

Editorial

Psychiatry, 1884

The other day my son, Bill, an antiquarian book dealer, gave me a small gift he had found during one of his searches for interesting material. It was *The American Journal of Insanity*, Volume 1, Number 1, published in 1844 by Bennett, Backus and Hawley, edited by officers of the New York State Lunatic Asylum, Utica, New York.

This issue, the first one, is particularly interesting. We must know where we have been, if we are to know what we have done, and how far we have progressed. We can assume that the first issue of what eventually became the *Journal of the American Psychiatric Association*, describes the state of the art of psychiatry 150 years ago. After reading this issue, I have concluded that when it comes to insanity (schizophrenia and manic-depressive psychosis), we have not come very far.

This slim issue lists all the *lunatic* asylums in the U.S.A. by states, and refers to a few in Europe. Hospital statistics are shown, such as the number of patients admitted, the number of recoveries, the number who died, and the number still resident in hospital. The hospital in Utica opened in 1843. Over the next eighteen months it admitted 433, recovered (cured) 123, 13 died and 245 were still in hospital. The recovery rate was 28 percent. Other hospitals had better recovery statistics. The asylums of Augusta, Maine; Concord, New Hampshire; Brattleboro, Vermont; McLeans Somerville, Massachusetts; Worcester, Mass.; Boston Lunatic Asylum, Mass.; and Hartford, Connecticut, admitted 766 and recovered 365 (48 percent).

Our modern mental hospitals — even with the use of a variety of tranquilizers — certainly do no better, but it is impossible to know since they do not publish a statistic which includes "cured" or recovered. Most recent surveys in the U.S.A. show that of all schizophrenic patients discharged, only about 25 percent can be employed. I would think being employed ought

to be a major criterion for achieving a recovered state.

But one can argue that those doctors in 1844 were too simple, or naive, to really diagnose accurately, or to evaluate recovery scientifically. There is a tendency, all too common, to believe that anything done by our forebearers is inferior to anything done today. The material in this issue soon convinces any objective reader that the diagnostic skills of the doctors in 1844 were every bit as good as they are today, except we have proliferated diagnostic terms in our modern nomenclature to a ridiculous degree.

The majority of patients in 1844 were diagnosed insane. Ten case histories are recorded. It is pretty clear they would be diagnosed schizophrenic today, some with depression, some with excitation. They all showed changes in perception and thinking which are the hallmarks of schizophrenia. This horrible word was developed around 1900. The diagnostic word has changed, but not the disease.

How did they achieve 50 percent recovery rates, and why can't we achieve these today? Their method was to treat patients with decency and humanity, to provide proper food and to use a few nonspecific medicines. They had a major advantage in that modern junk food was *not* available to them. I doubt they had substantial numbers of patients allergic to dairy products, grains, etc. Schizophrenic patients with these allergies will not recover on tranquilizers unless their diet is corrected. This is almost never done in mental hospitals.

The doctors at Utica were very proud of their good results and of their institution. How many psychiatrists today are proud of their institutions? Most today would not be caught dead in a typical modern mental hospital. Thus they write, "... in New York State the poor are never sold at auction, as in many other states, to the one that will keep them cheapest," and "Lunatics are not kept in jails of this State." I doubt New York can make this claim today; nor can Canada. The local paper, March 21, 1990, carried a story headlined, "Penitentiaries being used to house mentally ill."

The Commissioner of the Corrections Service

of Canada complained the situation was becoming much worse, and he has set up a national task force to see what facilities and treatment should be made available within the system for those with mental problems.

I will quote from *The American Journal of Insanity* to show how the patients were treated.

"The watchman rings the bell at half-past four, in summer, and half-past five, in winter, when all in the employ of the Asylum are expected to rise and enter upon their various duties. The attendants open the doors of the patients' rooms, see that they are well, and assist such as require it, in dressing and preparing for breakfast. They also commence making the beds, cleaning the rooms, and sweeping the halls.

"One hour and a half after the ringing of the morning bell, breakfast is ready for our whole household. It is announced by a bell, ten minutes previously, that the tables may be arranged and the dining-rooms put in order.

"During meals the attendants wait upon the patients, and take their own meals from the same table afterwards. Sometimes, when all the attendants are not needed to wait upon the table, one or more eat with the patients."

"After breakfast the soiled dishes and plates are sent to the kitchen to be washed. The knives and forks, cups and saucers, are cleaned in the dining-rooms by the attendants, assisted by some of the patients. The rooms are then thoroughly cleaned, the beds made, and everything put in good condition. Those patients disposed to labor on the farm, in the garden, or about the halls and yards, or in the shops, are permitted to, and thus have rendered us much valuable assistance. Usually many more volunteer than we deem prudent to thus exercise. Those who do not labor, pass their time in various ways: in reading, playing ball, rolling nine-pins, or in walking and in attending school, which commences at 10 o'clock."

"At half-past twelve dinner is ready. After this meal the patients again engage in labor and amusements.

"The women work much of the time; they also

ride, walk, play battledore, and such as choose attend school.

"Six o'clock is the hour for tea. In the evening the halls are lighted with globe lamps, suspended from the ceilings. Tables are also supplied with lights, at which may be seen some reading, others playing cards, checkers, and conversing; and in the ladies' apartments knitting, sewing, singing, and reading.

"During the day the physicians, the matron and steward, pass frequently through most of the halls, visiting the sick, attending to particular calls or waiting upon visitors.

"At nine o'clock patients usually retire, many of them earlier, and by half-past nine all are in bed.

"On Sunday, no unnecessary labor is performed, and no diversions allowed; the patients are dressed in their best clothing, and a large majority attend the religious services in the chapel. Several assist in singing. In the evening we have a singing school."

Apparently someone had suggested developing an institution for incurables. This is what these authors said:

"Let no asylum be established but for the curable, and to this the incurable and the rich and the poor should be admitted.

"But admit freely the curable and the rich to the institution, and they have kindred who could and would travel after them, relatives who had eyes, aye and voices. They would constitute an active committee of vigilance to look into its affairs and see they were properly managed."

I would recommend that every resident in psychiatry should read this issue before they graduate. It might remove the dogmatism from modern psychiatry, and allow its practitioners to use any and every treatment shown to be helpful, and not to depend exclusively on modern xenobiotics.

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