

My treatment therefore deviates from the common suggestive therapy through the fact that I try to educate the patients and to make it clear to them, that they are not poorly but they are badly educated or brought up and have weak willpower. If now in all kinds of magazines the suggestive method is described that has been used for a longer period of time and is recommended as new and successful, this cannot lead me to see anything different in it, than the usual and common suggestive method. If I take this suggestive method as a means of help, this does not happen, by using these methods as healing methods against a disease in the patient, but by me saying to them that there are only methods that prove that they are not ill, otherwise this method wouldn't help at all. Hence I do not want to remove the individual symptoms, by encouraging the patient in their wish to appear poorly, and that I myself seemed to believe in this and therefore give them the means to over and over again if it seems useful to them go to the doctor because of a similar symptom, who then respectively will treat them again and heal them, but I will try to influence the thoughts of the patients in such a way, that they don't again avail themselves of the means of being or appearing to be poorly. To me therefore also seems that after the present success alone one should not measure the successes of the suggestive therapy. The method which Nonne used to treat his patients at the psychiatric congress in Munich, seems completely wrong to me: because by means of a simple suggestion by Nonne to the patients over and over triggered their 'illness' which is their hysterical production, as it was at the first admission to hospital, in a way he almost trained the patients in a certain way and showed them in a very obvious way every time, that in an emergency they always had available this wonderfully relief which was to them a disease (I remember very well, that Nonne used these suggestively triggered attacks, in order to prove that they could not possibly be based on organic reasons.

After everything that I have said so far, one could reach the conclusion, that these hysterical reactions which are presented to be conscious therefore happened with rational thoughts and therefore were not at all to be separated from simulation. It is of course correct, that between simulation and hysterical reaction, which is of course a long known fact, there is not a sharp or clear line of differentiation. But one difference has to be made as far as people under military duties are concerned. The personalities who react with hysteria who are of a military age are almost without exception as I have remarked previously, individual people who have psychopathic tendencies. People who despite a certain amount of regarding themselves too highly and despite the tendency to be regarded well by others, feel they can't cope with life and now as has already been emphasised look for protection within the illness/disease. The feeling not to be able to cope with the demands is subjectively an honest one. The means, that are applied, in order to obtain the desired success, have been or are consciously exaggerated. They appear to the patients however to be permitted, despite the fact that they seemed to be conscious of the fact that the method might be inferior. If we reproach them about their actions in a shy or mild manner, they feel they are in the right, because they believe that the whole personality has been misunderstood and that nobody can truly see through them and see them for what they are. This is a similar reaction as I have for example once seen it in a hysterical female patient, who's relatives accused her rightly of lying. This patient was highly indignant about the accusation and declared that her relatives were heartless and how they could believe of her that she was lying. She then went on to say that her relatives could have



not at all noticed that she was lying and if they still accuse me of lies then they do this because they don't love me and they want to continuously tell me off. If patients such as this lady hence react to the high demands in the war in a hysterical manner, they follow a manner of reaction, that they have used previously, in order to reach a goal or an aim that they could not reach in any other way. Their reaction hence goes hand in hand with their personality. Even if with this reaction consciously dishonest measures are being used. It is therefore a different state of mind, then what is the case with the real and true simulation, where totally normal patients who feel they are up to the demands for a specific reason after conscious consideration and a lot of pre planning at a certain period of time start to give the illusion of an illness, maybe after they have obtained exact information about the illness concerned. With this hysterical reaction the original tendency that is not suppressed but grows and grows comes to erupt in affect, where as with the real honest simulation after consideration the action is taken after a certain period of time. The real simulation is extraordinarily seldom and rare and I agree with the opinion of my army doctor, who said in times of peace already, that he did not want to hear the word simulation in his call at all. I have during the whole duration of the war only seen one case, where one could speak of a real simulation.

If one tells the patient honestly that their productions are a bad habit but no disease one gets further than getting them through so called suggestive measures or hypnosis for them to believe that they are in the right even if amongst other people despite their inner feelings of guilt they will pretend to be poorly and ill.

End of translation and tape.