

## The Hypnosis of Adolf Hitler

**REFERENCE:** Post DE. The hypnosis of Adolf Hitler. *J Forensic Sci* 1998;43(6):1127–1132.

**ABSTRACT:** A little-known United States Naval Intelligence document (declassified in 1973) for the first time identified Dr. Edmund Forster as the psychiatrist who treated Adolf Hitler during his recovery in Pasewalk Military Hospital.

The fact that Adolf Hitler served as a corporal in World War I is known. However, little has been known as to the psychiatric treatment of Hitler during the autumn of 1918 after he fell victim to a mustard gas attack while serving in the front lines with The 16th Bavarian Reserve Infantry Regiment.

Historians (Rudolph Binion and John Toland) have acknowledged Hitler's days in the Pasewalk Hospital, but Hitler's psychiatric treatment was not the focus of their attention.

The author of the present paper (a psychiatrist) sets out to better understand what is known about Forster's encounter with Adolf Hitler; and discusses the possibility that suggestions given to Hitler under hypnosis may have influenced the course of history.

**KEYWORDS:** forensic science, forensic psychiatry, psychohistory, hypnosis, Hitler, Ernst Weiss, *The Eyewitness (Der Augenzeuge)*, Toland, Binion, Post, Pasewalk, Forster

Reconstructing events in a Pasewalk military hospital during the autumn of 1918 is a difficult task. Yet, the events that we do know are already clearly provocative.

To complicate matters further, it has been reported that in 1933 the Gestapo rounded up and destroyed all copies of the official medical records of Hitler's 29-day hospitalization at Pasewalk (1). In addition, Forster (Hitler's psychiatrist) committed suicide in 1933 "after being placed under investigation for harboring a subversive attitude toward the new regime" (1).

However, a record of Forster's encounter, treatment, and hypnosis of Hitler may have survived to date as recorded in a 1939 controversial, out-of-print book entitled *The Eyewitness* (2). It was written by a German Jewish physician, Ernst Weiss, who also committed suicide in 1940 while living as an exile in Paris during the early days of German occupation. The author of this paper also examines the crucial link between Forster and Weiss and its significance.

### Methods

After reading Toland's biography *Adolf Hitler*, the author obtained a copy of the 1971 declassified Naval Intelligence document entitled: *Adolf Hitler's Blindness: A Psychological Study*

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Received 29 July 1997; and in revised form 30 Dec. 1997; accepted 12 March 1998.

(3). Recognizing that further clarification was needed, the author located, interviewed, and videotaped Toland to get further leads to pursue. Out of this encounter, the author located, interviewed, and videotaped Rudolph Binion. Finally, the author located a copy of *The Eyewitness* and then re-reviewed all materials.

### Results

#### *Mustard Gas Attack/Hitler's Pasewalk Hospitalization*

In mid-October 1918, Hitler served with the 16th Bavarian Reserve Infantry Regiment, which was subjected to severe mustard gas bombing while serving on the Belgian front. "The men huddled in trenches while British shells tore up the ground around them. The veterans were numbed; the recruits terrified" (4).

"Those who escaped with their lives were painfully blinded; all but one who could still see faintly led the others to a first aid station as they hung on to each other's coattails. From there, a hospital train carried the survivors to the military hospital in Pasewalk (4).

"Still blinded as the train carried him eastward, Hitler was in a state bordering on collapse . . . Like other victims, his eyes were swollen; his face puffed up . . . The soldiers would not allow their eyes to be treated; they would not eat (4). Four years earlier Hitler's regiment had been bloodied in battle in that same (Belgian) area (and) losing an almost inconceivable eighty per cent of its personnel in one week . . . Yet, Hitler remained unshaken as indicated by writing his Munich landlord that 'with pride I can say our regiment handled itself heroically from the very first day on . . .'" (4).

While at Pasewalk Military Hospital, Hitler rejected defeatist talk, and "if anyone argued with him he would become furious and then jam his hands into his pockets and pace back and forth with long strides, abusing the pessimists" (4).

#### **Psychiatric Consult by Forster**

During Hitler's hospitalization, Dr. Edmund Forster (chief of the Berlin University Nerve Clinic) was consulted (3,4). Forster diagnosed Hitler as a "psychopath with hysterical symptoms" rather than attributing his initial symptomology to mustard gas, which is not surprising since mustard gas was a new warfare agent. Nonetheless, Hitler had experienced the usual symptoms of moderate mustard gas poisoning: burning, swelling, moaning, depression and recovery in weeks (4). Gradually, "the swelling of Hitler's eyelids and the piercing of his sockets began to diminish and slowly he succeeded in distinguishing the broad outline of things about him (4).

Yet, on the evening of November 9, 1918, patients gathered in the hospital to receive news from the pastor, who informed them

that all was lost; they had thrown themselves upon the mercy of the Allies . . . and the Fatherland had become a republic” (4).

At the news of the World War I armistice, Hitler suffered a relapse of his blindness. This time Hitler’s own description of blindness was consistent with an hysterical origin.

“It became impossible to sit one minute more. Again everything went black before my eyes. . . . I groped my way back to the dormitory; threw myself on my bunk, and dug my burning head into my blankets and pillow. Only now did I see how all personal suffering vanished in comparison with the misfortune of the Fatherland (5). Out of this black despair came a decision: The great vacillation of (his) life, whether to enter politics or remain an architect came to an end. That night (Hitler) resolved that if (he) recovered his sight, (he) would enter politics” (4).

On November 11, 1918, Germany surrendered in the forest of the Compiègne (France). That night (or the next), “a supernatural vision” came to Hitler as he lay in despair in his cot. All at once, “a miracle came to pass; he could see again. As promised, he would become a politician and devote his energies to carrying out the command that he received” (4).

### The Eyewitness: Its Central Chapter

As revealed in John Toland’s best-selling biography *Adolf Hitler* (4), a single asterisk indicates that an out-of-print book, *The Eyewitness* (2) might provide further insight into the actual hypnotic exchange between Hitler and his psychiatrist. Specifically, Toland wrote:

“Hitler’s hallucination . . . is given credence by a novel about Hitler and Forster, written by the latter’s friend, Ernst Weiss, a medical doctor turned playwright and novelist” (4).

*The Eyewitness*’ central chapter is written as a verbatim exchange (i.e., process notes) of the hypnotic encounter between “A.H.” and the psychiatrist.

An excerpt from this central chapter reads as follows:

*Doctor:* “Miracles still take place frequently among those who are chosen. There must be miracles, and there must be people to whom nature is subservient, don’t you agree?”

*A.H.:* “Whatever you say, Doctor.”

*Doctor:* “I am myself no charlatan, no wonder worker. . . . I am a simple doctor. But perhaps you yourself have the rare power, which occurs only occasionally in a thousand years, to work a miracle. Jesus did it. Mohammed. The saints . . . An ordinary person with such a condition would be blind for life. But for a person of particular strength and will and spiritual energy, there are no limits. . . . You have to have a blind faith in yourself, then you will stop being blind. You are young; it would be too bad for you to stay blind. You know that Germany needs people who have energy and blind self-confidence. Austria is at an end, but not Germany” (2).

‘A.H.’ is a corporal who claims to have been blinded by a mustard gas attack in the front lines during World War I. He has an Austrian dialect and is prone to giving frequent hysterical speeches to the other patients on his treatment unit in Pasewalk. He has received The Iron Cross; he loves the music of Wagner, and he hates the Jews” (2).

### Naval Intelligence Document

The information we have concerning this provocative passage in *The Eyewitness* could not be properly interpreted until 1973 when the identity of Hitler’s psychiatrist was first discovered as Dr. Edmund Forster. This discovery was made by Pulitzer Prize-winning historian John Toland as he was doing research at the National Archives. Toland stumbled upon the declassified Naval Intelligence document (*Adolf Hitler’s Blindness: A Psychological Study* Fig. 1), which contains information from an interview of a German refugee (Dr. Karl Kroner), who was a former Viennese nerve specialist living in Reykjavik, Iceland, during March 1943 (3). Kroner reported to U.S. Naval Intelligence that he was present at the original medical exam of Hitler in Pasewalk, Germany. Kroner named Hitler’s treating psychiatrist as Dr. Edmond Forster (Fig. 2).

### Missing Pasewalk Hospital Records and the Gestapo

Validating the specific exchange between Hitler and Forster (as contained in *The Eyewitness*) has proven to be challenging because evidently the official record of Hitler’s 29-day hospitalization was rounded up and destroyed by the Gestapo beginning in 1933 (1). One glimpse as to what the discharge report said surfaced in the proceedings of the Landtag Commission, which investigated Hitler’s Putsch (uprising) between 1924 and 1928. Hitler contended on his release “that he could only read a large headline.” The presiding judge replied: “You were discharged as fit for duty,” to which Hitler replied: “The Pasewalk paper was drawn up under the Revolution already. The individual was practically ignored; we were called up in hoards” (1).

### Suicide of Hitler’s Psychiatrist (Dr. Forster)

Another obstacle toward interpreting the passages of *The Eyewitness* vanished with Forster himself when he committed suicide in 1933 “after he was placed under investigation for harboring a subversive attitude toward the new regime” (1). The suicide followed 13 days of interrogation.

### Historical Investigation of Events

As the actual medical record apparently did not survive, it has proven difficult to place the information contained in *The Eyewitness* in its proper historical context since its original writing by Ernst Weiss in 1938. However, at the same time that historian John Toland was writing his biography *Adolf Hitler*, historian Rudolph Binion was researching his own interests into possible psychohistorical origins of Hitler’s rage and hate.

Binion’s research took him to Germany in 1970 where he had an opportunity to consult with German Hitler scholar, Ernst Deuerlein, who directed Binion’s attention to the German edition of *The Eyewitness* (*Der Augenzeuge*). Just like Deuerlein, Binion was impressed with the parallels between Hitler’s recovery from blindness at Pasewalk and the “miracle” as laid out in *The Eyewitness* by “The Doctor.” Deuerlein had been searching for the name of Hitler’s psychiatrist for nearly a quarter of a century. Unfortunately, Deuerlein died just one year before Toland discovered the Naval document identifying the psychiatrist as Forster (2).

Since Forster diagnosed Hitler with “psychopathic hysteria” (3), Binion reviewed Forster’s case report publications for mention of this diagnosis. Binion found one of Forster’s case reports from 1922 written in the same language as Weiss’s central chapter about “A.H. in P” (6).

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INTELLIGENCE REPORT

Serial 24-43 Monograph Index Guide No. \_\_\_\_\_  
(List non-series each year, 1, 2, 1-42, 2-46) (To correspond with SUBJECT given below. See O. N. I. Index Guide. Make separate reports for each main title.)

From Intelligence Officer \_\_\_\_\_ at MOB, Iceland Date March 21, 1943  
(Ship, fleet, unit, district, office, station, or person)

Reference \_\_\_\_\_  
(Directive, correspondence, previous related report, etc., if applicable)

Source German refugee in Reykjavik Evaluation B-3 F-3  
(As official, personal observation, publication, press, conversation with—) (As reliable, doubtful, unverified, etc.)  
(Identify when applicable, etc.)

Subject ADOLF HITLER - Psychiatric study  
(Nation reported on) (Main title as per index guide) (Subtitles) (Make separate report for each title)

BRIEF—(Here enter careful summary of report, containing substance succinctly stated; include important facts, names, places, dates, etc.)

The following report on Hitler, prepared by Dr. Karl KRONER, a German refugee living in Reykjavik, and a former nerve specialist in Vienna, is forwarded for information. A tentative evaluation of B-3 has been placed on the report. Dr. KRONER is supposed to have been present at the original medical examination of Hitler.

ADOLF HITLER'S BLINDNESS.

(A psychological study.)

When the first World War came to an end Private Adolf HITLER, as he then was, was not at the front. He was in a military hospital in the small town of Pasewalk in Pomerania. According to the version given in the Nazi literature of the 1920's, he had gone blind as a result of gas-poisoning. We are not told, however, how long he remained in hospital after the armistice. It cannot have been long, for soon after he turned up in Munich, where he was employed as a sort of spy of the military league, to report to them the activities of the working-class political movement. We are also not told what after effects, if any, on his eyesight were left behind by the blindness.

FIG. 1—This is the first paragraph of a three-page 1943 U.S. Naval Intelligence report entitled: "Adolf Hitler's Blindness." The informant was Dr. Karl Kroner, a German refugee, who was living in exile in Reykjavik, Iceland. Dr. Kroner stated that he was present at Hitler's original medical exam, and he identified Hitler's psychiatrist as Dr. Edmund Forster. This intelligence report was not declassified until 1973. Via this document, historian John Toland learned the identity of Hitler's psychiatrist for the first time.



FIG. 2—Photo of Dr. Edmund Forster (reported as Hitler's psychiatrist during his days at Pasewalk Military Hospital). Dr. Forster was director of the psychiatric clinic of Greifswald University (1925-33). From Festschrift zur 500-Jahrfeier der Universität Greifswald 17. 10. 1956, 11, 411.

A few months later, Binion located Mona Wollheim, who typed *Der Augenzeuge* (the German edition of *The Eyewitness*). She informed Binion that he should refer to the second edition of an autobiography written by Walter Mehring, who was a colleague of Weiss, serving on the editorial board of *Das Neue Tage-Buch*, a Parisian newspaper for German exiles. Mehring entitled his autobiography, *Die verlorene Bibliothek*, which Binion reviewed and discovered therein that in the summer of 1933 "Hitler's psychiatrist brought his case records to Paris and divulged them to the editors of *Das Neue Tage-Buch* (DNTB) (1). Weiss was an editor of DNTB.

Binion located a September 1933 DNTB editorial, which mentions Forster's death and even a quote by Forster indicating that "his turn would soon come and that they (editors of DNTB) should not be surprised if they heard one day that he (Forster) was 'bumped off'" (1).

In 1975, Mehring told Binion that Forster had made two copies of the Pasewalk records for DNTB editor-in-chief, Leopold Schwarzschild (1). The whereabouts of Forster's original notes and the later copies remains unknown. However, in *The Eyewitness*, reference is made that a copy was left in a safe deposit box at the Federal Central Bank in the city of Berne, Switzerland (2), but the doctor's (allegedly/Forster's) wife regretfully turned over a key to the box in order to get her husband released from the clutches of the German SS. To my knowledge, the claims regarding the Swiss safe deposit box have not been investigated.

**Ernst Weiss (Author of *The Eyewitness*)**

A brief review of Weiss and his background may help us better understand the information he presents in *The Eyewitness*. Dr.

Weiss was born in 1882; he studied medicine in Prague and Vienna, where he is reported to have had exposure to psychoanalysis by attending the lectures of Sigmund Freud. During World War I, he served on the Eastern front. After that war, he moved to Berlin where he gave up medicine and chose to become a freelance writer. Weiss became a highly respected European literary writer, and he was given the Silver Medal of The Olympiad by German President Hindenburg for his literary achievements (2).

Weiss wrote *The Eyewitness* in 1938, which was a time when he was struggling to make financial ends meet. He was living as a Jewish exile in Paris and had been trying to support himself as a writer. It was during those times that he entered *The Eyewitness* in a writer's contest, which was sponsored jointly by the American Guild for German Cultural Freedom and Little Brown and Company. The contest, which had a cash prize, was looking for the best German novel by an exiled writer. Unfortunately (for Dr. Weiss) he did not win, and his book went largely unknown for years until 1963 when Hermann Kreisselmeier published it as a work of fiction by a long-but-not-forgotten writer. Yet, it should be noted that the 1963 publication date was several years *before* Toland's 1973 discovery of the Naval Intelligence document naming Hitler's psychiatrist as Dr. Forster. Also, it appears that the contest rules required the submission in novel form (2).

### Ernst Weiss's Suicide

Unfortunately, Ernst Weiss also committed suicide, in June of 1940, on the day that the German Army entered Paris. The tragedy of Weiss's suicide was further compounded when it was learned that just prior to his suicide Eleanor Roosevelt and author Thomas Mann had secured a travel visa for Weiss to escape to the United States (2).

## DISCUSSION

### The Eyewitness . . . Fact, Fiction, or Both?

Why would Weiss write *The Eyewitness* with so many parallels beginning with "A.H." in "P" and carried through to the details of "A.H." having been a corporal injured by mustard gas. The parallels take on even deeper significance once Dr. Forster's identity became known in 1973 (via the declassified Naval Intelligence document); and a trail of evidence connected him to a Paris meeting with Weiss's editorial board (DNTB). And finally, the suicides of both Forster and Weiss heighten suspicion that Hitler went to the extreme in order to keep his Pasewalk experiences under tight seal during his rise to power.

Weiss could *not* have easily published his information concerning Hitler for two reasons: (1) Weiss was living as a Jewish exile in Paris and he risked deportation back to Germany if his publication brought him increased scrutiny, and/or (2) Weiss (a physician) attempted to maintain confidentiality by using abbreviations (such as "A.H.") which was (and is) a commonly accepted medical practice.

Also, it is plausible to argue that Weiss did write in "fictionalized" form so as to comply with the contest rules. Yet, he could have still utilized Forster's medical notes to describe the crucial details of the central chapter concerning "A.H.'s" hypnosis.

Others may claim that *The Eyewitness* remains a wholly fictional account of events. For those lacking this position, there appears much information to be explored, including: two dead bodies, missing medical records, and numerous parallels between "A.H." and the actual historical record as described in the body of this article.

### Hitler's Symptoms and Diagnostics

We know that Hitler exhibited a "grab bag" of psychopathology. At various times, he exhibited: histrionic (i.e., dramatic) and dissociative (trance-like) features; rapid and intense mood swings; delusions of grandeur, narcissism, intermittent auditory hallucination; and apparent conversion reaction (i.e., psychogenic blindness).

As The Naval Intelligence document reports, Forster diagnosed Hitler as a "*psychopath with hysterical symptoms.*" Presumably "the psychopath" is referring to Hitler's baseline personality, including features such as grandiosity, hate, and rage.

If *The Eyewitness* account is accurate, it would support the notion that Forster attributed Hitler's symptoms to psychogenic origin and not to the effects of mustard gas, which was a new warfare agent at that time. At the Pasewalk Hospital, the doctor notes that "Corporal A.H . . . was not in a field hospital with others who had been gassed . . . but he was among the emotionally disturbed" (2).

Also, an actual article written by Forster indicated his skepticism for "war hysterics . . . who produced every imaginable symptom . . . then got sent to hospitals in the rear . . . if they were not unfortunately sick they would be reporting for duty up front, however dangerous." We do not know precisely how Forster viewed the role of mustard gas in Hitler's case, but it is clear that Forster harbored a suspicion of the "war hysterics," who might be shirking from front line duty (1).

In today's diagnostic terminology, "hysteria" most likely refers to "histrionic" or "borderline" personality disorder (7). Personality disorders are placed on Axis II (The Personality Disorder Scale) within cluster "B." There are three personality disorder "clusters." Cluster "B" includes those pathologic personality traits with a dramatic, emotional, or erratic nature. Specifically, "histrionic" traits refer to: excessive dramatic, seductive, or suggestible qualities. "Borderline" traits include: severe confusion over one's self-concept; involvement in high-risk behaviors; intense anger and rage; and even transient paranoid or dissociative states. Clinically, those individuals with severe forms of histrionic or borderline personality disorder are more apt to experience somatic symptoms. For instance, conversion disorder refers to a physical symptom deficit where psychological factors are believed to be causal (e.g., Hitler's blindness) (8).

In today's nomenclature, I offer a diagnostic formulation of Hitler *for discussion purposes only*. Nonetheless, the following diagnosis is based on the information reviewed and would focus on the time period of his discharge from Pasewalk Hospital:

#### Axis I: Psychosis Not Otherwise Specified

(Rule out Schizophrenia; Schizoaffective Disorder; Delusional Disorder)

Conversion Disorder (Psychogenic Bilateral Blindness; resolved)

Post-Traumatic Stress Disorder, Acute; in partial remission

#### Axis II: Personality Disorder Not Otherwise Specified; Cluster "B"

[Severe: Borderline, Histrionic, Narcissistic, and Anti-social features]

#### Axis III: Mustard Gas Poisoning (symptoms in partial resolution)

#### Axis IV: Combat; Limited Family Support; Limited Economic Support

#### Axis V: Global Assessment of Functioning: 35

*Note:* A full discussion of diagnostic terminology is beyond the scope of this paper. Please refer to the *Diagnostic and Statistical Manual*, 4th Edition, for further information (8).

In 1943, William C. Langer had the challenging task of preparing a classified report for the U.S. Office of Strategic Services. This report offered a personality composite of Hitler based on the information available at that time. The Langer Report noted that “there was unanimous agreement of four psychoanalysts . . . that Hitler to be a hysteric bordering on schizophrenia and not a paranoiac as so frequently supposed” (9).

As contained in The Langer Report, two of Hitler’s quotes are of interest here. In 1936, Hitler said: “I follow my course with the precision and security of a sleepwalker” (9). “No power on earth can shake the German Reich now, Divine Providence has *willed it* that that I carry through the fulfillment of the Germanic task” (9).

Another Langer Report passage includes a description (given by Rauschnig) of Hitler’s sleep that appears consistent with someone who has been traumatized:

“Hitler wakes at night with convulsive shrieks; shouts for help. He sits on the edge of his bed, as if unable to stir. He shakes with fear, making the whole bed vibrate. He shouts confused, unintelligible phrases. He gasps, as if imagining himself to be suffocating. . . . His lips were blue. Sweat streamed down his face . . . He suddenly broke out: There, there . . . in the corner. He stamped and shrieked in the familiar way” (9).

## TREATMENT

In France during the 1880’s, Pierre Janet developed what was probably the first attempt to create a systematic, phase-oriented therapeutic approach to post-traumatic psychopathology and to recognize that such treatment needs to be adapted to different stages of the stress reaction (10).

Janet promoted the use of hypnosis as a treatment modality for trauma, and his treatment regimen for emotional trauma still remains highly regarded today. For instance, Janet’s “Treatment of Post-Traumatic Stress” continues to be prominently presented at the annual Harvard Medical School Conference on Phase Oriented Treatment of Psychological Trauma (10,11). Janet wrote that treatment of post-traumatic symptoms consisted of three stages. In all phases, retrieval, exploration, and modification of traumatic memories were indicated. The victim was encouraged to take charge of one’s own life during all stages of treatment.

In Stage I, Janet’s focus was on stabilization. Rest was meant to restore energy and build up reserves. Hypnosis as a symptom relief was used commonly. Some conditions that hypnosis was utilized for included: treatment of insomnia, conversion reactions (such as hysterical blindness), amnesic states, and limb paralysis (due to psychogenic causes).

In Stage 2, Janet utilized hypnosis, automatic writing, and fantasy in an attempt to “liquidate” the traumatic memory. He drew upon three treatment methods:

(a) *Neutralization* was Janet’s most venturesome approach whereby the traumatic memories were re-experienced, starting with the least threatening and working toward assimilation. For many this method was too painful and demanding.

(b) *Substitution* was substituting neutral or even positive imagery for traumatic memories. He either changed the cognitive interpretation of the traumatic event or the patient’s emotional reaction.

(c) *Reframing* was used predominantly for hysterical symptoms (such as those Hitler experienced). These patients were plagued by guilt, and preoccupied with how they should have behaved differently. In Hitler’s case, one could argue that his blindness (a “conversion symptom”) was the result of his feeling guilt and shame when Germany announced her agreement to an armistice ending the war. In case of fact, Hitler’s severe episode of crying at the announcement of the armistice was the first time that Hitler had wept since standing at his mother’s grave eleven years earlier (4,5).

With the benefit of hindsight, Hitler’s initial symptom of blindness on admission to Pasewalk was most likely genuine and related to the new warfare agent: mustard gas. However, Hitler suffered a second episode of (hysterical) blindness at the announcement of the armistice. This relapse of blindness temporally and clinically appears as though it was linked to his refusal “to see” (or recognize) the armistice which ended the war. If the exchange between Forster and Hitler did actually occur, it could be theorized that Forster was attempting to reframe Hitler’s frustration with Germany’s defeat into a paradigm whereby Hitler himself would *have to* regain his eyesight so that he alone could lead Germany out of the darkness and into prosperity.

If *The Eyewitness* version is accurate, Forster would have been challenging Hitler to regain his “strength of will,” which was a phrase that Hitler’s later propaganda often referred to. Forster also appears to have gone full throttle when he is reported to have made the comparison between “Hitler, Jesus Christ, and Mohammed.” Forster’s alleged “subliminal suggestion” (i.e., “cognitive shift”) would have “tapped into” Hitler’s inner energies (i.e., drives) and helped mobilize Hitler from a state of helplessness and hopelessness and instead propel him into a man of action and purpose.

In Stage 3, personality reintegration was the goal. Janet recognized that post-traumatic patients were at risk for relapse, including symptoms of: apathy, boredom, and depression. Thus, his treatment model emphasized education, excitation, which encouraged the channeling of agitation into creative pursuits, and drug treatment with stimulants and sedatives.

## Conclusion

Perhaps it will forever remain difficult to precisely define the exact historical role of Hitler’s Pasewalk hospitalization and treatment. For some, the events as brought to light will remain conjecture (12). However, I hope this review of events will help to refocus our attention on this potentially pivotal historic moment, which was chillingly defined in Hitler’s own words as:

“The great vacillation of my life, whether I should enter politics or become an architect, came to an end. That night I resolved, that if I recovered my sight, I would enter politics” (4).

## Acknowledgments

The author would like to express his thanks to Dr. Thomas Gutheil, professor of psychiatry and supervisor of the Gaughan Fellowship of Forensic and Correctional Psychiatry and Ms. Beth Banov, librarian, both of Harvard University, Massachusetts Mental Health Center, Boston, Massachusetts. Also, his thanks to John

Taylor, National Archives, Military Reference Branch, Washington, DC, Reed Smith, J.D. for his translation assistance, and Robert C. Holtze JD, Honorary Counsel for the Federal Republic of Germany (retired); Grand Marais, MN.

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**John Toland:** Pulitzer Prize-winning author and historian who wrote *Adolf Hitler* by Anchor/Doubleday. Mr. Toland made a significant discovery by finding a declassified Naval Intelligence document that for the first time identified Adolf Hitler's psychiatrist as Dr. Edmond Foster.

**Rudolph Binion, Ph.D.:** Professor of History at Brandeis University in Boston. In the early 1970s, once the identity of Hitler's psychiatrist (Dr. Forster) became known from the declassified Naval Archives document, Dr. Binion went to Europe and painstakingly researched documents and interviewed many leads to better understand the events and circumstances of Hitler's hypnosis.

**Dr. Karl Kronor:** German refugee (and former psychiatrist from Vienna) who was living in Reykjavik, Iceland in 1943 when he was interviewed by Naval Intelligence. During the interview, he identified Hitler's psychiatrist as Dr. Forster. The Naval Intelligence document entitled: "Adolf Hitler's Blindness" was not declassified until 1973 (deceased).

**Dr. Edmond Forster:** Hitler's psychiatrist. Dr. Forster was the former chief of the Berlin University Nerve Clinic and a professor at the University of Greifswald. When Hitler rose to power, the Gestapo interrogated Dr. Forster at length, after which he committed suicide (see Fig. 2) (deceased/suicide).

**Dr. Ernst Weiss:** Author of *The Eyewitness*. He worked on the editorial board of a German refugee newspaper *Das Neue Tage-Buch* (DNTB). Dr. Binion (*q.v.*) found tangible evidence that Hitler's psychiatrist (Dr. Forster) went to Paris and met with the editorial board of DNTB. It is speculated that Dr. Forster delivered a copy of his medical notes (concerning Hitler) to Dr. Weiss, thus, providing the basis for *The Eyewitness*. Dr. Weiss also committed suicide, in June 1940, when the Germans entered Paris (deceased/suicide).

## APPENDIX

Following is a brief description of individuals relaying relevant information concerning Hitler's hypnosis:

Additional information and reprint requests:  
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