



THE BLACK VAULT

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File

3 December 1951

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"Artichoke" - [REDACTED]

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1. Immediately after the conference on Friday, 30 November 1951, [REDACTED] succeeded in finding [REDACTED] and [REDACTED], [REDACTED], and the writer discussed electric-shock devices and certain related matters from about 3:30 to 4:45 with [REDACTED].

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2. [REDACTED] is reported to be an authority on electric shock. He is a professor at the Medical School of the [REDACTED] and, in addition, is a psychiatrist of considerable note. [REDACTED] is, in addition, a fully cleared Agency consultant.

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3. [REDACTED] explained that he felt that electric shock might be of considerable interest to the "Artichoke" type of work. He stated that the standard electric-shock machine (Reiter) could be used in two ways. One setting of this machine produced the normal electric-shock treatment (including convulsion) with amnesia after a number of treatments. He stated that using this machine as an electro-shock device with the convulsive treatment, he felt that he could guarantee amnesia for certain periods of time and particularly he could guarantee amnesia for any knowledge of use of the convulsive shock.

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4. [REDACTED] stated that the other or lower setting of the machine produced a different type of shock. He said he could not explain it, but knew that when this lower current type of shock was applied without convulsion, it had the effect of making a man talk. He said, however, that the use of this type of shock was prohibited because it produced in the individual excruciating pain and he stated that there would be no question in his mind that the individual would be quite willing to give information if threatened with the use of this machine. He stated that this was a third-degree method but, undoubtedly, would be effective.

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[REDACTED] stated that he had never had the device applied to himself, but had talked with people who had been shocked in this manner and stated that they complained that their whole head was on fire and it was much too painful a treatment for any medical practice. He stated that the only way it was ever used was in connection with sedatives and even then its use was extremely painful. The writer asked [REDACTED]

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whether or not in the "groggy" condition following the convulsion by the electric-shock machine anyone had attempted to obtain hypnotic control over the patient, since it occurred to the writer that it would be a good time to attempt to obtain hypnotic control. [REDACTED]

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stated that, to his knowledge, it had never been done, but he could make

[REDACTED]

[REDACTED]

this attempt in the near future at the [REDACTED] and he would see whether or not this could be done.

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5. [REDACTED] and [REDACTED], as well as all others present, discussed the use of electro shock at considerable length and it was [REDACTED] opinion that an individual could gradually be reduced through the use of electro-shock treatment to the vegetable level. He stated that, whereas amnesia could be guaranteed relative the actual use of the shock and the time element surrounding it, he said it would obtain imperfect amnesia for periods further back. He stated several instances in which people who had been given the electro-shock treatment remembered some details of certain things and complete blanks in other ways.

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6. [REDACTED] said that a [REDACTED], who is practicing in [REDACTED] has perfected a battery-driven shock machine which, according to [REDACTED], is portable. [REDACTED] said that the standard electro-shock machine is a very common machine in medical offices and in the major cities there must be several hundred of them in use at all times.

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7. [REDACTED] stated also that there would be no way of detecting that an individual had been given electro-shock treatments except through the use of the electro-encephalograph and then only if the individual who had been given the electro-shock treatment were placed on the encephalograph within two weeks after the shock had been given. He stated that a definite pattern (similar to the epileptic-encephalograph [REDACTED]) showed on the encephalograph after the shock treatments, but this pattern diminished in time and disappeared in about two weeks.

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