

## Book Reviews

Melvin Gravitz

**Carrer, L. (2004). *Jose Custodio de Faria: Hypnotist, priest, and revolutionary*. Victoria, BC, Canada: Trafford. Reviewed by Ian E. Wickramasekera II, Psy.D.**

This excellent book represents an important contribution to the literature on the history of hypnosis. Laurent Carrer, Ph.D., presents in this single source a series of works which properly establish the claim that Jose Custodio de Faria (1746-1819; frequently referred to as the Abbe Faria in the literature) was the first explorer of hypnosis to really understand the psychological and psychophysiological nature of hypnotic phenomena. The book contains an English translation of de Faria's only known surviving treatise which was entitled: "On the Cause of Lucid Sleep" and published in the year of his death in 1819. Dr. Carrer also presents in this book some really fascinating biographical essays on de Faria, including Daniel Gelasio Dalgado's rare "Memoir on the Life of Abbe Faria".

Many historians of hypnosis have previously written that that de Faria was the first explorer of hypnosis to part with Mesmer's explanation of hypnotic phenomena as resulting from animal magnetism, electromagnetic, or occult-related factors. However, most people and some popular histories of hypnosis incorrectly describe James Braid as the originator of our current tradition of hypnosis simply because of Braid's preference for the term hypnosis, rather than mesmerism. Indeed, while Braid has been often called the originator of the term hypnosis that is in error because it was the French in the early 1800s who first used that terminology (see Gravitz's discussion in the *American Journal of Clinical Hypnosis*, 27, 107-110).

One reading of Carrer's translation of de Faria's: "On the Cause of Lucid Sleep" will quickly dispose of this error, as one can readily see how accurate de Faria's observations were about hypnosis in light of our modern scientific evidence. In de Faria's writings, we can find evidence for his belief that: (A) hypnotic phenomena were not caused by a magnetic fluid or an occult phenomena; (B) hypnotic phenomena are primarily caused by the special psychological and psychophysiological characteristics of the person being hypnotized; (C) that the phenomenological experience of hypnosis is similar to that of falling asleep in that both experiences require a gradual withdrawal of the senses from the peripheral environment; and (D) that hypnotic behavior is similar to sleep, although not identical to it. Thus, de Faria refers to hypnotic phenomena as "lucid sleep" to capture the paradoxical quality of lucidity and soporific-like effects of hypnosis that we frequently observe even today almost 200 years after his death.

De Faria's writings predated Braid's works by over 30 years and yet most people are probably more aware of Braid's contributions to hypnosis than his. Even more people are probably aware of the fictional Abbe Faria's life (as described in the noted novel, "The Count of Monte Cristo"), rather than the real life explorer of hypnotic phenomena who established the basis of the traditions that we all research and practice today in his writings. The relative ignorance that most of us have towards his importance to our scientific and clinical work today may likely be due to the previous unavailability of accurate translations of de Faria's works in English; but now Carrer has made available this splendid translation, thus filling that lack. Accordingly, this book represents an important contribution to the literature of hypnosis which properly establishes de Faria as the true originator of the scientific and clinical tradition of hypnosis that we practice today. Carrer's scholarship on this project is extremely evident in the painstaking way he provides copious notes on both de Faria and Dalgado's writings. Many of these notes contain helpful definitions of 18th and 19th century philosophical, medical, and spiritual terms that most of us would find difficult. Dalgado's biography of de Faria addresses many interesting issues such as de Faria's childhood in Goa where he was born into a Brahmin household that had adopted Christianity many years ago. The biography also covers de Faria's involvement in the French Revolution and how he likely came to learn about hypnotic phenomena through the work of the Marquis de Puységur.

I highly recommend this work to anyone who is interested in the history of hypnosis and who would like to discover de Faria's surprisingly accurate intuitions about the nature of hypnotic phenomena. He was constantly ridiculed by his peers for not believing in a magnetic fluid or occult-related mesmerism theories. And yet, in this one volume, de Faria wrote ideas which Dalgado clearly documents had an influence on Braid and Bernheim's theories. You can find an example or passage regarding nearly all of the current things that we do and debate in the current clinical and scientific traditions of hypnosis. I highly enjoy reading and re-reading this book from time to time to appreciate the unique insights that de Faria uncovered into the nature of hypnosis. In some ways, I think that it is a shame that we did not stick with de Faria's paradoxical term of lucid sleep since the word hypnosis suggests a complete equivalence of sleep and hypnotic phenomena.

**Crosley, Reginald (2004). *Alternative medicine and miracles: A grand unified theory*. Lanham, MD: University Press. Reviewed by Daniel L. Handel, M.D. National Institutes of Health. Bethesda, Maryland.**

In *Alternative Medicine and Miracles: A Grand Unified Theory*, Reginald Crosley proposes a unifying theory as a foundation of and explanatory model for complementary and alternative medicine, based on the modern physics of quantum mechanics, relativity theories, string theory, and chaos theory. The author, a practicing Haitian-American physician, poet, and philosopher, also discusses healing and medical miracles in light of the same theories. This text follows his research in the synthesis of African-Haitian spirituality, western religions, mysticism, and science that resulted in the book, "The Vodou Quantum Leap" (Llewellyn Publications, 2000). While hypnosis is mentioned only peripherally in this new text, Crosley's explanation of the Grand Unified Theory would seek to explain the effects of the hypnotic state through alterations in the psi-myria force, a unifying force that penetrates through both time and space.

The book divides into 10 chapters and begins with an historical examination of holistic medicine from pre-history to modern times. Discussions on ritualistic healing and the

placebo effect draw interesting parallels and stimulate thinking about exactly what properties of humans can stimulate healing. He ends the chapter with a brief discussion of quantum mechanics' dramatic influence on modern man and specifically on medicine. The duality of matter and the invisible forces that constitute matter, Crosley postulates, may be the same forces that explain miracles, the power of prayer, and alternative medical pathways to healing.

The next three chapters develop a theory of miracles within the author's framework of belief, discuss creation as the first miracle, and proceed to examine biblical miracles within this framework of the dualistic nature of matter and the powerful myria-force alterations that underlie such miracles (or singularities). Crosley draws upon descriptions of myria-force, psi-force, and modern physics-based worm holes, along with the Afro-Haitian healing traditions of his own youth to explain miracles of the Old Testament.

The following chapter considers the eerie phenomena of near death experiences and out of body experiences. He postulates that these strange phenomena result from the separation of the body from the souls; this follows the same 'blueprint' as the space-time energy vortex that was initially responsible for creation. In other words, he states that the separation of body and soul results from the 'transformations taking place in the different energy fields of our ordinary dimensions as well as in the exotic curled-up dimensions' of string theory. Simply put, the rip in our fabric separates the components of our nature.

The second half of the book discusses healers - the making of miracle-workers, non-clerical miracle-workers, miraculous shamanic healing, and miraculous medical healing in the scientific world. These chapters consider rituals of healing, training of the various traditions of healing, unusual encounters and oddities that the author believes result from the superposition of composite states with entities of other dimensions that can lead to the production of miracle-makers. These chapters are dense with intertwined biblical references, scientific and personal references, and descriptions of 'the other world' from which one can draw powerful healing powers (to cause singularities). The combined use of personal, historical, and scientific sources is both powerful and at times confusing. In his discussion of shamanic healing, he states that the powerful effects and physical singularities resulting from hypnosis and other trance states cannot be explained by suggestion alone, and he suggests that some sort of force field may be responsible; unfortunately, the discussion is left with that surmise. Crosley's 'vibrational mode' in producing miraculous cures is ultimately posited as the force that underlies all miraculous healing by causing beneficial changes in the myria-force so as to bring forth physical singularities (unusual or miraculous physical changes in the patient).

The final chapters discuss miracles in modern science, with a rich discussion of homeopathic medicine, as explained through energy medicine and quantum mechanics. Crosley states that "homeopathy can be placed in the same category as hypnosis and acupuncture as well as Reiki, Qi Gong and their variants. They all use a sub-branch of the alternate pathway of healing, and all work on the psi-bio-energy fields of the person to a different extent, by modulating the intensity, the amplitude and the frequency of their radiance. In hypnosis, the ordinary consciousness retreats at a lower level as the bio-field of the subtle-body takes dominance in the interpersonal relationship. The hyper-magnetism of the subtle-body can produce changes, beneficial or deleterious in the solid body or in the mind." (p. 183). In essence he describes each modality as working on the psi-bio-energy fields in similar but unique ways. He ends in saying that this journey through the realm of the miraculous serves to show that these 'singularities' are of our own world and are not examples of other-worldly phenomena. Miraculous healing, Crosley postulates, results from purposeful

interaction through intent and ritual with universal forces.

His final chapter discusses the making of miracle-workers. In it he states that physicians wishing to become such miracle-workers must first realize their own limitations. Each is endowed with one's own restricted range of biofield frequencies. By entering into contact with a psychic-healer endowed with more powerful frequency, one can change one's own frequency, thus becoming more powerful. Crosley ends appropriately in stating "(w)e have tackled an impossible task: a theory of miracles. Mine is only one of the first attempts to unravel the intricacies of a complex natural phenomenon, one in which the principle of correspondence or complementarity allows the interplay of exotic worlds or dimensions in order to bring about the wonder of miraculous happenings" (p. 229). This is a challenging book. It challenges the paradigms of most readers and challenges even our vocabularies. Its chapters are filled with manifold transitions resulting from rents in the fabric of space/time as predicted by string theory, dark matter and WIMPS, EPR paradoxes, Hounsi Kanzo initiation into Vodou shamanism, and the myria-force (the master force of quantum physics to which are added the curled-up dimensions of string theory, add other exotic dimensions). There is a bibliography for the persistently curious. To say the least, this text raises more questions than it settles, and in doing so it is serving a purpose.

Crosley's Grand Unifying Theory is simultaneously intriguing and perplexing - perhaps fitting sentiments for such a far-reaching book. Readers should be prepared for a challenging reading, and sometimes should be prepared to understand critically what the author in fact purports to know and what the author proposes as unproven theory. This text will find a happy home on the shelf of any reader interested in exploring a unifying synthesis of alternative and complementary medical practices.

**Levin, C., Furlong, A., & O'Neil, M. K. (Eds.). (2003). *Confidentiality, ethical perspectives, and clinical dilemmas*. Mahwah NJ: Analytic Press. Reviewed by Martha Barham, R.N., Ph.D., Honolulu, HI.**

The editors of this anthology are all psychologists working in the province of Quebec in Canada. They are active in training and in the ethical and confidential issues in practice.

The subject of confidentiality is a topic that is always current and relevant. In the United States, the Health Insurance Portability and Accountability Act of 1996 (HIPAA) brought to the awareness of the therapeutic community, as well as the general public, a number of such issues, thereby broadening perspectives. This book explores the confidential relationship primarily between psychoanalyst and patient; however, many issues presented are applicable to any therapeutic setting.

This volume is divided into several sections composed of presentations by various contributors on special subjects. For example, section one is dedicated to the consideration of confidentiality. The perspectives addressed are threats to confidentiality not only from within the profession, but also within the patient-therapist relationship. This section presents a broad view of provoking thoughts certain of which are not usually considered.

Section two addresses dilemmas in treatment research and training. Here, five writers present their views and share experiences. Examples include the dilemmas faced when attempting to ensure therapeutic commitment to patients. The focus of section three is on clinical practice itself. This section not only includes case reports but also contains a valuable historical review of the practice of confidentiality. The difficulty of assuring confidentiality in data collection and breaches of confidentiality in practice are considered

as well. Professional ethics are addressed in the fourth section in depth. One especially pertinent contribution relates to privacy and appropriate records when sexual assault is a mitigating factor.

The epilogue delves into the dilemmas presented in court appearances or when serving as an expert witness. The contributions throughout the book vary somewhat in styles of presentation, depth of material, and applicable information for the therapist in general, but also for the hypnosis professional.

Basically, this book covers a broad view of the subject of confidentiality. Although the book does not directly address hypnosis, the strength of the book lies in the presentation of the broad perspective and the associated ethical perspectives that are often overlooked but are nevertheless relevant. In addition, the reader is reminded of the clinical confidentiality dilemmas that often accompany psychotherapy irrespective of the theoretical framework utilized by the therapist. The limitation of the book appears to be the audience to which it is directed; while Canadian law and psychoanalytic practice within that jurisdiction are stressed, psychotherapists elsewhere would no doubt benefit significantly from reading the book and its perspectives on confidentiality.

**Short, D., Erickson, B.A. & Erickson-Klein, R. (2006). *Hope and resiliency: Understanding the psychotherapeutic strategies of Milton H. Erickson, MD*. Norwalk, CT: Crown House. Reviewed by Carol Ginandes, Ph.D., Harvard Medical School, Boston, MA.**

*Hope and Resiliency* comes from a collaborative effort among three Erickson experts: Dan Short, Ph.D. a psychologist and former Associate Director for the Milton H. Erickson Foundation, and two of Erickson's daughters; Betty Alice Erickson, MS, LPC, a professional counselor and international Ericksonian educator, and Roxanna Erickson Klein, RN, Ph.D., a practicing nurse and member of the Board of Directors of the Milton H. Erickson Foundation. The book draws on the authors' personal experiences as well as on immersion in hundreds of hours of audio recordings by Erickson. It includes several previously unpublished case vignettes.

This book adds to the cornucopia of publications explicating Erickson's work, but it brings accessible, broad, encompassing strokes to his treatment philosophy and methods. The authors' draw on their well articulated conviction that, "Without having sufficient hope or resiliency, vast amounts of external resources can be poured into what is essentially a vacuum of despair and surrender" (p. xi). The scope of the book is expansive in that the authors have included formal explications of Erickson's fundamental therapeutic values and strategic approaches, copious and often original case examples as well as an almost homespun narrative biographical account of his life. In addition, the book includes a didactic structure with chapter summaries, caveats on limitations and contraindications for specific techniques and a series of "Self-Development Exercises" in the appendix. This suggests that the book is conceived of as a stimulating tutorial for the reader who is presumed to be a clinician, but not necessarily an Ericksonian practitioner. But the authors warn that Erickson's techniques are presented not to be uncritically imitated when they write that: "An understanding of clinical strategies fosters less dependency on predetermined procedures and greater use of clinical judgment" (p. 36). In addition to all of this, as noted in the excellent forward by Stephen Lankton, the process of creating the volume intentionally involved a novel approach to international collaboration, in that colleagues from several different countries were invited to modify drafts of the book to create culturally specific adaptations which would make it internationally accessible.

The book is organized into two main sections. The first section is a personal biographical sketch of Erickson's life. This insider's view presents a Mark Twain-like narrative of Erickson's childhood. This gives the reader a warm, human understanding of the man, as well as several illustrations of how his life experiences germinated and grew into the vital structure of his work. For example, the authors tie Erickson's use of confusion strategies and "therapeutic shock" to an early lesson in spelling courtesy of a beloved teacher who understood both Erickson's reading disorder and his hunger for reading. "His teacher highlighted the most important features of the symbol '3' by turning it on its side. Erickson explains that in a blinding flash of light he suddenly saw the difference between a '3' and an 'm' (p. xvii). The thrust of the biographical narrative section of the book is an object lesson of how the adversities and challenges of Erickson's formative years (including dyslexia, color blindness, tone deafness, and in late adolescence, poliomyelitis) informed both the personal and professional cultivation of dogged determination, hope and resiliency.

The second section, which is by far the larger part, creates and fleshes out an armature of the basic strategic principles and treatment approaches that Erickson developed. It seeks to present his therapeutic strategies and techniques not from a schematic overview, but rather from the inside out, which is accomplished by using copious case examples that stimulate the reader to review and associate to his/her own clinical experiences. The authors have also used a wide angle lens in a chapter entitled, "A Philosophic Framework", to conceptualize Erickson's vantage point in the realms of philosophy and history. This is done with a wide range of references that include among others, Aristotle, explanations of the meaning of meta-teleology, an anonymous Saudi poet, and Viktor Frankl.

The organizing principle of this section of the book is the authors' own nomenclature which they employ in order to delineate the principles, philosophy, and therapeutic applications of what they call Erickson's Six Core Strategies. Through this framework, the reader is led through the various cases which provide clarification of these approaches from many different angles. The authors call the six strategies: Distraction, Partitioning, Progression, Suggestion, Reorientation, and Utilization, and they have allocated a chapter to each.

The specific definitions ascribed to these are beyond the scope of this review. Although some of these terms form part and parcel of hypnotic terminology (Suggestion and Utilization for example), others seem to have been appropriated and re-defined by the authors. I wonder why they felt it necessary to do this, as it is the only significant drawback, in my view, to this otherwise illuminating book. For example, the strategy the authors have dubbed "Reorientation" the shift in vantage point, sometimes called "re-framing," which allows the patient to deeply see his/her dilemma through a new perspective. This experience can then lead to a therapeutic shift from self-denigration to self-affirmation and to the patient being able to find a previously unseen path through a personal roadblock. As an example, the book cites a delightful Erickson case recounted by Haley in which a medical student and his bride were seeking an annulment because of his inability to obtain an erection to consummate the marriage. By "re-orienting" the bride and groom to the notion that the husband was paying her a compliment because undoubtedly his difficulties stemmed from his excess awe at her beauty, the story proceeds to say that "the young couple nearly stopped the car on the way back to Detroit in order to have intercourse" (Haley, 1985, Vol. II, pp.118-119, as cited on p.162). This kind of case provides the delightful "shock and awe," a kind of one trial learning for the reader who can only aspire to such brilliance.

The only problem with this, in my view, may be that students of hypnosis will have

previously associated the conceptual meaning of “reorientation” with the emergence from a trance state. A similar confounding word use is implicit in the chapter on “Progression,” which is used in this book to describe a large schema resulting in paced therapeutic progress. In this chapter, the authors illustrate techniques of geometric progression, progressive desensitization, progressive relaxation, pattern interruption, and Erickson’s famous pseudo-orientation in time. But again, potential confusion arises for the reader accustomed to associating the term with age progression.

In sum though, in this lovely, scholarly and heartfelt book the authors emphasize the heart and soul of Erickson’s work. It is not so much a book about hypnosis, but more one about the genesis of healing.

Throughout, the authors emphasize that the foundation of Erickson’s healing work was his ability to convey his deeply held belief in the “goodness and resourcefulness of the mind, the understandable innocence of childhood, and/or the miraculous construction of the body” (p 159). Although broadly and deeply conceived, this book is neither chaotic nor overwhelming. Indeed, it succeeds very well in drawing the reader into a permissive and immersive experience of a learning trance as it moves through the myriad panes and vantage points of a delightful Ericksonian hologram.

**Temes, R (2006). *The tapping cure*. New York: Marlowe & Co. Reviewed by Philip D. Shenefelt, M.D., Department of Dermatology, University of South Florida, Tampa, FL.**

This consumer oriented book states that it is “a revolutionary system for rapid relief from phobias, anxiety, post-traumatic stress disorder and more”. The author, Roberta Temes, Ph.D., is well known for her *The Complete Idiot’s Guide to Hypnosis*, with the 2nd edition recently reviewed in this journal by Willmarth, and also as editor of *Medical Hypnosis*, reviewed in this journal by Handel. Temes appears to use the KISS principle in her writing, with the traditional meaning “Keep It Simple, Stupid” perhaps better morphed into “Keep It Simple Safely”. In *The Tapping Cure*, she continues with her easily read conversational style and forms her own synthesis and practice of teaching clients how to tap on specific acupuncture meridian points to alleviate negative emotions associated with memories and life situations. She admits that tapping seems weird and has no clear current scientific explanation for why it works; however, in her experience tapping has been effective and efficient in obtaining long-lasting and in many cases apparently permanent results for many of her clients with minimal expenditure of resources. Tapping can be used as an ancillary therapy in conjunction with hypnosis. Thus, it deserves consideration for a place in the therapeutic toolbox despite scanty solid scientific corroboration of its effectiveness at this time.

The book is comprised of 11 chapters. The first three chapters are foundational. Chapter 1: “What Is the Tapping Cure?” presents a case example and gives a brief review of energy psychology, meridians, acupuncture, acupressure, and tapping. Chapter 2: “The Tapping Spots” gives the location in description and diagram for each of the tapping sites.

Here Temes uses her own terminology that differs somewhat from that of other energy psychology tapping authors, such as Roger Callahan (Thought Field Therapy), Gary Craig (Emotional Freedom Techniques), or Fred Gallo (Energy Psychology). For example, she refers to under-nose as moustache, under-arm as side, sore spot as pledge spot, and gamut point as V spot. Key points and key tapping sites are highlighted in boxed text called “hot spots.” This is a nice feature that aids in relocating important points or tapping sites information when referring back to text already read. A “report card” grade of A, B, C, D, or F is assigned to emotional intensity with A representing no emotional discomfort and F representing the worst possible. Most other energy tapping authors use subjective-units-of-discomfort-

scale of zero to ten. Temes recommends that the individual notice which tapping points seem to work best for them personally and focus on those sites. She also gives clear instructions on how to construct verbal affirmation sentences and select key words to be used in conjunction with the tapping. Chapter 3: “Talking and Tapping” expands on the sequence of focusing on the thought, memory, or situation that produces emotional discomfort while identifying the emotion, grading its intensity, constructing accompanying affirmation sentences, selecting key words, and saying them while tapping on key sites. Clients should at least read Chapters 2 and 3. Doubting clients should read Chapter 1 as well.

The next four chapters go through talking and tapping for specific kinds of problems. Chapter 4: Fears and Phobias, includes case examples and hot spots. Chapter 5: “Tapping at Work and at Play” similarly includes case examples and hot spots, and it also covers anxiety and obsessive-compulsive disorder. Chapter 6: “Annoyance, Anger, Guilt, and Other Everyday Emotions” covers hot spots and case examples for common negative emotions, as well as fatigue and stress. Chapter 7: “Trauma and PTSD” gives a brief discussion of trauma and the effectiveness of thought field therapy followed by anecdotes and hot spots. Each of these areas could easily have been expanded more, but at the cost of making a much longer book, with the risk that readers would not wade through it all. Temes repeatedly cautions the reader to get professional help if simple tapping fails to achieve results. Clients should read the chapter areas that pertain to them.

For refinement of the tapping technique, Chapter 8: “Fine-Tuning your Results” has a list of suggested variations and words of advice to help those not achieving sufficient results. Temes also lists affirmation sentences to use for criteria-related reversals such as deservedness, safety related permission, motivation, deprivation, and identity related reversals. She describes Roger Callahan’s 9-Gamut sequence, also known as a brain balancing sequence, which helps to center the patient. Again Temes strikes a reasonably good compromise, foregoing extensive completeness to avoid overtaxing the reader’s attention span, but this chapter is a worthwhile read for most clients.

Special issues and techniques are addressed in Chapter 9: “Tapping for Children and Babies”. Karate spot tapping is recommended for babies. The Tappas Acupressure Technique is also recommended for calming babies. Older children can be taught to tap by example and can express their emotional discomfort on a smiley-face/frowny-face scale similar to that used to rate pain perception. Temes also addresses affirmation sentence formation and key word selection for children with verbal ability and discusses common children’s issues and teenager’s issues. Teenage clients and parents working with children should read this chapter. Since tapping itself is still controversial, Chapter 10: “The Controversies Surrounding Tapping” attempts to put tapping into perspective compared with other innovations. Then Temes addresses controversies within the tapping field, noting that different schools of tapping take various positions on muscle testing, sequencing, diagnosing, surrogate tapping, reversals and polarity, talking versus silence while tapping, and hetero-tapping versus self-tapping.

A great deal of research remains to be done to sort through what is valid and useful and what is not with this technique. Since the usual scientific gold standard of double blind randomized research does not lend itself to the tapping domain, a new paradigm of a solid research standard must be developed to achieve reliable credible results. Curious or doubting clients will want to read this chapter.

The developers of tapping techniques are described in Chapter 11, “Who’s Who in the Tapping World”. This chapter is a good reference source for the curious client and for the

therapist. Following this final chapter are Appendix A: Tapping Spots for the Tapping Cure, Appendix B: Sentence Endings for the Tapping Cure, and the Appendix C: Quick-Fix Chart that associates tapping spots with the negative emotions and cognitions that they can be used to treat, and a reasonably complete Index.

In summary, *The Tapping Cure* is an easily readable, but almost oversimplified instruction book for clients on how to tap and what to say to achieve relief from negative emotions. Empowering the client to self-soothe rather than relying on the therapist for soothing promotes self-reliance and increased resilience in the face of life's traumas and stressors. The tapping techniques can be used to increase efficacy in the fields of psychology and psychiatry. They can be equally helpful for the many psychosomatic issues that are prevalent in medicine and its specialty areas. This book, along with adequate client instruction and follow-up, offers a potentially highly useful set of tools for both client and practitioner to help alleviate negative emotional and psychosomatic suffering. It is well suited to be employed as an adjunct to hypnosis for relief from and resolution of a variety of otherwise persistent problems.

### References

- Callahan R. & Trubo R. (2002). *Tapping the healer within*. New York: McGraw-Hill.
- Craig G. & Fowlie A. (1995) *Emotional freedom techniques: The manual*. Sea Ranch, CA: Available at <http://www.emofree.com>.
- Gallo, F.P. (2005). *Energy psychology (2nd ed.)*. Boca Raton, FL: CRC Press.
- Handel, D. L. (2005). Book Review: Medical hypnosis. *American Journal of Clinical Hypnosis*, 48, 61-63.
- Willmarth, E. K. (2006). Book Review: The complete idiot's guide to hypnosis. *American Journal of Clinical Hypnosis*, 48, 302-304.

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