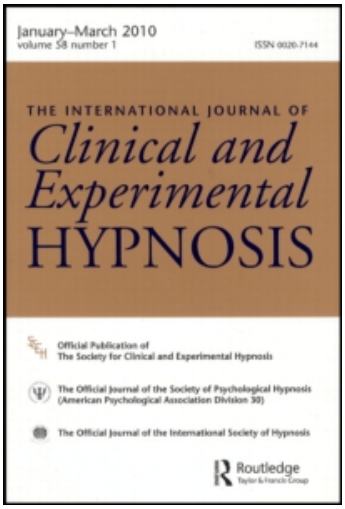

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Israeli Norms for the Stanford Hypnotic Susceptibility Scale, Form C

Pesach Lichtenberg[a]; Haim Shapira[b]; Yuval Kalish[c]; Eitan G. Abramowitz[d]
[a] Herzog Hospital and the Hadassah Medical School of the Hebrew University, Jerusalem, Israel [b] Wolfson Medical Center, Holon, Israel [c] University of Melbourne, Victoria, Australia [d] Mental Health Division, Israel Defense Forces, Israel

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ISRAELI NORMS FOR THE STANFORD HYPNOTIC SUSCEPTIBILITY SCALE, FORM C[1]

PESACH LICHTENBERG[2]

Herzog Hospital and the Hadassah Medical School of the Hebrew University, Jerusalem, Israel

HAIM SHAPIRA

Wolfson Medical Center, Holon, Israel

YUVAL KALISH

University of Melbourne, Victoria, Australia

EITAN G. ABRAMOWITZ

Mental Health Division, Israel Defense Forces, Israel

Abstract: A Hebrew version of the 12-item Stanford Hypnotic Susceptibility Scale, Form C (SHSS:C) was administered to 169 subjects in Israel. The authors compared the results with those obtained for the English original administered in the USA and with an additional group of 38 English-speaking subjects in Israel, as well as with versions translated into Spanish (2 versions, for Spain and for Mexico), Italian, German, and Dutch. Mean scores and pair-wise rank-order correlations between item pass rates were comparable across the different samples. Item reliability was somewhat lower in the Hebrew version; however, if testing was discontinued after failure to comply with 3 consecutive items, reliability was similar to that obtained for the other samples. We conclude that the Hebrew version of the SHSS:C can be used for the assessment of hypnotizability and recommend that the discontinuation criterion be applied.

The Stanford Hypnotic Susceptibility Scale, Form C (SHSS:C; Weitzenhoffer & Hilgard, 1962) is widely used in hypnosis research for establishing an individual's level of hypnotic susceptibility. While initially intended to be administered following earlier testing with Forms A or B of the Stanford Hypnotic Susceptibility Scale (Hilgard, 1965) or with

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[1]This work was partly supported by a gift to Herzog Memorial Hospital from the Maury and Florence Rosenblatt Fund.
[2]Address correspondence to Pesach Lichtenberg, MD, Department of Psychiatry, Herzog Hospital, P.O. Box 3900, Jerusalem 91035, Israel. E-mail: licht@cc.huji.ac.il

the Harvard Group Scale of Hypnotic Susceptibility (Shor & Orne, 1962), the SHSS:C has come to be administered as a first exposure to hypnosis as well (e.g., Brodeur, Kurtz, & Strube, 1998; Matthews & Isenberg, 1995). Though questions have been raised about the psychometric validity of the SHSS:C (Näring, Hoogduin, & Keijser, 2004), the test remains the assessment instrument of choice for many researchers.

The SHSS:C has been translated into Spanish (Spain: Lamas, del Valle-Inclán, & Diaz, 1996; Mexico: Sánchez-Armáss & Barabasz, 2005), Italian (De Pascalis, Bellusci, & Russo, 2000), German (Bongartz, 2000), and Dutch (Näring, Roelofs, & Hoogduin, 2001). We present here our experience using a Hebrew translation of the SHSS:C.

METHOD

Participants

We evaluated 207 adult volunteers for hypnotizability using the SHSS:C. They were drawn from three separate sources:

1. One hundred and seven volunteers participated in a research project evaluating personality and genetic correlates of hypnotizability (Lichtenberg, Bachner-Melman, Ebstein, & Crawford, 2004). All hypnotic assessments were conducted by the first author (PL). A number of the participants were more comfortable with English than with Hebrew, usually because the former was their mother tongue. In that event, their hypnotist, whose mother tongue is also English but who is fully bilingual, used the original version of the SHSS:C for testing. Participants were not compensated for being hypnotized.
2. A further 55 volunteers were evaluated in a separate research project searching for neurophysiological correlates of hypnotizability (Levin et al., 2007). Fifty-one of this group were evaluated by the second author (HS), while the remaining 4 were evaluated by the first author (PL). All were tested in Hebrew. An additional 2 subjects are not included because they experienced emotional reactions that did not allow them to complete the testing. Participants, who underwent a battery of additional tests as well, received the equivalent of approximately US$25 for their participation.
3. Finally, 45 health care professionals studying in an accredited hypnosis course were administered the SHSS:C by the instructor, the fourth author (EGA), early in the course (usually after the second of 10 lectures).

The first two groups consisted of individuals responding to notices on university campuses and in the local press. The third group, as noted, comprised participants in a hypnosis course. All participants signed their informed consent for undergoing hypnosis.

The first author (PL) then conducted 111 hypnotizability evaluations. The participants ranged in age from 19 to 71, with a mean of 33.1

(*SD* = 11.6 years). Seventy-three participants were evaluated in Hebrew, including 32(44%) males and 41(56%) females, with an average age of 28.7 ± 7.9 (range 19–50). The remaining 38 were tested in English; this smaller group included 19 males and 19 females, with an average age of 41.4 (*SD* = 13.1; range 21–71). None of the participants were compensated for their participation in the study.

The second author (HS) hypnotized 51 individuals, including 18(35%) males and 33(64%) females. Age range was 18 to 31, with a mean of 23.3 (*SD* = 3.7).

The fourth author (EGA) hypnotized 45 subjects. They included 26(58%) males and 19(42%) females. The age ranged from 29 to 46 with a mean of 37.1 (*SD* = 4.4).

For all three groups together, then, we tested 169 individuals in Hebrew and 38 in English.

Instrument

The Hebrew version of the SHSS:C was translated from the original English version (Weitzenhoffer & Hilgard, 1962) by the third author (YK), then an undergraduate student at the Hebrew University in Jerusalem. The first author supervised the work. The result was then back-translated to confirm its accuracy.

Procedure

A psychiatrist screened participants with a semistructured clinical interview to exclude serious psychopathology or concurrent treatment with psychotropic medication. The participant was told about hypnosis and allowed to ask any questions. Hypnosis was then induced as in the original English version. All 12 tasks were sequentially administered and assessed by the hypnotist, as is standard for this test. The full complement of 12 tasks was administered even if the participant failed to respond to three or more consecutive suggestions; that is, the discontinuation criterion (Weitzenhoffer & Hilgard, 1962), according to which after three consecutive failures the testing is discontinued, was not implemented (though a portion of the data was analyzed as if it were; see below). For example, if a subject responded to suggestions 1 through 6, then failed suggestions 7 through 9 as well as 11, while passing items 10 and 12, his or her score without the discontinuation criterion would be 8, reflecting the eight items he or she has passed. Using the discontinuation criterion, however, testing would have been discontinued after the third consecutive failure on 9, and he or she would be rated a final score of 6. Following the hypnosis, all hypnotic effects were neutralized and the participant was again allowed to ask any questions.

The research was approved by the Herzog Hospital Institutional Review Board and by the Israel Ministry of Health.

RESULTS

The group of 38 tested in English were significantly older than the group of 169 tested in Hebrew (t test, $p < .001$), but there were no differences between the groups with respect to gender (chi-squared test, $p = .5740$).

The mean total scores did not differ between males (5.63, $SD = 2.61$) and females (5.63, $SD = 2.61$) (t test, $p = .9949$) nor between the three hypnotists (ANOVA, $p = .5208$; Hyp. 1: 5.77, $SD = 2.77$; Hyp. 2: 5.27, $SD = 2.54$; Hyp. 3: 5.69, $SD = 2.27$). In addition, the scores were the same for the two languages (Hebrew: 5.62, $SD = 2.44$; English: 5.68, $SD = 3.27$; t test $p = .8935$) and for paid versus unpaid subjects (unpaid: 5.75, $SD = 2.63$; paid: 5.27, $SD = 2.54$; t test $p = .2597$). No correlation was found between the score and age (Spearman $r = -.02$, $p = .761$).

Therefore, subsequent analyses here pool the results for both sexes and for all 169 subjects evaluated in Hebrew by the three hypnotists. The 38 subjects tested in English will be treated as a separate group.

Score Distribution

The score distributions, mean scores, and standard deviations for the Israeli samples are shown in Table 1.

Mean overall total scores were 5.63 with a standard deviation of 2.61.

The mean score for all three Hebrew-language groups together was 5.62 ($SD = 2.44$, range 0–11) (Table 1) and did not differ significantly

Table 1
Score Distributions, Mean Scores, and Standard Deviations for the Israeli Samples

Total Score	Israel–Hebrew		Israel–English	
	N	% of Cases	*N*	% of Cases
0	2	1.1%	2	5.2%
1	5	2.9%	3	7.8%
2	12	7.1%	3	7.8%
3	17	10.0%	5	13.1%
4	21	12.4%	1	2.6%
5	29	17.1%	3	7.8%
6	15	8.8%	3	7.8%
7	22	13.0%	5	13.1%
8	26	15.3%	4	10.5%
9	13	7.6%	3	7.8%
10	5	2.9%	5	13.1%
11	2	1.1%	1	2.6%
12	0	0%	0	0%
Overall Mean (*SD*)		5.62(2.44)		5.68(3.27)

for the three hypnotists. For the English language group, we found a mean of 5.68 (SD = 3.27) (Table 1).

To determine if the mean scores of the Israeli samples differ from the reference samples, two series of two-sample t tests were conducted using Hochberg's step-up Bonferroni method to adjust for multiple testing. We found significant differences between the Israel-Hebrew mean score (5.62, SD = 2.44) and the Dutch (4.31, SD = 2.6; adj. $p < .0001$), Italian (6.81, SD = 2.6; adj. $p < .0001$), and Mexican (7.56, SD = 2.29; adj. $p < .0001$) mean scores, while compared with the USA, Spanish, and German mean scores, the differences were not statistically significant (see Table 2). Significant differences between the Israeli-English sample mean score (5.68, SD = 3.27) were found only for the Dutch (adj. $p = .0442$) and Mexican (adj. $p = .0088$) samples, where again the Israeli scores were higher than the Dutch scores but lower than the Mexican.

Item Difficulty

The pass rates for each item of the Israeli and reference samples are shown in Table 2. The highest pass rates in the Israeli Hebrew-language group were obtained for the first and second items, while the 10th and 11th items showed the lowest pass rates. Otherwise, as with the other national samples and contrary to the original U.S. data, the items did not demonstrate consistently increasing levels of difficulty.

The pass rates of the Israeli samples proved to be correlated with those of the other published samples as indicated by the mean of the pair-wise rank-order (Spearman) correlation coefficients (see Table 3). The mean correlation for the Hebrew-language group was 0.87, SD = 0.1, and for the English-language group 0.81, SD = 0.1.

Reliability

Item-scale reliability, as determined by the point-biserial correlations between each of the 12 items and the total score omitting that item, and the total scale reliability (Kuder-Richardson) are presented in Table 4. The Hebrew language sample point-biserial correlations were lower than those of the other samples for 8 of the 12 items (mosquito hallucination, taste hallucination, arm rigidity, dream, age regression, arm immobilization, negative hallucination, and posthypnotic suggestion). Moreover, total scale (Kuder-Richardson) reliability of the Hebrew-language sample was lower than all the other reference samples.

Therefore, we recalculated the data employing the discontinuation criterion. The scores of 39 of the 169 in the Hebrew-language sample were lowered by 1 to 5 points, and mean scores were reduced from 5.62 (SD = 2.44) to 5.17 (SD = 2.78). In the English-language group, 9 of the 38 lost 1 or 2 points, and the mean was reduced from 5.68 (SD = 3.27) to 5.42 (SD = 3.35). With the discontinuation criterion, reliability was brought within range of the other samples for all but three items (mosquito

Table 2
Pass Rates for Each Item of the Israeli and Reference Samples

	USA	Spain	Italy	Germany	Mexico	Holland	Israel– Hebrew	Israel–English
N	**203**	**115**	**356**	**174**	**513**	**135**	**169**	**38**
1. Hand lowering	92	87	88	96	96	87	90	89
2. Moving hands apart	88	87	87	78	89	89	86	74
3. Mosquito hallucination	48	60	53	32	73	34	51	68
4. Taste hallucination	46	50	66	49	70	26	38	45
5. Arm rigidity	45	73	74	69	81	47	67	58
6. Dream	44	41	62	49	39	32	56	58
7. Age regression	43	37	55	48	58	37	48	55
8. Arm immobilization	36	59	63	55	65	39	58	47
9. Anosmia to ammonia	19	37	62	39	78	18	30	26
10. Voice hallucination	9	4	11	3	16	1	9	5
11. Negative hallucination	9	5	17	13	22	2	3	5
12. Posthypnotic suggestion	27	38	44	23	70	18	26	37
Sample Mean	**5.19**	**5.78**	**6.81**	**5.79**	**7.56**	**4.31**	**5.62**	**5.68**
Sample *SD*	**3.09**	**3.15**	**2.88**	**2.8**	**2.29**	**2.6**	**2.44**	**3.27**

Table 3
Rank-Order Correlation Coefficients for the Israeli and Reference Samples

	Israel–English	USA	Spain	Italy	Germany	Mexico	Holland
Israel–Hebrew	0.92	0.84	0.91	0.87	0.94	0.69	0.96
USA			0.89	0.78	0.78	0.74	0.81
Spain				0.84	0.85	0.82	0.89
Italy					0.97	0.78	0.84
Germany						0.70	0.91
Mexico							0.70

hallucination, negative hallucination, and posthypnotic suggestion). The total scale was also comparable to that of the other samples.

DISCUSSION

Our findings here indicate that the Hebrew translation of the SHSS:C, administered to a group of Israeli adults, produced results similar to those obtained in the other versions, original and translated, of the hypnotizability assessment. Mean total scores and rank-order correlations were comparable across the different samples, including a small group of Israelis whom we tested using the original English version. However, the reliability was lower, until we introduced the discontinuation criterion, which improved the item and total score reliability. Interestingly, the Mexican sample also showed reduced reliability until the discontinuation criterion was applied (Sánchez-Armáss & Barabasz, 2005). The other samples did not use the discontinuation criterion in their assessments of national norms.

Our sample included many students, but also older individuals who participated. We did not find that age effected hypnotizability scoring.

An interesting feature of our sample was that it included individuals undergoing training to become hypnotists. This group did not display any unusual aptitudes for hypnotic susceptibility. It would appear that high hypnotizability not only is not necessary to study and practice hypnosis but perhaps doesn't even incline one to choose to work in the field.

Some subjects were paid for their participation; others were not. This factor, which might be expected to affect motivation, did not influence hypnotizability scores.

Another feature of our findings is that we had no individuals scoring 12 out of 12 on the SHSS:C. It is not clear why this would be so. The mean scores were not otherwise lower. Moreover, in a separate study (Lichtenberg et al., 2008) employing the Hebrew translation of the SHSS:C assessing subjects prescreened for high hypnotizability using

Table 4
Point-Biserial Correlation Coefficients and Total Scale Reliability for the Israeli Samples and the Reference Samples

	USA	Spain	Italy	Germany	Mexico	Israel–Hebrew*	Israel–Hebrew**	Israel–English
N	203	115	356	174	513	169	169	38
1. Hand lowering	0.6	0.49	0.29	0.23	0.32	0.30	0.36	0.36
2. Moving hands apart	0.49	0.43	0.35	0.37	0.33	0.35	0.49	0.49
3. Mosquito hallucination	0.8	0.62	0.49	0.48	0.49	0.23	0.27	0.64
4. Taste hallucination	0.75	0.54	0.5	0.56	0.59	0.49	0.51	0.64
5. Arm rigidity	0.76	0.62	0.5	0.52	0.56	0.39	0.57	0.54
6. Dream	0.57	0.5	0.39	0.34	0.44	0.28	0.50	0.56
7. Age regression	0.68	0.59	0.56	0.48	0.5	0.32	0.48	0.77
8. Arm immobilization	0.81	0.7	0.55	0.54	0.53	0.43	0.61	0.64
9. Anosmia to ammonia	0.65	0.49	0.33	0.41	0.36	0.33	0.50	0.45
10. Voice hallucination	0.63	0.23	0.26	0.15	0.39	0.23	0.28	0.25
11. Neg. hallucination	0.87	0.29	0.36	0.36	0.47	0.20	0.21	0.29
12. Posthyp. suggestion	0.85	0.63	0.46	0.54	0.48	0.41	0.43	0.57
Total Scale (Kuder-Richardson)	0.85	0.85	0.76	0.72	0.77	0.69	0.79	0.85

*Testing for all items.
**With discontinuation criterion.

the Harvard Group Scale of Hypnotic Susceptibility, Form A (HGSHS:A; Shor & Orne, 1962), we did find individuals scoring a 12; so the problem cannot be related to the version of the scale we used or to our method of administering the test. We are not the only ones to have this occur; indeed, in the Dutch sample (Näring et al., 2001), no subject scored 12 or even 11. Presumably, with a larger sample, we would eventually come upon a perfect scorer.

We therefore conclude that the Hebrew version of the SHSS:C can be used in research to assess hypnotizability. In order to enhance reliability, we recommend that testing cease once the subject is unable to perform three consecutive suggestions and that the number of items that the subject has carried out up to that point should count as the final score.

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Israelische Normen für die Stanford Hypnotic Susceptibility Scale, Form C

Pesach Lichtenberg, Haim Shapira, Yuval Kalish und Eitan G. Abramowitz

Zusammenfassung: Eine hebräische Version der 12-Item Stanford Hypnotic Susceptibility Scale, Form C (SHSS:C) wurde mit 169 Teilnehmern in Israel durchgeführt. Die Autoren verglichen die Ergebnisse mit denen des Englischen Originals (durchgeführt in den USA), mit Ergebnissen einer Gruppe 38 englischsprachiger Teilnehmer aus Israel sowie mit den übersetzten Versionen ins Spanische (2 Versionen, Spanien/Mexiko), Italienische, Deutsche und Holländische. Mittelwerte und paarweise Rankkorrelationen zwischen den Item-Erfolgsraten waren über die Stichproben hinweg ähnlich. Die Reliabilität der Hebräischen Version war etwas niedriger. Wenn die Testung jedoch nach 3 nicht bewältigten Items in Folge abgebrochen wurde, lag die Reliabilität auf vergleichbarer Höhe. Wir schließen daraus, dass die Hebräische Version der SHSS:C zur Feststellung der Hypnosefähigkeit eingesetzt werden kann und dass dabei das Abbruchskriterium verwendet werden sollte.

RALF SCHMAELZLE
University of Konstanz, Konstanz, Germany

Les normes israéliennes de l'échelle de susceptibilité hypnotique de Stanford, formulaire C

Pesach Lichtenberg, Haim Shapira, Yuval Kalish et Eitan G. Abramowitz

Résumé: Les 12 items de l'échelle de susceptibilité hypnotique de Stanford, formulaire C (SHSS:C), ont été administrés en version hébraïque à 169 sujets en Israël. Les auteurs ont comparé les résultats avec ceux obtenus à partir du questionnaire en version originale administré en anglais aux États-Unis et ceux d'un groupe supplémentaire composé de 38 sujets anglophones en Israël, ainsi qu'avec ceux obtenus à partir des versions du questionnaire traduites en espagnol (deux versions : une pour l'Espagne, l'autre pour le Mexique), en italien, en allemand et en néerlandais. Les résultats moyens et les corrélations de classements paritaires entre le taux de réussite des items se sont révélés comparables dans tous les groupes échantillons. La fiabilité des items s'est révélée un peu plus faible dans la version hébraïque. Toutefois, quand le test était interrompu lorsque le sujet n'avait pas réussi à réagir à trois items consécutifs, la fiabilité était semblable à celle obtenue chez les autres groupes échantillons. Nous en concluons que la version hébraïque de la SHSS:C peut être utilisée pour l'évaluation de l'hypnotisabilité et recommandons l'application du critère d'interruption.

JOHANNE REYNAULT
C. Tr. (STIBC)

Normas israelíes para la Escala de Susceptibilidad Hipnótica de Stanford: Forma C

Pesach Lichtenberg, Haim Shapira, Yuval Kalish, y Eitan G. Abramowitz

Resumen: Administramos una versión hebrea de la Escala de Susceptibilidad Hipnótica de Stanford: Forma C (SHSS:C) a 169 sujetos en Israel. Los autores compararon los resultados con aquellos obtenidos con la versión original en inglés administrada en los EEUU y con un grupo adicional de 38 sujetos de habla inglesa en Israel, así como con versiones traducidas al español (2 versiones, para España y para México), italiano, alemán, y holandés. Las medias y las correlaciones de rango en el pase de los reactivos fueron comparables entre las distintas muestras. La fiabilidad de los reactivos fue un poco inferior en la versión hebrea; sin embargo, cuando las escalas fueron descontinuadas después del fracaso de 3 reactivos consecutivos, la fiabilidad fue similar a la obtenida en las otras muestras. Concluimos que la versión hebrea del SHSS:C puede ser usada para la evaluación de la hipnotizabilidad y recomendamos que el criterio de interrupción sea urilizado.

ETZEL CARDEÑA
Lund University, Lund, Sweden