THE TREATMENT OF SCHIZOPHRENIA

A Survey of the Literature

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Not long after Kräepelin attempted to define the mental disorder which he called dementia praecox and now more generally known as schizophrenia, there followed not only a general awakening of clinical interests but gradually a more rational therapeutic attitude began to manifest itself in psychiatry. This condition was brought about in a relatively short time following the more or less general adoption of Kräepelin nosology. Indeed, in 1903, that is, within one decade of the first appearance of Kräepelin’s classification, Adolf Meyer was already inculcating a hopeful standpoint towards the reaction types included in the dementia praecox group. Even now it is only a little over a quarter of a century ago that therapeutic interests began to assume a positive character. Each year since that time inquiries into the various aspects of schizophrenia have taken on an added significance, to the extent that the condition is no longer enshrouded in abject hopelessness, but, on the contrary, is viewed with encouragement. Results that were previously unattainable have cast a favorable ray of hope in the direction of therapy, quite apart from the still obscure etiology. The psychobiological doctrines of Meyer and of Hoch have contributed a means by which something of a positive and favorable nature may be accomplished. A somewhat analogous situation is presented in patients with general paralysis, in that successes of varying grades are encountered under the malarial form of therapy; a certain number of subjects with general paralysis gains states of remission and a certain percentage of schizophrenic individuals are likewise restored to their prepsychotic level of adaptation. Others in both groups are entirely uninfluenced by treatment and between the two extremes there are all gradations of response. It was only a short time ago that the fatalistic attitude towards general paralysis and schizophrenia was rendered untenable. In the latter instance this was accomplished by the removal of the tendency to diagnose cer-