical, 160; pathological, 16, 67, 68, 203, 211; of thieves, 161; and self-deception, 212
- M
- Macario, M. M. A., 61
MacNish, Robert, 12, 150
Magnan, Valentin, 111, 130
magnetism, derivation of mystic term from, 85
magnetization: and cerebral anaesthesia, 49; self-, 27
malingering(ing): character of, 160*f*; difficulty of unmasking, 159*f*; passage into subconscious, 181; use of feeble-minded behaviour, 172; *see also* shamming; simulation
mania, 90; chronic, cardinal symptoms, 111; —, Wernicke on, 110; periodic, diagnosis of, 126
manic mood disorder, 109–34; periodic exacerbations of, 134; summary, 134; symptoms, 111*f*
manie sans délire, 110
Marandon de Montyel, E., 183
marriage: effect on patient of breakup of, 116; unhappy, 190*f*
Mars: S. W.'s description of, 34; visions of, 60
Martian language, 85
Mary Reynolds, *see* Reynolds
materialization: as origin of Adam, 38; trance, 29, 42
Maury, L. F. A., 59
megalomania, 111, 124*ff*, 126, 130; *see also* egotism
Meggendorfer picture-book, 178
melancholia, 109; depressive, 182
memory(ies): auto-suggestive falsification of, 67; blocking of unpleasant events in, 153; conscious, enrichment in cryptomnesia, 86; continuity of, in hypnosis, 145; defective; in hysterical subjects, 164; —, for period of simulation, 202; direct and indirect, 95*ff*; and dissociated consciousness, 63; disturbed, 8; effect of affects on, 171; feeling-toned, 100, 146*f*, 155; fragmentary, reproduction of, 105; gaps of, and acquisition of content through auto-suggestion, 13; hysteriform lapses of, 12; loss of, 138 (*see also* amnesia); medium's, at disposal of somnambulist personalities, 32*f*; old, re-emergence of, 103*f*; *see also* cryptomnesia
memory-image: in cryptomnesia, 81; and the law of association, 95; and unconscious perception, 96
Mendel, Emanuel, 110
menstruation: and abnormal emotional state, 123; in case of spontaneous somnambulism, 5, 7
mental: activity, in chronic mania, 110*f*; —, effect of simulation on,

INDEX

- mental (*cont.*)
202*f*; content, intrusion of, in motor phenomena, 51; defectives, simulation of insanity among, 165*ff*; disease, and epileptoid attacks, 15; phenomena, in automatic table-turning, 51*f*; productivity, in chronic mania, 110*f*
- Mesnet, Ernest, 11*f*
- Messiah, manic patient's delusions of self as, 126, 128
- Michelangelo Buonarroti, 100
- miracles, faked, 186
- mirror-writing, 52, 55
- misreading, hysterical, 18, 44, 45-47, 89-92; essential difference from all other types, 91; as prodromal symptom, 46; psychology of, 45*f*
- Mitchell, S. Weir, 150; case of Mary Reynolds, 61*f*, 79
- Moll, Albert, 63*n*
- money: attitude toward, 121; delusion of theft of, 138*ff*, 143*ff*, 151
- moods: actions affected by, 217; unstable, 139; *see also* lability, emotional; manic mood disorder
- moral defect (moral insanity), 111, 114, 119, 124, 132, 134, 212; and alcoholism, 116; congenital condition, 215; and emotional abnormality, 134; explanation of, 115; and hysteria, 214*ff*; periodic or cyclic, 134; scientific conception of, 217*f*
- moral insanity, *see* moral defect
- Mörchen, Friedrich, 15, 68*n*
- motion, forces of, 41
- motivation: in case of simulated insanity, 180; characterological, 133; feeling-toned, and subconscious mechanisms, 163; psychological, 172
- motor: area, deeper hypnosis of, by auto-suggestion, 55; automatism, 74*f*, 86; centres, excitation limited to, 73; hyperactivity, 131; impulses, barring of perception of, 51
- motor phenomena: automatic, intrusion of mental content into, 51; in automatic writing, 55; suggestion and, 48*f*; unconscious, 48*ff*
- Müller, Erdmann, 134*n*
- Müller, Johannes, 59*n*
- Muralt, Ludwig von, 88
- murder, impulse toward, 64
- murderer, case of simulated imbecility, 182
- muscles, tonic and clonic spasms of, 186
- mutism, simulated, 182*f*
- Myers, F. W. H., 52, 59
- mystic science, 39-42; derivation of names in, 85; diagram of forces, 40; groups of forces, 41*f*; as heightened unconscious performance, 87

N

- Naef, M., 10*f*
- narcolepsy, 3, 70
- needlepricks, *see* pricks
- negativism, 183; catatonic, 149
- nervous system, psychopathic disposition of, 79
- neurasthenia, 3*ff*; crises, 14*f*; and psychopathic inferiority, 4*ff*, 16
- neuropathies, and epileptoid attacks, 15
- neuroses: shock, 164; traumatic, 150
- New Testament, glossolalia in, 84
- Nietzsche, Friedrich: cryptomnesic parallel of passage from Kerner, 82*f*, 101*ff*; on ecstasy, 84*n*; on inspiration, 82*n*; on inspiration and revelation, 105; interest in Kerner, 83; mental state when writing *Zarathustra*, 104*f*
- Nissl, F., 137, 149
- noises: animal, 128, 129; hallucinatory, 147; *see also* voices
- Nordau, Max Simon, 99*f*
- normal state, linked with pathological dreaming, 68*f*

INDEX

number: experiments with, 57*f*, 86, 91; gaps in counting, 142*f*; patient's confusion *re*, 141; tests with, 193, 197*f*

O

object: cryptomnesic reproduction, 84; and interest, 81*f*, 181
objectivation: of associated complexes, 77*n*; of dreams, 68; of visual images, 57
obnubilation, 61
occultism: and heightened unconscious performance, 80; so-called, Jung's case of, *see* S. W.
Oehler, Pastor, Nietzsche's grandfather, 83
offences, criminal: moral defect *vs.* hysteria as source of, 216
optic impression, and misreading, 90
optimism, 117, 123, 126, 129; ex-orbitant, 131
oracular sayings, in séances, 35
orientation: as to place, 152; as to space, 142; as to time, 177; as to time and place, 153, 165, 175, 193; unconscious, 152*f*, 154; *see also* disorientation
originality: of ideas, 81; source of, 96
over-activity, 111, 117*f*, 120

P

pain: self-inflicted, 163, 186; sensibility to, 139, 175, 194, 197
painting, patient's, 127
pallor, in somnambulistic states, 19, 26, 28, 29, 71
paralysis, 90; emotional, 71*n*, 164
paranoia, 130
Pelman, C., 15*n*, 79*n*
pendulum, experiments with, and intended tremors, 49*n*

penitentiary, manic patient's behaviour in, 127
perception: activated by association, 95; along verbal-motor route, 45; and reproduction, in misreading, 91*f*; unconscious, 87; —, related association activated by, 96; —, *via* anaesthetic skin, 80
performance tests, 178*ff*, 199*f*; *see also* unconscious performance
perseveration, 166*f*
personality: alteration of, in semi-somnambulistic states, 24; automatic splitting of, 52; change of, in somnambulistic states, 19, 24; future, and double consciousness, 79; and hysterical twilight states, 16*f*; somnambulistic dissociation of, 67; *see also* character
personality(ies), unconscious: automatic expression of, 56; continuity of, 64*f*; development of, through suggestion, 53; distinct from automata, 78; gay-hilarious, 73; hypnosis of, 154; hypnotic effect of, 72; Janet's Lucie and Léonie, 63; origin of, 77*f*; range of knowledge, 73*f*; relation to somnambulistic ego, 74*ff*; relationship of, 37*f*; serio-religious, 73; somnambulistic, in S. W.'s trances, 30–36, 37*f*; split off, 72*f*; split off from dream-ego, 78; splitting of, 56*f*; two types of, 72*f*; unity of, 76*f*
persuasion, powers of, and hysteria, 215
pessimism, 112
phenomena, automatic: memory of, 33; misreading as, 90
Phleps, Eduard, 164*n*, 172
physical examination, 6, 139; in case of simulated insanity, 178*f*, 194*f*, 197, 200
Pick, Arnold, 15*n*, 66*f*, 162
Pinel, Philippe, 109*f*
pinpricks, *see* pricks
plagiarism, and cryptomnesia, 81, 101*ff*

INDEX

- plants, life-forces of, 41
playing cards, experiment with hypnotized subject, 76
pleasure/pain affects, 120
pleasure-seeking, 132, 210
pneumatological school, 16
poets, 16; lives of, 131; and wish fulfillment, 99
poisoner(s): Parisian incarnation of, 38; art of shamming among, 161
poisoning of food, delusion *re*, 174, 192, 197
pope, manic patient's delusions of himself as, 125
possibility, psychological: and success of suggestion, 53
powers, light and dark (good and evil), 41*f*
practice, effect of, in association tests, 168
premonition(s), 17; in semi-somnambulistic states, 25; of somnambulistic attacks, 20
preoccupation, before and after somnambulistic attacks, 47
Prevorst: *Blätter aus*, see Kerner *s.v.*; Prophetess of, see Clairvoyante of Prevorst
Preyer, William T., 49*n*
pricks: on anaesthetic hand, 57, 80, 91; insensibility to, 138; reaction to, 139, 175
Prince, Morton, 63
prison complexes, 130
prisoners: characteristic states of, 148*ff*; Ganser complex, 187; case of hysterical stupor, 137–56; hysterical psychoses, 160
prison psychosis, 156; characteristic syndrome, 151
prophecies, 17
prophets, 16
Proust, Achille Adrien, 10
pseudologia phantastica, 68, 203
psyche, abnormal affective states of, 189
psychic: complexes, disaggregation of, 53; excitation, 71*ff*; functions, automatization of, 91; processes, and hysterical attack, 77*n*; —, in misreading, 90*f*; shock, as cause of hysterical attack, 9
psychic elements: combination of, and originality, 96; conscious and unconscious, 98; disaggregation of, 67
“psychic shadow state,” 46
psychogenic disturbances, dependent on external events, 184*f*
psychograph, in séances, 25*ff*
psychological possibility, 53
psychology, normal: and pathological inferiority, 4
psychopath: morally defective, 212; puberty of, 64
psychopathic illnesses, and chronic mania, 111
puberty: fantasy-making in, 70; fluctuations of character in, 44; physiological changes of character in, 64; somnambulistic symptoms in, 79; and manic mood disorder, 112, 114, 130
- Q
- quality of being known, 96, 98, 101*f*
questions, and senseless answers, 140*ff*
Quicherat, Jules, 60*n*
- R
- R., Mr., and his brother, P. R., in S. W.'s séances, 31*f*
rabbits, shooting of, in cryptomnesic image, 83, 102
Raecke, Julius, 137, 154, 172*n*; on hysterical ailments, 184*f*; on hysterical twilight state, 149; on loss of knowledge, 155; on stupor in criminals, 150

INDEX

- rape: attempt to simulate, 66;
charge of, 165; victim's memory
of attempts at, 115
reactions: meaningless, 166, 167*n*;
slowness of, 165
reading, addiction to, 120
reading-tests, 90
reality, loss of, 171
Récamiér, Mme., 37
red-green blindness, 197, 201
Redlich, Johann, 67*n*, 68*n*
reflexes, tests of, 6, 139, 178, 197
reincarnation, S. W.'s system of, 36*ff*,
69*f*
religious: feeling, expression of, by
manic patient, 126, 129; sects,
founders of, 16
remorse, as reason for simulation,
196*f*, 201
Renaudin, Louis François Émile,
63*f*
reproduction, in cryptomnesia, 103*f*
responsibility, legal, 179, 204, 213;
in case of epileptic stupor, 182;
juridical conception of irresponsibility,
216; limited by hysteria,
217; and moral defect, 209*ff*; and
pathological self-deception, 211*ff*
rest cure, 14
restlessness, 111, 112, 116, 121*f*; in-
ner, 133, 177, 200
retention, reduced, 197
retina, light sensations of, 59*f*
revelation, Nietzsche on, 82*n*, 105
Reynolds, Mary (Weir Mitchell's
case), 61*f*, 79, 150*n*
Ribot, Théodule Armand, 63&*n*, 64*n*
Richarz, Franz, 180*n*, 183*f*
Richer, Paul, 9, 63
Richet, Charles, 47*f*, 87
Rieger, Conrad, 63
right and wrong, recognition of:
and legal responsibility, 216
rigidity: of face, 175, 179, 192; of
posture, 138, 175
Riklin, Franz, investigations with
Jung, 168*ff*
role, submersion in, 66, 69, 162
romances, S. W.'s, 36*f*, 38*f*, 69
roof-climbing, 68*n*
Rüdin, Ernst, 130*n*, 151*n*, 182
- S
- Sabina S. (Fürstner's case), 186*f*
saint(s): hallucinations of, 67; simu-
lation of, 186
St. Pirminsberg Mental Hospital (St.
Gallen), 125, 126, 127
sanguine temperament, 109; and
moral insanity, 132
saviours, 16
scarlet fever, 112
Schnitzler, Arthur, 106
Schopenhauer, Arthur, on genius,
100; "operari sequitur esse," 133
Schroeder van der Kolk, J. L. C., 62,
79, 150
Schüle, Heinrich, 58, 110, 132*n*
Schürmayer, I. H., 173*n*
science, mystic, *see* mystic science
séances, S. W.'s, 25–30; personalities
in, 30–36
second sight, 17
Seeress of Prevorst, The (Kerner),
see Clairvoyante of Prevorst
Selbruck, Anton, 66 .
self-: confidence, exaggerated, 110,
111, 118, 126; control, lack of, in
hysteria, 99*f*; —, in malingering,
161; criticism, lack of, 99*f*, 131;
deception, 210*ff*; esteem, exagger-
ated, 124*ff*, 130; glorification, of
manic patient, 126; magnetization,
27; torture, 186
senile dementia, 90
sense(s): and cryptomnesic image,
86; functions, paralysis of, 11;
hallucinations of the, 8*f*; hyper-
aesthetic unconscious activity of,
87; impression, strength of, and
attention, 45; retention of, in hys-
terical lethargy, 71
senseless answers, *see* answers

INDEX

- sense organs: all involved in hallucinations, 22*f*; partial paralysis of, 65
- sensibility: disturbances of, 150; and genius, 99; and interpretation of intended tremors, 87; tests of, 144; unconscious, of hysterical patient, 80*f*
- sexual: excesses, 113, 213*ff*; symbols, in dreams, 99
- sexuality, 137*f*
- shamming, energy required for, 163
- shock neuroses, and violent affect, 164
- Siefert, Ernst, 109, 111
- Siemens, Fritz, 184
- silence, and auditory hallucinations, 58
- simulation: and auto-hypnosis, 203; concept of, 186; confession of, 164, 196, 201*f*; conscious, 202; diagnosis of doubtful case, 160*ff*; difficulty of diagnosis, 185, 188; doubtful cases of, 163*f*; earlier writers on, 185; effect on mental state, 180*f*; excellence of, 179, 202; half-conscious, 189*ff*; hysterical symptoms and, 163; mistaken diagnosis of, 186*f*; passage from conscious to subconscious, 173; passage into insanity, 202*f*; patient's explanation of, 176*f*, 196*f*, 201*f*; physical examination, 175; unmasking of, 185*f*
- skeletons, hallucinations of, 6*f*, 13
- sleep: disturbed, 8, 129*f*; ecstatic, 71; onset of, and hallucinations, 58*f*; partial, and suggestibility, 13*f*; prodromal stage, 150; visions at onset of, 22
- sleeping state: following double hypnosis, 154; S. W.'s, 70*f*
- sleepwalking, *see* somnambulism
- Smith, Hélène (Flournoy's case), 57*f*, 60*f*, 68, 79, 84; automatic speech, 73*n*; Hindu cycle, 68*n*; and Leopold, 73*n*, 74*n*, 86; Mar-tian language, 85; systematic anaesthesia, 65; visions, 60
- social: behaviour, in manic mood disorder, 115*ff*; inadequacy, 131
- solitary confinement, 127; behaviour in, 174, 191; in darkness, 164; effect of, 150*f*; hallucinations in, 192
- somnambulism: attacks, *see* somnambulistic attacks; case of Miss S. W., 17–18; classification of, 5; course of, 78*f*; development of impressions into hallucinations, 13; and the development of new ideas, 86*n*; dissociation of personality, 67; with hallucinations, 16; hypnotic, 70*f*; —, response to suggestions in, 144; hysterical, following hypnosis, 147; semi-somnambulism, 24*f*, 33, 47*ff*, 64; spontaneous, 5*ff*, 62*f*, 79, 150; states, *see* somnambulistic states; visual images objectified as hallucinations in, 57
- somnambulistic attacks: course of, 19*f*; minor automatisms in, 21*f*; nature of, 70–77
- somnambulistic states: induced, 71; second state, 61*f*; —, and change of character, 61–70; —, predominance of, 79; —, with and without amnesic split, 63*f*
- somnambulists: cryptomnesic reproduction of object, 84; intuitive knowledge of, 86; suggestibility of, 87
- song, and feeling-toned train of thought, 97
- sparks, vision of, 58
- spasms, tonic and clonic, of muscles, 186
- speech: area, effect of partial hypnosis of, 52; automatic, 72*f*, 75; centres, focal lesion of, 106; impulses, overflow into motor area, 51*f*; muscles, movements of, in somnambulism, 73; pressure of, 128 (*see also* talkativeness); un-

INDEX

- intelligible, in somnambulistic state, 26
- Spinoza, Baruch, hypnopompic vision of, 59*n*
- spirits: appearance of, 72*f*; black, 34; conviction of presence of, 58; language of, 33*f*; S. W. and, 20*ff*, 27*f*, 33
- spiritual power, and hallucinations, 61
- split off: from primary unconscious personality, 72*f*; of subconscious personality, 56*f*
- star-dwellers, 34*f*
- stage fright, 164
- Steffens, Paul, on hysteria and epilepsy, 4
- "Stege," *see* "Treppe"
- stimuli: cutaneous, perception of, in anaesthetic regions, 13; transmutations of, 13*f*
- stimulus words, in association test, 221
- Stockhausen, Reiner, a case of simulated insanity, 160, 183*ff*, 185*ff*; Richarz on, 180*n*
- strangeness, feeling of, 58; and cryptomnesic image, 82
- Stromboli, Mt., 82*f*
- student, seeing apparitions and light, 60
- stupidity: emotional, 185, 187; shammed, 172
- stupor: catatonia-like, 182; epileptic, 182; epileptoid, 16; hysterical, characteristics of, 148*ff*; —, in a prisoner in detention, 137–56; somnambulistic, 65
- subconscious: and auto-suggestion, 163; construction of hallucinations, 13; individualization of, 53*f*; suggestibility of, 54; *see also* unconscious
- suggestibility: and the creation of an automatism, 162; in hysterical stupor, 141; influence of darkness on, 56; of somnambulists, 87; in states of partial sleep, 13*f*; and unconscious orientation, 152
- suggestion: and analgesia, 139; and automatic writing, 54*f*; dependent on psychological possibility, 53; effect of, in semi-somnambulism, 36; in hypnosis, 76; motor phenomena induced by, 48*f*; post-hypnotic, 145, 147*f*; and thought-transference, 54; use of, in hypnotic somnambulism, 144; verbal, and partial hypnosis, 49; whispered, 51*n*, 70*f*; *see also* auto-suggestion; counter-suggestion
- suicide: attempted, 15, 174, 191, 199, 200*f*; threat of, 123, 130, 176*f*
- sulphuric acid, self-inflicted burn with, 163
- sums, simple, tests in, 144, 178, 197*f*
- superficiality, 112, 113*f*, 119
- S. W., Miss, case of, 17–88; character development, 47; character in waking state, 41–47; character of, and subconscious personalities, 77; "dual" personality, 24*f*; educational level, 18, 19, 88; family background, 17; glossolalia, 84–86; grandfather as "guide," 22, 26, 30*f*; identity of ego-consciousness in all states, 72; improvement in character, 79; and Jung, 21, 35, 37*ff*; and Jung's grandfather, 26, 56; personal and physical traits, 18; physical state in attacks, 26, 28*f*; reaction to disclosure of trance behaviour, 21, 28; reaction to hallucinatory phenomena, 23; sister's dream of black and white figures, 23*f*; somnambulistic personality, *see* Ivenes; somnambulistic states, 19–25; *re* her spirits, 23, 27; termination of the disorder, 43
- Swedenborg, Emmanuel, 36, 42; visions, 60
- sweets, addiction to, 120
- swindler: insight of, 217; pathological, psychology of, 66; —, skill at lying, 161*f*; simulated stupor, 182

INDEX

- swindling, pathological, 173
Swiss dialect, 18, 89ff
symbolism, in dreams, 56, 99
symptomatic actions, of artist, 100
symptoms: hypomanic, 134; hysterical, *see below*; in hysterical stupor, 138f, 145ff; manic mood disorder, 122f, 134; prodromal, 12, 15, 46; psychogenic, 160; psychopathic, 119; of psychopathic inferiority, 4ff; unmasking of, in simulation, 185
symptoms, hysterical: automatic nature of, 163; genesis of, 155; presence of, 211, 212f
syncope, hypnotic, 154n
"syndromes épisodiques des dégénérés," 130
synthesis, loss of, 171
- T
- table, movements of: automatic, 48–61; initial, 73; unconscious control of, 49
table-turning: and semi-somnambulistic states, 25
tachypnoea, 20
talkativeness, 113, 116, 122f, 125, 128
talking, compulsive, 105
tendovaginitis, 8, 14, 16
tests, arithmetic, in case of simulated insanity, 178
theft: charge of, 124–32, 138, 148; conviction for, 182, 191; discovery of, through feeling-toned complex of ideas relating to the crime, 220f; imprisonment for, 174ff; and lying, 163; of money, delusion *re*, 138ff, 143ff, 151
Thierfelsenburg, Elisabeth von (somnambulistic personality), 30, 37
thieves, art of shamming among, 161
thinking: disturbance of, 110; intuitive, 96f; *see also* thought-process(es)
thought-process(es): feeling-toned, 203f; in somnambulism, 57f
thought-reading: experiment in table-turning, 50f, 80; experiments with numbers, 86; from intended tremors, 54
thought transference, 25
thoughts, repressed, and the creation of subconscious personalities, 77f
threshold of consciousness, *see* consciousness, threshold of
tics, hysterical, 181
Tiling, T., 132
time consciousness, 12
toleration, threshold of, and un-abreacted affects, 155
tongue, slips of, 90
touch, and hallucinatory process, 13
train of thought: and attention, 69n; feeling-toned, disappearance from conscious mind, 97f
trance: in séances, 25ff; journeys, 33ff, 43; three-day, 17
traumatic neurosis, 173
tremor(s): of hands and head, 138; writing disturbed by, 140f
tremors, intended: role of, in table-turning, 49f; sensibility and interpretation of, 87; in thought-reading experiment, 50f, 54, 80; thought-transference from, 86
"Treppe"/"Stege," 18, 89ff
tubercle bacilli, fantasy of, 38
tumbler, *see* glass
tune, and feeling-toned train of thought, 97
twilight state: amnesia for, 147, 153f; automatisms in, 73; and daydreaming, 162; epileptic, 76; and feeble-mindedness, 172f; hallucinatory, 58; hysterical, 17, 148ff, 179, 202; psychic process in, 154f; psychological mechanisms of, 163f; somnambulistic, 162; visions in, 72

INDEX

typhoid fever, 5, 17

U

Ulrich von Gerbenstein, *see* Gerbenstein
"unconscious," term, as used by Jung, 95*n*
unconscious: feelings and concepts in, 87; intellectual activity of, 87; psychic complexes, 98*f*; receptivity of, 86; —, in heightened unconscious phenomena, 80; *see also* subconscious
unconscious performance, heightened, 80–87
unpleasant events: amnesia for, 172; repressed from consciousness, 153, 155

V

vagrancy, case of, 11; *see also* wandering
Valours, Berthe de (somnambulistic personality), 30, 37
Van Deventer, J., on "sanguine inferiority," 110*f*
vena, word, 84
verbal correspondences, in cryptomnesic reproduction, 103*f*
vision: field of, 144; restriction of mental field of, 151
visionaries, hallucinations of, 60*f*
visions: hypnagogic, 67; in hysterical delirium, 9; memory of, 24; S. W.'s, 22*f*
visual images, objectified as hallucinations, 57
visual sphere: automatism in, 58; excitation of, 58; irruption of hypnosis into, 74*f*
voice(s): altered tone of, 20, 27; hallucinatory, 125, 127, 128, 130
Voisin, Jules, 63
volcano, 83, 101*f*

W

wakefulness, systematic partial, 10
waking state: content of subconscious personality carried into, 65; hypnotic experiments in, 51*n*; and objectivation of dreams, 68; partial, and complex hallucinations, 61; tremors of hands and arms, 49*n*; and visual images, 14
wandering(s), 120*ff*, 124*ff*, 127, 131, 173*ff*, 190*ff*
weight-reducing course, 119
Wernicke, Carl: on chronic mania, 110; on delusions of grandeur, 151; on dream-role, 162; "leveling-down of ideas," 133; on moral insanity, 133*f*
Wertheimer, Max, 219*f*
Westphal, A., 172*n*, 185
Westphal, C., 15
Weygandt, Wilhelm, 220
whispering: of suggestions, 51*n*, 70*f*; unconscious, 73
Wilbrand, — (Frankfurt a. M.), 186*n*
will: influenced by abnormal affects, 217; and intellect, 132
will power, and malingering, 161
wine, 115*f*
Winslow, B. F., 10*n*
wish-fulfilment, 99; hallucinatory, 151; subconscious personality as, 70
witchcraft, 71
witch trials, glossolalia in, 84
Woltke, Sophie, *see* Guinon, Georges
word-association, Jung's studies in, 219
words: picture composition, Charcot's scheme for, 51*n*; meaningless, in partial hypnosis of speech area, 52; stimulus, in association tests, 167*n*, 221; substitutions, 18, 89–92; transposed in mediumistic communications, 25*f*

INDEX

- work-curve, 199, 200; tests of, 179ff**
world forces, S. W.'s description of, 39-42
writing, disturbance of, by tremors, 140f
writing, automatic, 54f; in complete darkness, 27f; experiment by member of the Society for Psychological Research, 52f; and suggestibility, 13
- Wundt, Wilhelm, 220**
- Z**
- Zarathustra, journey to hell of, 82f, 101ff**
"Ziege"/"Geiss," 18, 89f
Zschokke, J. H. D., 86
Zündel, Friedrich, 84n
Zurich Clinic, 220