THE ROLE OF PSYCHOANALYSIS IN THE PREVENTION OF NERVOUS AND MENTAL DISEASES*

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In his introduction to the English edition of Bleuler's Text Book of Psychiatry, Dr. George H. Kirby made the following significant remark: ""The book marks a notable advance in psychiatry, in that it emphasizes sharply the contrast between the older descriptive psychiatry of Kräepelin and the newer interpretative psychiatry of the present time, which utilizes the psychoanalytical principles and the general biological viewpoints developed by Freud and his pupils, in Europe, and by Meyer, Hoch, White, and others, in this country.'"

Dr. Kirby's remarks naturally recall the status of psychiatry in this country before the advent of Bleuler, or, rather, of Freud. The courses in psychiatry, in the medical schools, if there were any, amounted to almost nothing, conservatively speaking. Thus, in the College of Physicians and Surgeons, New York City, we received a few clinical lectures (four or five) on the whole subject of psychiatry. We were told about mania, melancholia, paranoia, and general paresis, and clinically, we were shown a few patients, who furnished the most interesting part of the whole course. The cases selected were calculated to present insanity, in the popularly accepted sense, and the patients always acted the part. A few years later, one of these patients was under my care, in the Central Islip State Hospital. Fisher was an ordinary manic-depressive patient, of the hypomanic type, who never gave me any trouble; but when I first saw him, at the Vanderbilt Clinic, as a living illustration of mania, he carried on in the most excited and crazy manner. He sang, screamed, jumped and danced around like a crazy chimpanzee. Not only were we impressed with the truth of the popular conceptions of the bizarre lawlessness of the maniacs, but following

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such a clinic, the idea of insanity and the State hospital became more or less repellent to us. One of my fellow students, knowing that I contemplated entering the State hospital service, exclaimed, "And you are going to live with such 'loons'. You'll become crazy yourself!" This remark re-echoed in my mind, until I became disillusioned, through actual contact with patients. Later on, Fisher told me that Dr. Wright, who brought him from Ward's Island, urged him to give a good show to the students. The students were not told to read any text books. Dr. Starr's notes on neurology, which we all studied, contained also some pages devoted to insanity. This is not recounted with the idea of criticism. In its primitive form it was as good an attempt at psychiatric instruction as prevailed at the time.

Things were quite different in the State hospital in 1903. Dr. Adolph Meyer, with his able assistants, were laboring hard to arouse some interest in psychiatry, by acquainting us with the modern psychiatric viewpoints then in vogue in German-speaking countries, and especially with the works of Kraepelin. The younger physicians followed him implicitly, but some of the hard-boiled old timers offered all the resistance they could muster, to these "new fangled methods." "Why write so many notes and waste so much time," they reiterated. "What's the good of it?" An occasional note of "Dull, stupid, and demented," was so much simpler than a long description, on the basis of close observation, as demanded by the examination schemes issued by the "Pathological Institute." However, most of us enthusiastically accepted the newer psychiatry, taught by Meyer, and very soon the New York State hospitals compared very favorably with most of the European hospitals. Nevertheless, after working with these methods for a number of years, things became a bit monotonous. The patients were examined and fully described, à la Kraepelin, Meyer, and with an occasional sprinkling of Wernicke, Zieben, and others, and then transferred to no particular ward. If the patient improved sufficiently to be discharged, he was sent home for a while; usually he remained in the hospital.

As for the neuroses, one could hardly speak of classification in 1903. Most of them were thrown into the waste basket of hysteria and neurasthenia and explained on an organic basis, the influence