

## Abstracts

### HISTORICAL ASPECTS OF PSYCHIATRY IN BRANDENBURG

**Beatrice Falk und Friedrich Hauer**

#### **It Began in the Empire: Views of a Century Hospital Görden**

*Summary:* The history of Görden hospital in Brandenburg mirrors the history of the 20<sup>th</sup> century – its social upheavals clearly affected its development. The *Landesirrenstalt*, as the hospital was named, was opened in 1914 and was immediately converted into a military hospital. During the Weimar Republic it served as a mental hospital where patients received good care. In Nazi Germany the *Landesanstalt* Görden became part of the Euthanasia program as a result of which many patients were killed or deported to killing centers. It was one of the Euthanasia centers in particular for children and adolescents, the so-called *Kindereuthanasie*. Its director Hans Heinze was one of the responsible persons. After liberation from Nazism the hospital became one of the major psychiatric-neurological clinics in the GDR, known for its reform efforts that the "Rodewischer Theses" and "Brandenburg Theses" stand for, without being in a position to give up on its concept of "*Verwahrpsychiatrie*." After German unification the hospital was privatized due to overall changes in health care policy.

*Keywords:* psychiatry in the 20th century, World War I, Euthanasia in Nazi Germany, psychiatry of the GDR

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**Horst Isermann**

#### **August Zinn (Eberswalde) of the German Association of Psychiatrists and his Dispute with the German Association of Pastoral Psychiatrists: A Criticism on Psychiatry at the End of the 19<sup>th</sup> Century**

*Summary:* In Antiquity and the Middle Ages psychiatric diseases were mostly attributed to disturbances of the brain (CNS). At the end of the 19<sup>th</sup> century there were indications that this conception was changing due to changes in the social structure of the population. Industrialization, poverty and mental stress were increasingly becoming evident. As a consequence some pastors felt themselves called upon to help mentally ill, whereby they believed that psychic disturbances were influenced or even caused by evil demons or ghosts. Psychiatrists with a more scientific background disapproved of this type of pastoral care. In 1890 a fierce dispute arose between pastorals and psychiatrists, which is the topic of this paper.

### PSYCHIATRY UND NEUROLOGY DURING THE NATIONAL SOCIALIST ERA

**Hans-Walter Schmuhl**

#### **History of Scientific Societies in National Socialism Based on the Example of Merging the German Society for Psychiatry with the Association of German Neurologists in 1934/35**

*Summary:* This article presents preliminary conventional and methodological considerations on a history of scientific societies in National Socialism from the author's ongoing research project on the Society of Ger-

man Neurologists and Psychiatrists. The point of departure is the premise that “science” and “politics” do not constitute strictly separated societal sub-systems; indeed, at the interface between science and politics hybrid networks emerge that organise the exchange of resources between the two systems. In order to understand this, the organisation’s history is addressed using a network analytic approach. The sustainability of this conceptual methodological approach is to be demonstrated using the example of the negotiation processes that preceded the merger of the German Society for Psychiatry with the Association of German Neurologists in 1934/35.

*Keywords:* network analysis, German Society for Psychiatry (Deutscher Verein für Psychiatrie), Association of German Neurologists (Gesellschaft Deutscher Nervenärzte), Association of German Neurologists and Psychiatrists (Gesellschaft Deutscher Neurologen und Psychiater), science policy in Nationalocialism

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**Hendrik van den Bussche**

### **The Intended Deprofessionalization of Neurology Under National Socialism: The Current Debate**

*Summary:* In 1934 the National Socialist regime forced the scientific societies of neurology and psychiatry to merge into one, i.e., into the Society of German Neurologists and Psychiatrists. The relationship between this new society and the Nazi regime as well as the internal communication between its two branches has in the past been analyzed in several studies with divergent results. In the study presented here, divergent research concepts and policies between the two former independent societies were identified. This dissent lead to continuous frictions rather than to common strategies. As a consequence the two parts were not able to cooperate. The psychiatric branch acted as an active promoter of racial biology and hygiene which led to a cooperative relationship with the Nazi-led state, whereas the branch of neurology was largely able to distance themselves from racial hygiene in research and clinical care while continuing to work using traditional scientific standards. As a result, neurology was able to avert its degradation into an auxiliary diagnostic instrument for race hygiene as intended by the psychiatrists. This study is based on protocols of presentations given at the scientific meetings of the new Society from 1935 to 1939 with special reference to the question of heredity of epilepsy as the main neurological indication for compulsory sterilization. The study shows that neurology and psychiatry during the „Third Reich“ should not be treated as an entity and/or to assess the relationship between neurology and the regime as one of mutual cooperation. Moreover, it shows that it was indeed possible for a medical discipline to largely avoid and bypass its subordination under the dictate of National Socialism.

*Keywords:* National Socialism, neurology, psychiatry, racial hygiene, eugenics

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**Hendrik van den Bussche**

### **Lack of Personell, Identity Crisis and Self-Deprofessionalization of Psychiatry Under National Socialism**

*Summary:* In a previous article of this journal it was shown that neurology and psychiatry as disciplines differed substantially in their willingness to apply race hygiene in their research and clinical care. Whereas neurology was largely able to distance itself from racial hygiene and based its work largely on traditional scientific standards, psychiatry acted as an active promoter of racial biology and hygiene by actively participating in compulsory sterilization and “euthanasia” programs of the Nazi regime. This essay aims to further clarify the cooperation between psychiatry and National Socialist policy during WWII. Parallel to its declining prestige, psychiatry was not able to recruit enough physicians, which lead to a dramatic shortage of medical personnel at the end of the war. Psychiatrists were struggling to recruit young academics even before the war. It is also argued that the “dialectics of healing and killing” is a chimera because until the end of the war new shock therapies hardly were spread and applied in psychiatric hospitals. At the end of World War II, Psychiatry had deprofessionalized itself as a discipline.

*Keywords:* National Socialism, euthanasia, psychiatry, racial hygiene, electroshock therapy

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**Hendrik van den Bussche**

**Deprofessionalization till the bitter end: Maximilian de Crinis and the forced suppression of neurology as a examination subject in National Socialist medical education**

*Summary:* This short study describes the significance of neurology in the regulations on medical education under National Socialism and particularly how National Socialist psychiatrists managed to keep it low.

*Keywords:* National Socialism, neurology, psychiatry, medical education

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**Ernst Holzbach**

**Gottfried Ewald and the Euthanasia in the Third Reich**

*Summary:* This article shall draw attention to a psychiatrist who tried to restore the „honor“ of German psychiatry in the darkest chapter of European psychiatry. Gottfried Ewald was the only one among the directors of universities and medical establishments who refused to cooperate with the Euthanasia action “T4” of the National Socialists. He formulated his arguments in the form of a letter, which he sent to responsible authorities. The appreciation of Ewald up to now rather focuses on his entire personality while his position of resistance does not receive adequate attention. Even after his advancement failed and he had to consequently try to limit the damages by taking on a compromising position, his engagement must nonetheless be highly appreciated. It can be compared to the engagement of Cardinal von Galen in this regard and thus, probably both personalities had a significant influence in the T4-Aktion being stopped.

*Keywords:* history of psychiatry, Euthanasia, “T4-Aktion”, National socialism

**HISTORY OF NEUROLOGY AND NEUROPATHOLOGY**

**Johannes Rösche**

**Epileptic Seizures and Psychogenic Nonepileptic Seizures in Felix Platter’s System of Psychopathology**

*Summary:* Systematic descriptions of epileptic seizures have existed for three thousand years. The first descriptions of behavioral disorders in women, which were referred to as a pathology of the uterus, are even a thousand years older. Relying on 21 case reports from the early 17<sup>th</sup> century, this paper shows that the definition of epileptic seizures of that time and the organic concept of hysteria resulted in a diagnostic relationship of clinical syndromes different from ours. Simple partial seizures are not classified as an epileptic phenomenon, yet fits with an apparent loss of consciousness and psychogenic triggers are considered as epileptic. Deadly conditions of cardiac failure are classified as hysteric when there are hints of a pathological state of the uterus. The paper shows that changing definitions and pathophysiological concepts have lead to a different signification of modern diagnostic terms concerning epileptic and nonepileptic psychogenic seizures. Particularly the definition of an epileptic seizure as an electroclinical entity resulted in substantial changes in diagnostic criteria.

*Keywords:* Epilepsy, Hysteria, Platter, electroclinical syndromes, case reports

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**Hans Dieter Mennel**

**Emil Kraepelin's Legacy: What Remains?**

*Summary:* Emil Kraepelin, one of the important founders of psychiatry, was multi-faceted: textbook editor, father of the dichotomy of endogenous psychoses, protagonist of experimental psychology in psychiatry and scientific promoter and founder of the *Forschungsanstalt für Psychiatrie*. One aspect of Kraepelin's activities is often neglected: promoter of neuropathology. In the past years Kraepelin received a great amount of attention. His multidisciplinary approach towards psychic illness continues to be cultivated in the *Forschungsanstalt* – today Max Planck Institute – with a special emphasis on neurobiology. The basis was provided by Kraepelin himself, he attracted the leading neuropathologists of the time at this place, especially Franz Nissl, Alois Alzheimer and Walther Spielmeier. "Morphology" however was a longstanding tradition in Munich due to Anton Bumm or Bernhard von Gudden. The leading idea of the biologic contemporary psychiatry, namely to explain psychosis as analogous to the paralysis of the insane as somatic, had gained a new quality in the lifetime of Emil Kraepelin: The discovery of the causative pathogen now confirmed the paradigmatic role of this disease in psychiatric research. Consequently, Emil Kraepelin and his follower Felix Plaut investigated this condition during a trip to the United States, one of the last activities in Kraepelin's life. "At home" Walther Spielmeier completed his studies concerning the histopathology of the nervous system. This work became the basis for understanding degenerative diseases and somatic psychoses in the nervous system. Thus, as a result of his dedication to morphological methods, Kraepelin greatly promoted a scientific field, which is currently experiencing a boom. It could well be that this line of work may remain his most important contribution, despite the fact that this was by no means his primary approach to the topic.

*Keywords:* Morphology, Neuropathology, Emil Kraepelin, Psychiatry in Munich

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**Bernd Holdorff**

**Contributions and Relationships of the Brain Researchers Cécile and Oskar Vogt to Clinical Neurology**

*Summary:* At the beginning of their brain research the Vogts had to realize that in Berlin there were some adversaries in the academic field. Their relationship to neuropsychiatric societies (i.e., *Berliner Gesellschaft für Psychiatrie und Nervenkrankheiten*, *Gesellschaft Deutscher Nervenärzte*) were not free from tensions. Some neurologists cooperated with them, e.g., Hermann Oppenheim cooperated with Cécile in identifying the athetose double and its morphological substrate of status marmoratus (1911), acknowledging the previous work of Gabriel Anton. Their following studies on the striatal system led to the systematic work on extrapyramidal diseases (basal ganglia diseases) in 1919/1920, 1922, 1936 and 1942. In 1953 their former co-worker Rolf Hassler performed a profound clinical and pathophysiological reassessment. Other colleagues they cooperated with were the localizers Hugo Liepmann, Otfried Foerster and Karl Kleist from the neuropsychiatric school of Carl Wernicke in Breslau. Liepmann used the Vogt laboratory for big brain slices in his apraxia studies, Foerster transferred their cortical brain maps of apes to human cortical surgery since 1919, Kleist localized mental functions on the Vogt-Brodmann map (1934, „*Gehirmpathologie*“). The cooperation of the Vogts with municipal hospital complexes in Berlin-Prenzlauerberg since 1919 and Berlin-Buch since the end of the 1920s, produced only a few clinical and neuropathological contributions. The brain research conducted by the Vogts was more directed towards the systematic (= topistic) lesion patterns and to the fine structure variations in relation to soul and mind aberrations like schizophrenia, genius and criminality in elite and criminals, corresponding to supposed psycho-physical parallelism.

*Keywords:* Cécile and Oskar Vogt, brain mapping, striatal and other basalganglia diseases

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**Volker Wunderlich**

**The Brain Researcher Elisabeth Beck (1907–2002) – Forced to Flee from Germany – Later Successful Scientific Career in England**

*Summary:* Following training to become a technical assistant and work at the Brain Research Institute in Berlin-Buch and the University Psychiatric Clinic in Frankfurt am Main, in March 1939 Elisabeth Beck managed to emigrate just in time as a Jew from Germany. After that, she contributed significantly to the research work of neuropathologist Alfred Meyer on prefrontal lobotomy and temporal lobe epilepsy at Maudsley Hospital in London. Beck became particularly well known through her research on lethal degenerative diseases of the central nervous system in animals (scrapie) and in humans (kuru, Creutzfeld-Jakob disease), which today are referred to as prion diseases. In collaboration with the later Nobel laureate D. Carleton Gajdusek (USA), she provided clear evidence for the transmissibility of these spongiform encephalopathies based on neuropathological and ultrastructural criteria. Until 1952 Beck worked as medical-technical assistant, then she became a research assistant and in 1964 a lecturer at the University of London. In 1983 the Medical School of the University of Frankfurt am Main awarded her an honorary doctorate. She was an honorary member of the British Neuropathological Society. Even in her older years, Elisabeth Beck continued to be active in research in London.

*Keywords:* Neuroanatomy, lobotomy, prion diseases, Alfred Meyer, D. Carleton Gajdusek

## HISTORICAL ASPECTS OF BRAIN SURGERY

**Detlef Ernst Rosenow, Hans Joachim Synowitz und Michael Synowitz**

**The Loss of Neurosurgical Workplaces in Berlin in 1945 and the Reconstruction in the Early Postwar Period**

*Summary:* Before the end of WWII in May of 1945, Berlin harbored four hospitals with neurosurgical activities (Augusta-Hospital, Westend-Hospital, Spandau Hospital, Surgical Clinic of the Charité) and an independent department of neurosurgery which opened in 1937. These facilities are associated with names like Carl Max Behrend (1895–1963), Fritz Hartmann (1900–?), Willi Felix (1892–1962), Franz Johann Irsigler (1903–1994), Herbert Peiper (1890–1952), Ernst Ferdinand Sauerbruch (1875–1951) and Wilhelm Tönnis (1898–1978). By the end of the war these facilities were destroyed or orphaned. The continuation or decline of neurosurgical activity in the respective facilities was directly related to the structural and functional state of the hospitals and the fate of its director. The Augusta Hospital was closed by order of the soviet military government due to its previous ownership (German Red Cross) and the heads of the neurosurgical department and the surgical clinic of the Westend Hospital did not return to Berlin but rather started new careers in West Germany. Brain surgery was performed at a reduced level only at the Charité and Spandau hospitals in 1945/1946. However, reorganization started in 1946 in the British sector of Berlin with the establishment of a neurosurgical department in the Westend Hospital, headed by Arist Stender between 1946 though 1969, and in 1954 with the establishment of a department of neurosurgery in Eastern Berlin (Hufeland Hospital Berlin-Buch), with the short-term occupation of Oscar Ammermann and Friedrich Weickmann, who succeeded him as director between 1954–1979.

*Keywords:* Neurosurgery , Berlin, 1945, Ammermann , Felix, Stender, Weickmann

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Michael Synowitz, Detlef Ernst Rosenow und Hans Joachim Synowitz

### A Historic Review of Decompressive Trephination of the Skull

*Summary:* Decompressive trephination of the skull as a palliative therapeutic procedure in the 19<sup>th</sup> century has to be placed in relationship to the clinical diagnostic standards on the one hand and the technical development of surgical instruments on the other. Theodor Kocher (1841-1917), Victor Horsley (1857-1916) and Harvey Cushing (1869-1939) are the protagonists who introduced the clinical indications to perform this decompressive surgical procedure with the aim of relieving elevated intracranial pressure in given diseases such as premature ossification of cranial sutures, epilepsy, cranio-cerebral injury, intracranial space-occupying lesions and inflammatory diseases of the brain such as brain abscess. However, there was no consensus regarding the site of trephination, the size of the bony defect needed and the extent of brain herniation occurring postoperatively. This surgical technique was regarded obsolete and completely lost its relevance in surgical practice in the first two or three decades of the 20<sup>th</sup> century. However, decompressive skull trephination regained some clinical importance in the treatment of traumatically or vascular induced intracranial hypertension since the mid 1990s.

*Keywords:* decompressive skull trephination, Kocher, Horsley, Cushing, brain pressure reduction

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Hartmut Collmann

### A Craniosynostosis Syndrome and German History

*Summary:* The Saethre-Chotzen syndrome is the second most common genetic craniosynostosis syndrome. Phenotypic features vary and include uni- or bilateral premature fusion of the coronal suture with a tendency to progressive multisutural involvement, osseous defects of the parietal cranial vault and minor abnormalities of the mid-face, eyelids, fingers, big toes and the vertebral column. In 1931 the syndrome was first described as hereditary by the Norwegian psychiatrist Haakon Saethre (1891–1945). In 1932, Fritz Chotzen (1871–1937), a psychiatrist in Breslau (now Wrocław), independently recognized the same disorder in a German family. During his time Haakon Saethre was a leading figure in Norwegian neurology and psychiatry. His scientific interest included cerebrospinal fluid analysis, alcoholism and mental alterations resulting from brain injury. Also, he pioneered the subspecialty of mental hygiene. Fritz Chotzen was head of the municipal psychiatric hospital in Breslau, in this function succeeding Carl Wernicke and Ernst Hahn. As consulting physician of the municipal schools for the handicapped he dealt with psychometric tests and the training of special school teachers. Beyond their incidental relation as eponyms both authors are linked by the dark side of German history: In 1933, Chotzen was ostracized as a Jew and lost his job and his livelihood. In blank desperation he committed suicide. Haakon Saethre, who was active in the Norwegian resistance against German occupation, was shot in reprisal a few months before the end of the war.

*Keywords:* Haakon Saethre, Fritz Chotzen, craniosynostosis, acrocephalosyndactyly, National Socialism

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Lara Rzesnitzeck

### The timing of the introduction of psychosurgery in Germany has seldom been questioned

*Summary:* The question concerning the timing when psychosurgery in Germany was introduced has seldom been asked. However, thinking about the chronology of the introduction of leucotomy may shed new light on the hypothesis that German psychiatry had a special “radical” way of treating mentally ill persons during National Socialism. For this purpose a survey of the journals and national and international congress reports of the concerned medical specialties such as psychiatry, neurology and neurosurgery will be read against archive material from German, French and American universities.

*Keywords:* psychosurgery, leucotomy, lobotomy, National Socialism

## HISTORY OF PSYCHIATRY AND RELATED FIELDS

**Kai Sammet**

### **„Typical paralytical reactions“: Experimental Psychology, General Paralysis and Malaria Therapy in Hamburg-Friedrichsberg 1920–1922**

*Summary:* Since 1917 patients afflicted by general paralysis were treated with malaria infections, a therapy developed by Julius Wagner-Jauregg. This treatment was implemented since 1919 in Hamburg-Friedrichsberg where some patients treated with malaria were also tested in the psychological laboratory run by Ernst Rittershaus. In exploring 27 cases of infected and psychologically tested paralytics the paper discusses the possible functions of this testing in the therapy of general paralysis.

*Keywords:* Experimental psychology in psychiatry, asylum Hamburg-Friedrichsberg 1920–1922, general paralysis of the insane, malaria therapy, Ernst Rittershaus

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**Jan Armbruster und Kathleen Haack**

### **The Death Sentence Against the Child Murderer Ludwig Tessnow (1872–1939) and the Struggle Between Law and Psychiatry on the Assessment of his Accountability**

*Summary:* At the end of the trial against the carpenter Ludwig Tessnow, who murdered four children, the Greifswald court sentenced him to death despite the unanimous opinion of the psychiatric experts who had diagnosed Tessnow to not have been in a state of mind capable of making self-determined choices (free will). The same verdict was confirmed in a retrial. Circumstances that lead to the court decisions were of complex nature: they were not only influenced by the after-effects of the basic conflict that existed between judges and medical experts on the interpretational sovereignty of mental capacity in the 19<sup>th</sup> century, but also by the inadequate quality of expert opinions, the integration of lay judges into their activities and the demands of public pressure groups. Although the death sentence was in the last instance altered to life imprisonment and Ludwig Tessnow was admitted to a psychiatric hospital on account of his mental condition, the case nonetheless reveals open questions which, even from today's perspective, cannot be answered conclusively.

*Keywords:* Ludwig Tessnow, history of forensic psychiatry, mental capacity, death sentence

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**Heinz Häfner**

### **Reform of Psychiatry in Germany: The History, Execution and Consequences of the Enquête-Commission of Psychiatry – A Report from the Field**

*Summary:* No other event in the history of medicine has improved the life and care of psychiatric patients as decisively as the Enquête Commission for reforming mental-health care in West-Germany between 1971 and 1975. Before this radical step Europe had transitioned from supporting a welfare policy that locked away mentally ill persons to becoming a medical model with the birth of psychiatry in the 19<sup>th</sup> century. That social change had triggered an enormous need for care at the turn of the century, leading to the creation of numerous public asylums for mentally ill in Germany. A lack of knowledge on the causes and treatment of mental disorders and a belief that mentally ill persons were dangerous created a system of long-term closed and confined care. In 1945, after the war and the mass murder of mentally ill persons, psychiatry was not trusted anymore. The remaining asylums were overcrowded and mostly in a state of decay. There was a shortage of staff, of young talent, of everything. Reforming the system had become inevitable. The analysis and suggestions contained in our 1965 memorandum were still overheard. The speech the CDU Member of Parliament Walter Picard gave to the Bundestag on April 17 in 1970 provided the political impetus for re-

form. In 1971 the Enquête Commission was set up, Prof. Kulenkampff appointed its chairman and the undersigned deputy chairman.

*Keywords:* Psychiatric reform in former West Germany; Enquête Commission of Psychiatry; Rodewisch theses; social psychiatry; effects of the Enquête

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**Joachim Heinrich Demling**

### **The Serotonin Story Part 1: Discovery of the Substance and its Significance for Psychiatry**

*Summary:* This review article describes the history of how both enteramine (serotonin, 5-hydroxytryptamine, 5-HT) and its importance for psychiatry were discovered. Between the beginning of the 1930s and the end of the 1940s two different lines of research (functional anatomy of the gastrointestinal tract and physiology and pathophysiology of arterial vascular tone) led to the discovery of the substance (1948), some of its physiological functions and to the elucidation of its chemical structure. The hypothesis was confirmed that 5-HT might act not only as a hormone but also as a neurotransmitter in the peripheral and central nervous system. The chemical relationship of 5-HT to hallucinogens such as lysergic acid diethylamide (LSD) raised speculation about the involvement of 5-HT in the pathophysiology of mental disorders, whereby initially schizophrenia were the focus of attention and from the 1960s on predominantly affective disorders. The findings gained here and on the pharmacological mechanism of antidepressant medicines (reuptake inhibition, etc.) formed the basis for the development and the therapeutic use of serotonergic substances, which proved to be an important advance in the pharmacological treatment in particular of affective and anxiety disorders.

*Keywords:* serotonin, enteramine, discovery, history, psychiatry

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**Reinhard J. Boerner**

### **“Melencolia I” by Dürer (1514): An Analysis in Terms of Art History, Psychiatry and Psychology in the Context of Melancholic Theories in Middle Ages and Renaissance**

*Summary:* Even today Dürer’s copper engraving fascinates. An overview of the discussion in art history will be provided after a reception of the main melancholy theories of the Middle Ages and Renaissance. In this context the dialectic of human greatness and powerlessness seems to be Dürer’s central idea. Elements of Dürer’s idea can be identified in psychiatric and psychological theories of temperament of the 20<sup>th</sup> century.

*Keywords:* Dürer Melencolia I, Temperament, Melancholia, art history

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## **HISTORY OF PSYCHIATRY IN AUSTRIA**

**Gustav Schäfer**

### **The Development of Psychiatry and Mental Health Care in Vienna in the First Half of the 19<sup>th</sup> century. With a View on the Life of Michael of Viszanik (1792–1872)**

*Summary:* In 1839 Michael Viszanik freed patients from their chains in the *Narrenturm* of Vienna. He was a philanthropist, benevolent humanist and founded and led humanitarian associations. He helped psychiatry to become accredited as an academic discipline and held the first lecture in psychiatry. He was a popular and respected academic teacher among his students. Viszanik wrote, inter alia, three works based on his knowledge and experience in order to improve the misleading nature. He received many honors in his lifetime and was knighted for his services. What ideas for reform were there during the time of Viszanik in order to



bring in a change for instance in misperceptions as a result of the construction of the Narrenturm – the "first asylum in the world" – in the treatment and care of mentally ill patients?

*Keywords:* Viszanik, Narrenturm, psychiatry, reform, Vienna asylum

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**David Freis**

### **Trust and Subordination: The Psychotherapeutic Outpatient Clinic of the University of Vienna, 1918–1938**

*Summary:* The history of psychotherapy in the first third of the 20<sup>th</sup> century is inextricably linked to the history of Vienna. Two of the most important psychotherapeutic schools – Freudian psychoanalysis and Adlerian individual psychology – emerged here. Both approaches had to establish themselves outside of the medical school of the University of Vienna, where the new psychodynamic theories were usually treated with scorn and rejection. This opposition has been the key theme in much of the historiography of psychotherapy. However, it has usually been overlooked that psychotherapeutic methods were nonetheless in use at the psychiatric university clinic. In particular in 1922 a psychotherapeutic outpatient clinic was founded at the university clinic in direct opposition to the better-known psychoanalytic *Ambulatorium* established in the same year. In the course of the following decade, almost 2000 patients were treated here. This paper examines the history of the psychotherapeutic outpatient clinic and its protagonists from two angles. A first part deals with the outpatient clinic itself, situating its founding against the backdrop of both the psychiatric experiences of WWI and the growing competition between the medical school and the psychoanalysts. The second part focuses on the psychotherapeutic methods that were used at the outpatient clinic. Together with Erwin Stransky, the clinic's director Heinrich Kogerer called for a medical psychotherapy exclusively applied by physicians. They did not only envisage a pragmatic and eclectic alternative to the psychodynamic schools, but also a right-wing answer to social-democrat individual psychology and liberal psychoanalysis. Both Kogerer and Stransky saw the physician as an active leader who could serve as a role model for the patient. The aim of the treatment was the restoration of self-control, through which the patient could then be reintegrated into an organic, hierarchic community.

*Keywords:* Psychotherapy, Interwar Period, Erwin Stransky, Heinrich Kogerer, Austria

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**Eberhard Gabriel**

### **Orientation(s) of Austrian Psychiatry from 1945 to the mid-1950s**

*Summary:* During the last years the elucidation of the history of Austrian psychiatry after WWII primarily dealt with the heritage of National Socialist euthanasia and sterilization programs. Important but rare markers of processing these events go back to the 1980s of the last century, yet a more comprehensive presentation of Austrian psychiatry during the postwar-period was missing. An important scientific event occurred in June of 2014 when the Society of Social History of Medicine (Verein für Sozialgeschichte der Medizin) together with partners organized a three-day symposium on „Society and Psychiatry in Austria 1945–1970“. Only publications about particular institutions and important personalities are not that rare. An interdisciplinary group lead by historians in Innsbruck, Tyrol currently seems to be the most active on this subject.

The aim of the present paper is to describe and compare the orientation of post-WWII psychiatry in Austria at three university centers located in Vienna, Graz and Innsbruck, specifically with respect to leading personalities and their research interests. What becomes evident is a focus on ‚psychotherapy‘ both in teaching and less in institutional development. The university centers are chosen because of the better access to historic sources there. One can assume that the university centers influenced the field of psychiatric care also in the mental hospitals (although that can be confirmed only with limitations).

*Keywords:* Psychiatry in Austria 1945–1955, orientation of post war II university psychiatry, Austria 1945–1955

PATIENT HISTORY / PATIENT STORIES

Uta Kanis-Seyfried

**Life Between Disease and Normality: The Psychiatric Patient and Village Photographer Friedrich Pöhler**

*Summary:* Friedrich Pöhler, who created remarkable photos between 1909 and 1910, suffered from a psychiatric disorder and alcoholism as a result of which he was repeatedly treated in various psychiatric asylums throughout his life. The reappraisal of his biography shows that he belonged to a special patient group in the asylums of the 19<sup>th</sup> and early 20<sup>th</sup> centuries, which has not been noted and investigated in detail yet. Friedrich Pöhler was regularly in medical care of psychiatric asylums at his own request. Again and again he succeeded in breaking the administrative canon of rules and in creating privileges for himself in everyday asylum life. Where other people came up against the limits, Friedrich Pöhler was able to extend these bounds by skillfully written interventions and adapting them to his individual needs.

*Keywords:* Psychiatry, voluntarily, bounds, intervene, Privileges

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Bernd Reichelt

**From Alsace to the Swabian Alb: The Striking Fate of the Alsatian Mason Joseph Brunck in Psychiatric Asylums in Alsace, Baden and Württemberg (1929–1967)**

*Summary:* Joseph Brunck was born in Hoenheim, Alsace in 1892 and fought for the German Reich in WWI. In 1929 the mason Brunck was hospitalized in the mental hospital in Rouffach because of a schizophrenic disorder. In 1933 he was deported to Germany where he was hospitalized in a public mental hospital, the Heil- und Pflegeanstalt Illenau. After he was transferred to the Pflegeanstalt Rastatt in 1934 he then was moved to the mental hospital in Zwiefalten and for a short time to Heil- und Pflegeanstalt Reichenau at Constance. In 1940 Joseph Brunck was one of very few patients who returned from Grafeneck, the facility in which more than 10,500 mentally ill persons had been murdered. For 25 years starting in 1942 he lived in psychiatric family care on a Swabian farm close to Zwiefalten. His life outlines the changes in the history of psychiatry in Alsace, Baden and Württemberg.

*Keywords:* psychiatry, psychiatric family care, National Socialism, euthanasia, World War I

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Hans-Otto Dumke

**Gustav Mesmer – The Ikarus from the Lautertal**

*Summary:* This is a report about the mentally ill “flying-bicycle-builder” Gustav Mesmer who was admitted to the sanatorium Schussenried after disturbing a confirmation celebration in Altshausen/Wuerttemberg in 1929. Despite several discharge requests and attempts to escape he stayed there until 1949. While in Schussenried he started drawing and creating various flight models. In 1949 he was moved to the psychiatric hospital Weissenau where he wrote his auto-biography in 1962 as well as numerous poems and created a number of musical instruments. In 1964 he was moved again to a nursing home in Buttenhausen in the Swabian Alb where he began testing his flight models. Mesmer died of old age in 1994 in Buttenhausen. His life was honored in various films, songs, books, plays and exhibits. His auto-biography is characterized by the interdependency of internal and external constraints; it introduces the “different” and “strange” in one’s own culture and displays the individual survival strategy of a mentally ill person.

*Keywords:* stationary psychiatric therapy, drawing and creating various flying models and music instruments, autobiography, creating poems

MISCELLANEA

**Roland Schiffter**

**Wisdom and delusion in Friedrich Nietzsches works of 1888**

*Summary:* In Nietzsches works of 1888 (Götzendämmerung, Ecce Homo, Nietzsche contra Wagner) you can find many psychopathological symptoms of progressive paralysis of the insane: Euphoria, megalomania, confusion. It's necessary to differ this symptoms from his philosophical statements. His neurological illness began in 1887/88.

*Keywords:* Nietzsche's works of 1888, megalomania, confusion

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**Hermann Menger**

**Personality and Apoplexia of Frederic William IV: A Turning Point in Prussian-German History?**

*Summary:* Frederic William IV was born October 15, 1795 and was King of Prussia from 1840 to 1861. As crown prince he had no choice but to become king, yet at the same time he wanted to remain true to himself. His elusive personality is basically a result of these contrasts. Especially the shock of the revolution in 1848 seemed to deeply affect him which is why Prussian home affairs and foreign policy were no longer straight-forward and predictable during the 1850s. Beginning in 1853 he showed first signs of memory loss and phases of exhaustion and passiveness, which alternated with phases where he was extremely irritable and disgruntled. On July 14, 1857 he suffered an apoplectic stroke after which he started to increasingly lose contact to his office. That is the reason why his brother Prince William was authorized to become his deputy on October 23, 1857. Due to continued apoplectic strokes that Frederic William IV suffered his brother was finally charged with the regency on October 7, 1858. Considering current medical findings, Frederic William IV suffered from an undulated progressive course of cerebral arteriosclerosis in the context of numerous vascular risk factors, which resulted in repeated apoplectic strokes. These led to his complete physical and psychological immobilization until he died on January 2, 1861. The development of his disease is illustrated according to the observations made by his wife Queen Elizabeth of Prussia, generals Leopold von Gerlach and Kraft zu Hohenlohe-Ingelfingen. The descriptions broach the issue of his doctors, for example his medical attendant Johann Lukas Schönlein, which are reconstructed up to the documented autopsy. The article will discuss neurological differential diagnoses from today's point of view and resulting political impacts will be addressed.

*Keywords:* Frederic William IV., Apoplexia

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**Stephan Jaster**

**Georg Trakl – Genuine Synesthete?**

*Summary:* This article raises the question of whether Georg Trakl was a genuine synesthete. By means of Trakl's vita and the history of synesthesia research as well as the differentiation to synesthesia in art, literature and music we have to assume that Trakl probably was not a synesthete since he used synesthesia as a stylistic device. Trakl was addicted to multiple drugs.

*Keywords:* Georg Trakl, History of Synesthesia

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**Mandy Palme**

**Social Psychiatry in the GDR: Reform Movements Between Medical Sciences and Socialist Society**

*Summary:* The concepts of social reform within psychiatry in the GDR at the beginning of the 1960s had different objectives. On the one hand they claimed to improve psychiatric care in general, and on the other the aim was to create specialized methods of therapy and treatment. The realization for the necessity of reforms contained the criticism of the existing social structures and of the institutionalized Marxism-Leninism of the sciences. With respect to social psychiatric approaches toward reform, it was beyond question that unilateral science-oriented concepts within the medical discourse had to be overcome. The human being and his social relationships as well as the knowledge about the psycho-social coherencies of mental illness were increasingly being emphasized. Considered as a Western capitalist medical theory, it was harmonized with the prevailing Marxist-Leninist assumptions and in effect it was placed on a new methodological foundation. As the Marxist-Leninist concept of humankind viewed the human being as both biological and social, this dialectic perspective paved the way for legitimating social-psychiatric approaches. On this basis, the understanding of disease had finally changed: medical concepts were supplemented by anthropological ones.

*Keywords:* psychiatry in the GDR, social-psychiatric concepts, institutionalized Marxism-Leninism, critic on the structures of socialistic society, anthropological supplements

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