Book Reviews

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Ira Brenner is a psychoanalyst and clinical professor of psychiatry at the University of Pennsylvania who is well known in the field of trauma. In this book, he presents an in-depth exploration of the dynamics, symptoms, and treatment of patients who have suffered severe psychic trauma.

Brenner draws from his experience with two seemingly different patient populations—survivors of sexual abuse and Holocaust survivors. In both cases, the emphasis is not only on immediate consequences, but also on long term effects in the individual. With respect to the sexual abuse survivors, he introduces the reader to a very serious and destructive issue that is relatively unknown to most clinicians—that of mother-daughter incest that starts in childhood and continues through adulthood. Regarding the Holocaust group, he addresses its impact on adult survivors, child survivors, and children of survivors. He includes the issue of intergenerational transmission of trauma, wherein the reverberations of the psychic trauma persists many years later in those who have never directly experienced the Holocaust.

This is not a book about clinical treatment with hypnosis, although it does reference hypnotic phenomena. For example, in the chapter on “Falling Asleep as a Countertransference Enactment”, Brenner raises the question of whether the patient might be creating a hypnotic state in the analyst that creates the urge to sleep. He also draws on the phenomenon of hypnosis in defining dissociation as “an altered state of consciousness due to autohypnosis, augmenting repression or splitting (p. 81).”

Brenner is an excellent writer with a gift for making complex phenomena easy to understand. He has provided a wonderful balance between the clinical and the scholarly. His analytic explanation of dissociative identity disorder is remarkably clear and comprehensible. In the chapters, he raises an issue such as mother-daughter incest, discusses the important underlying issues and themes, presents case material that illustrates and elaborates these issues, and then offers clear conclusions. He comes across as a caring analyst with great sensitivity to the vulnerability of his severely traumatized patients. Throughout the book, he also provides the reader with a glimpse into the analytic history and conflict between
analysts, such as Ferenczi’s break with Freud regarding seduction theory versus actual sexual abuse.

I found the chapters on “Intergenerational Transmission of Symptoms and Unresolved Grief” to be particularly thought-provoking. Brenner describes a continuum of survivor behavior including traumatic repetition on the one end and mastery and regeneration on the other. He also presents case material illustrating how some survivors live well until their ordeals are reactivated by illness, loss, or the entry into old age.

Brenner is knowledgeable and committed to the analytic process, and nonetheless creative and receptive to new methods. In the last section of the book, he discusses the problem of lengthy analyses and the issue that modifications in analytic technique may be warranted to help some patients. He presents case material where deviating from classical technique seemed appropriate. As he succinctly states, “psychoanalysis is not a religion, and there is no sacred text that cannot be questioned” (p. 250). In his search for a method for dealing with an immediate trauma, he decided to try Eye Movement Desensitization and Reprogramming (EMDR). Brenner begins this section with an explanation of the history and uses of EMDR. He points out that the eye movements are not essential to this treatment, but that any sensory stimulation that alternates between brain hemispheres can stimulate the phenomenon. He then provides detailed descriptions of two cases in which he used EMDR with good results.

My one major criticism was with respect to the last section of this book. While it is any author’s prerogative to choose what to include and what to omit in a book, I was troubled by his failure to make reference to the extensive literature on treatment with hypnosis. The contrast between the comprehensive, thorough, and lengthy citation of references throughout the book and the absence of any mention of hypnotherapy or psychoanalysis was striking. It seems especially important to discuss the option of including hypnosis as a viable option, in view of the modifications of hypnosis technique that have been developed in recent years to adapt their use for patients with more serious psychopathology.

Notwithstanding this omission, this is an excellent book with much to offer the reader. It is interesting from both a theoretical and practical standpoint, it offers clinical material that is rich and fascinating, and it is very thought provoking with respect to blending the traditional with the innovative. I highly recommend this book to all readers interested in learning more about treatment of trauma.

Dormandy, T. (2006). *The worst of evils: The fight against pain*. New Haven and London: Yale University Press. Reviewed by Howard Hall, Ph. D., Psy. D., Associate Professor of Pediatrics, Rainbow Babies and Children’s Hospital, University Hospitals, Case Medical Center, Cleveland, OH.

Thomas Dormandy, M.D., is a retired professor of chemical pathology from Whittington Hospital, University of London, and Brunel University, London. His medical historical writings include the prize-winning: “The White Death: A History of Tuberculosis” (1999). His latest text not only reads like a historical novel, but the title is taken from a line in Milton’s classic poem “Paradise Lost” with the description of “... pain is perfect misery, the worst of evils...”. This book describes concepts of pain over thousands of years, across different cultures and countries with discussions of gender, race, and class. Although the book is not written directly about hypnosis, it does provide a fresh historical context for the prominent early role hypnosis played during the medical development of general
anesthesia. Of course, hypnosis preceded the development of chemical anesthetics, which would later prove to be a formidable competitor to hypnosis. For example, Dormandy notes that the development of general anesthetics in the United States was greeted by scientists during that time as a triumph against hypnosis where, “this Yankee dodge sure beats Mesmerism hollow.” (p. 208). In that same chapter (22), a case history is presented for the early introduction of ether in 1846 for a man needing a tooth extraction. What was interesting about that case was that the person came in requesting a “...painless method called mesmerism” (p. 217). The story goes on that the patient repeatedly requested mesmerism, but was talked out of it and told that there was something much better (i.e. ether). Hypnosis was also discussed in a later chapter (38), with the fascinating work of Rasputin who used hypnosis to treat a boy’s pain and bleeding from hemophilia. Being a medical pathologist, Dormandy’s conceptualization of hypnosis would understandably be limited; even though he was sympathetic to hypnosis, our contemporary theories of it go farther than and contradict associating hypnosis with simply the placebo effect.

Although hypnosis is not the focus of this text, the book’s strength lies in its scholarly treatment of concepts of pain and pain management from ancient times, to herbal and other remedies, old and new drugs, cannabis, opium, cocaine, to the bark of the willow and aspirin. Pain and the changing role of religion are discussed (e.g. biblical injunctions of pain with childbirth, self inflicted pain, the embrace of pain (Dolorism) to notions of pain and creative works. It would also not be fair to say this is a text just about pain. On the contrary, the history of medicine, psychiatry, and the development of medical technologies are intricately connected with pain. The reader is taken through advances against hospital based infections, diagnosis of appendicitis and the evolution of surgical treatments, the epidemic of tuberculosis, medicine’s conflicts with natural healing, developing concepts of conversion and hysteria, to the fascinating story of miraculous healing at Lourdes.

Successes and failures of new pain technologies of pneumatic inhalant pumps for gases of ether, nitrous oxide, and chloroform, addiction, drug induced death, the invention of syringes, and post traumatic stress responses for both patients and surgeons during this time with the “terror of the knife” are all covered in this book. The text also incorporates lively biographies to bring to life important scientific and historical findings that would rival any contemporary novel with descriptions of mental instability, imprisonment, and suicide, with competition for the first development of general anesthesia by its early pioneers. As Dormandy notes, “rarely has one of the great advances in medicine been accomplished by an unholy crew. Even more rarely has greed and paranoia played so dominant a part” (p. 208). Mood setting drugs, amphetamines, “twilight sleep” for childbirth, aspirin (becoming a part of everyday life like breakfast cereals to many) are other topics covered. The final chapters cover pain mechanisms, specialized pain clinics, hospices, and palliative medicine.

Although the sheer size of this 502 page text may appear daunting, the enjoyment of reading, learning, and following these wonderful narrations across time, people, and places made this book hard to put down. Despite its size, I found myself reading all the fascinating footnotes, that had they been put in the body of the book, would have even more increased the size of the text. I would recommend this book not only to the medical professional, and persons in the hypnosis field, but to anyone interested in a holistic, very readable overview of the history of pain with its many manifestations. Finally, I would end with Dormandy’s conclusion which would reverberate for readers of this Journal, “But it is impossible to conclude a book on the fight against pain without affirming that no ‘victory over pain’ can be celebrated until the treatment of mental hurt has advance at least as far as
has the treatment of physical suffering.” (p. 502). It is there that hypnosis could be expected to have a role.


As a historian, Alfred Gabay traces the complex web of hypnosis following the interactions between Mesmer, Swedenborg, and others from animal magnetism, to the alternate-reality paradigm, to the alternate-consciousness, and finally to the many sects of 19th Century American hypnosis.

As Helen Keller (1880-1968) speaking lyrically of Swedenborg wrote, “He was as familiar with forge and quarry, workshop and shipyard, as he was with the stars and the songs of the birds in the morning” (Keller, 2000, 28). It seems to me that Gabay was as familiar with all the theories of hypnosis as Swedenborg was to the stars and songs of the birds in the morning.

The *Covert Enlightenment* can be challenging to read, but Gabay should be commended, as he does an excellent job mesmerizing the reader into following him as he traces the colorful lives of Franz Anton Mesmer and Emanuel Swedenborg into the new world of hypnosis. (Hypnosis being “animal magnetism”, i.e., the action of one person’s persona upon another or one person’s body upon another.) Puysegur had earlier concluded that “animal magnetism” lies not in the action of one body upon another, but in the action of the thought upon the vital principal of the body (Fuller, 1982, 11). Gabay importantly points out how Puysegur was responsible for skillfully moving mesmerism/hypnosis from “physical action” to “psychological thought.”

Gabay then leaves the urbane world of Mesmer to cover the French Provinces, where a third force that intercedes between Mesmer, Spiritualism, and the Swedenborg System will eventually lead into alternative ramifications in Europe and thence into the New World. The book carefully traces the underground current of mesmerism which eventually breaks loose about 1789, swollen by Swedenborgianism, Martinism, Rosicrucianism, Physiognomy, and many other currents of spiritualism, but it was the mesmerist stream that was one of the most powerful in the transition from the Enlightenment to Romanticism (Darnton, 1970, 127).

By the end of the 18th century, the covert world of the Enlightenment had largely dissipated and there was a third wave heavily weighted with medical practitioners. “It is in America that this new narrative now shifts, where the final transformation of the ontological and alternative conscious-conscious paradigms can be traced together with its cultural product” (Gabay, 2005, 102).

In conclusion, while complex to follow, this book is definitely worth exploring in order to get a better understanding of the past and present currents, theories, and evaluations of hypnosis. It will definitely give the reader a detailed understanding of the forces that contribute to the hypnosis of today. Both seasoned hypnotherapists as well as beginners should find it illuminating reading.
References


*Emotional Resonance* is a biography of Helen (born Helyanthe) Huth Watkins, the co-creator of Ego State Therapy (Watkins & Watkins, 1997) and a psychotherapist of extraordinary ability. It is written by the co-therapist, co-theoretician, and teaching and writing partner who was also her husband of 30 years. This book introduces the reader to many aspects of the multifaceted life, personality, work, and personal history of Helen Huth Watkins.

In the Foreword, Peter Bloom, M.D., states that “As the years pass, Helen will be remembered as one of the most influential women therapists our generation has known.” The author tells us in the Preface that the book was written at the request of many who wanted to know more about what she was like “as a human person...outside the professional setting” and that it is “...a story about her personhood, her essence, not her therapeutic techniques which are described elsewhere...what it is like to be a psychotherapist and to be married to one.”

Helen is revealed to the reader is a series of short, unnumbered chapters. The author’s goal immediately begins to materialize in the first chapter, “The Cookie Lady”. This initial presentation of vivid recollections takes us into Helen’s kitchen. We get to experience the love, labor, and perfectionism she brought to the production of the Bavarian holiday cookies that were part of her own childhood. We see a woman who is rich in culinary ability, focus, and drive, revealed to be equally wealthy in her ability to pour out herself in acts of giving — to her friends, her co-workers, and her students. We also see a woman who, although deeply involved in both a passionate and complexly rewarding marriage and a demanding career, is very much in charge of her inherent need to give herself to the world in ways that have specific meaning for her and are solely under her own direction. We are introduced to Helen’s unique sensitivity to the vulnerable in her social environment and her creative, healing ways of responding to people she encountered in everyday life. As our exposure to her therapeutic work commences, we see that this is not a white-washing therapist, but one who has an uncanny ability to understand what the patient needs. We are introduced to her exceptional capacity to know within herself what her patients were feeling. The author describes this as her emotional resonance and uses a musical metaphor that describes resonance in terms of the sympathetic vibration of strings.

Helen’s life-changing work with extremely challenging patients causes the author to ask, “How does one explain miracles? And how does one understand a miracle worker?” The author elaborates on his theory of resonance (Watkins, 1978) as he seeks to unravel what appears to be miraculous. As a scientist, he is committed to rational, cognitive
explanations within psychodynamic paradigms.

We learn of Helen’s early childhood in post World War I Germany. Her father died before she was born. Yet, raised within the warm security of her mother’s family, she had a strong father figure in her maternal grandfather, the police chief of Augsburg. The unconditional love he freely bestowed upon her was the bedrock of her own independence, her failure to fear authority figures, and her firm courage in her own convictions. Helen and her mother traveled to the United States to visit her mother’s sister and remained because of the rise of Nazism in Germany. The 10-year old Hely (Helen) spoke only German, but learned to speak accentless English.

We are taken to Helen’s fairy tale first marriage and the tragic military death of her new husband, her education, and her second marriage and its failure. With the advent of Helen Watkins to the Counseling Center at the University of Montana, we are brought into the evolution of the romance between Helen and the author and the myriad of everyday miracles in their courtship and marriage. The author shares their passions and intimacy, and he also courageously exposes his own shortcomings and their origins in order to show us how Helen’s incredible love transformed him. Reading *Emotional Resonance* brings us to the life of an amazing human being. The author’s remarkable revivification of his recollections and reflections are masterfully recounted, quite often and most effectively in the speech of the time and culture in which they both lived and frequently illustrated with their own written poems and reflections.

*Emotional Resonance* is a great love story in many ways and about many kinds of love (storge, philios, eros, and agape). It is the story of Helen’s loving German family; of the unconditional love of her strong and fair grandfather; of a young woman’s first love and marriage; of her love for her children; of her love for learning and creativity; of her profound love for her work; of her love for her friends and colleagues; and of her romance with and deep love for her husband, Jack. However, it is a far greater love story than it may seem to be at first reading. It is a story of Helen’s love for life, the world, and all therein.

This fine book has only two shortcomings from my perspective. One is that I would love to have read more. That shortcoming is clearly based on my own selfish wishes because from a literary point of view, this memoir is just the right length. The other shortcoming is the author’s restriction of his explanation of Helen’s gifts to a single set of paradigms: the psychodynamic. No doubt her ability to form therapeutic alliances with ego states (Watkins & Watkins, 1997) as well as her resonance in and utilization of the transference/counter-transference field with ego states (Frederick, 2005) contributed to her therapeutic successes.

However, as we attempt to understand the miracle that was Helen Huth Watkins, there are other paradigms within our culture that offer additional frameworks for her ability to enter the hearts and souls of other humans and effect dramatic and lasting change. One is the paradigm of the highly spiritually developed individual. One does not have to be listed in Fox’s *Book of Martyrs* or the *Lives of the Saints* to be a saint. The life of Helen Huth Watkins described in this book embodies the highest measure of Teilhard de Chardin’s (1973/1966) definition of worship, and her loving mindfulness and experience of unfathomable connection with all that is as described in this book seem to be identical with the phenomenology of many mystics. Greeley’s (1974) sociological research found that mystical experiences (mild to intense, and rare to frequent) are not uncommon. His definition of the experience is “... something like Maslow’s peak-experience, that is, a feeling of intense unity with the universe and of one’s peace within that unity” (p.12). These experiences are frequently
cognitive and are often characterized by the acquisition of new knowledge. According to Greeley, their common theme is an ineffable knowledge that love is the center of the universe.

Another somewhat related paradigm includes shamans, healers, and medicine women. It is given that healers will “...ritually enact their local system of myths and symbols and interpret the patient’s condition within that system” (Tedlock, 2005, p. 15). The “shamanic state of consciousness” (Horner, 1980) is one that combines a number of mental states such as trance, cognitive skills, and the “...special mental-emotional state of receptivity to all possible information and ideas” (Tedlock, 2005, p. 80). This is a state characterized by high conscious-unconscious complementarities. It is often accompanied by energetic healings. Mindell (2000) reminds us that “for millennia, shamans have tied the sciences of physics and psychology together by working in the real world and the dream world at the same time. Today’s scientific thinking splits these worlds apart” (p. 24).

This book is well-constructed, well-written, and very alive. The author opens his heart to the reader without sacrificing his art. It is hard to put it down, and harder still to leave Helen Huth Watkins when the book is ended. It seems, indeed, the author has succeeded in our never being able to completely leave her. Perhaps Emotional Resonance leaves us with more to think about than we would have anticipated. It is a book about two extremely complex individuals, a celebration of Helen’s life and work, a series of love stories, and a love song or poem by the author. Would the Helen Huth Watkins of Emotional Resonance like to be known as “one of the most influential women therapists our generation has known”? Or a mystic? Or a shaman? Perhaps she would have been pleased simply to have been a loving wife and mother, a good friend and colleague to many, an empress of humor, and (known or not known as) a loving, compassionate, and effective therapist whose work, teaching, and presence will have a significant effect on many generations to come.

References


The two editors of this anthology are well-regarded hypnosis researchers. In this volume of more than 500 pages, they have assembled 42 articles previously published since the early 1930s and reflecting the growing science-based understanding of hypnosis as a psychological phenomenon as it has evolved over the past three quarters of a century. They also included a number of reports on therapeutic and forensic matters. The book itself is part of a continuing series of publications in *The International Library of Psychology* published by Ashgate Publishing Ltd.

The reports in this volume have been grouped under eight categories, each of which contains a number of individual papers designed to be exemplars for that broad topic. Since there have been hundreds, if not thousands, of publications in hypnosis since the 1930s, it must have been a daunting task to determine which to include. But the editors have made a fine selection, and this volume is a welcome addition to the literature. In choosing only 42 articles for reprinting, there obviously had to be omissions of many significant ones; thus, while one could take issue with those selected — and omitted — the papers in this volume represent a splendid cross-section of the literature, albeit modest in number.

The first part of the book contains two classic articles by Clark L. Hull and Robert White dealing with the birth of modern hypnosis, while the second part has five papers on the theory behind the altered state debate. The latter include seminal contributions by Martin Orne, Theodore Barber, Ernest Hilgard, and Erik Woody and Kenneth Bowers. Part III has three articles on divergence and convergence in the development of hypnosis theory including classics by Hilgard on dissociation, Nicholas Spanos on the cognitive-social psychological perspective, and Irving Kirsch on the determinant role of response expectancies.

Part IV has six papers on the study of individual differences in hypnotic suggestion by authors in the forefront of such research. The fifth section has four articles on the investigation of hypnotic phenomena including pain and dissociation, contextual demands, and post-hypnotic suggestion. Again, the various contributors here are among the leaders of scientific study in these areas. Part VI then has four papers by noted authorities in neuropsychological and neurophysiological theories.

These sections are followed by two parts on more applied and legal issues. Part VII is comprised of several articles on hypnosis in childbirth, psychotherapy, pain management, and irritable bowel syndrome. Needless to say, there are many more reports of clinical applications that could have been cited, but all of these are among the best. Finally, there is an eighth part containing four entries covering professional and clinical issues. Here, too, there are numerous others that could have been included were it not for page constraints.

This comprehensive volume would be of inestimable value as a basic survey text in a graduate-level course in hypnosis, and the teacher of such a course could do no better than assign all 42 articles for class reading and discussion. Hypnosis professionals in research and practice would also derive benefit from re-reading these landmark contributions, and those colleagues preparing to take the examination offered by the American Board of Psychological Hypnosis would be aided by the coverage of the literature available in these pages. (By the way, whatever happened to that specialty board? It seems years that there has been any news of its activities. Is it still in existence?).
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One more positive feature of the book is the extensive name index listing the hundreds of references that accompanied this anthology. Finally, at the risk of sounding obsessive, it should be noted that each of the selections has been reprinted directly from a photo-copy of the original article, which is somewhat distracting because the font types and sizes vary, as do the number of columns on each page. But such factors are minor and do not detract from the great value of this book as an exemplary source of the great hypnosis literature of the past 75 years.