Lecture: Conception

Hubbard recalls a research case history and discusses how he taught Dianetics to a hypnotist, and how he corrected Dianetics errors made by the hypnotist.

Once upon a time I turned a patient over to a hypnotist. I showed the hypnotist how to work Dianetics. It was a long time ago and the patient had a very large amount of material and had to be worked in amnesia trance, which is very slow work, and I was quite tired of working it. So I asked this hypnotist if he would go ahead with the case, seeing this person was a very good friend of his. I told him some of the rudiments of Dianetics and he was perfectly satisfied to take on the case and go ahead. He had no inkling that he was using anything more than maybe a little twist on hypnotherapy.

It was incredible to me how easily Dianetics could be masked when I was researching it. I have run it as psychoanalysis right in front of an analyst. I had the patient clear back in the basic area running through an engram, with the analyst sitting there and saying, “That’s quite remarkable, that’s quite remarkable. Very, very good recall, but what is he yawning about?” I said, “Probably because it’s late in the afternoon.” (Meanwhile we were getting erasures and so forth.)

This often comes up when you demonstrate Dianetics to a psychoanalyst. He will say, “It is no different than psychoanalysis,” because he doesn’t recognize the mechanism of return. He thinks the patient is in present time associating. He thinks these phrases are just random phrases that are coming up. He doesn’t have a grip on the situation. He thinks he is watching free association, and he is very quick to pronounce it as such.

But I was trying to transmit to this hypnotist exactly how we went about solving this person’s case. His case was about half solved already, he was up to a fair release, but he had to be carried a long way further to clear. It just needed volume.

The hypnotist was very interested. He knew, of course, the hypnotic technique of regression, so he put the patient into amnesia trance.

Twenty-six days went by before I saw the patient again, and when I next saw him he had a headache and he didn’t feel well at all. So I said, “Well, let’s find out what happened.” I put him in a light trance, not amnesia, and started to run him back trying to find moments when the hypnotist had been working on him, and discovered that this man had been putting in positive suggestions. He had found the patient with a headache and he figured that the thing to do to nullify the somatic was to turn it off as a headache. So he would promptly bring the patient up to present time and give him a positive suggestion that he could not now feel the headache. 1

He had given him pain shut-off after pain shut-off after pain shut-off. He had been tapping everything. In the twenty-six days there had been about 15 sessions. He would do such things as the patient would state that he had a somatic in his right leg, so he would transfer it over to the left leg, then transfer it to the left arm, then transfer it to the right arm and so on. His theory was that by this time it was so far removed that it would go away, and the person’s head would not ache any longer. Of course he still had a headache, but that didn’t matter—the hypnotist was having a good time.

This poor patient was a wreck. His memory was occluded, he didn’t know what had happened to him, yesterday was invalid, and he didn’t have any somatics; so I had to take this patient back. He had been given engram after engram.

The odd aspect of his case was that the hypnotist would get an engram and say, “Come up to present time,” right out of the engram, so that engram would come out of place, then the next engram would come out of place, and the whole case was shaken into disorder by it. Additionally, the case had computations in it which assisted the malarrangement of files.

For approximately 30 hours I did nothing with this patient but run random phrases. They were in no particular moment, they were simply all over the track. There was a phrase here, there and someplace else. This one might have a little somatic on it and that one might have a little somatic on it, and this one was in place and that one wasn’t in place, and so on. You could go up and down and around and around on this case in an effort to rehabilitate it, picking up random phrases on the track. There was also a lot of boil-off—the unconsciousness on it was pretty deep.

The case presented a very odd aspect for Dianetics. I recognized that sooner or later I would discover this in a bank. If it could happen to this patient then it could happen that we would run across this proposition in Dianetic therapy.

The case used in this demonstration is about the fifth patient I have run into that boils and gets off random phrases. It is probably going to go on for quite a while. I would hate to say how many hours. Maybe it will go along 30, 40, 50, 60 hours before all of a sudden all the material that has been knocked loose in the case by restimulation (the restimulation in this case is done by life) is available. One simply has to potshoot it.

The above case started strongly on repeater, then faded out and came back in very strongly on it once more; and sometimes there was a little smile on it, but the voice tone was varying, going down and coming up again, which occurs on knocking out a phrase. That phrase may or may not be associated with an engram. Somebody has really worked this case over on the line.

There is definitely an approximation of hypnotherapy. There must have been down below this level someplace the “you’ve got to believe me” computation, or “you’ve got to mind me.” If I were going to continue to work this case I would just keep on shooting the bank full of holes, not worrying about restimulation. Notice that I didn’t bother much to tell him to return, because the bank is full of such commands. Whatever he was told could possibly be a good approximation of a lot of hypnotic material.

— L. Ron Hubbard
Lecture 28 June 1950: Conception
1 Hubbard is correcting a hypnotist's Dianetic errors on a patient by placing the patient in a light trance. Hubbard and Scientology vigorously deny that Dianetics has any relation to hypnosis, an obvious fabrication.