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Myth and Forgetting: Bleuler’s ‘Four As’

In this chapter we now turn to examine how a process of historical forgetting and myth-making further compromised the conceptualisation of schizophrenia in the twentieth century. As previously noted, the Swiss psychiatrist Eugen Bleuler (1857–1939) first coined the term schizophrenia in 1908. In doing so he described one of its most important characteristics as a splitting, or tearing up, of the psychic functions. Bleuler subsequently outlined his concept in detail in his 1911 text *Dementia Praecox or the Group of Schizophrenias*, which is some 500 pages in length (Bleuler, 1908, 1911/1952). As this chapter now explores, recent generations of psychiatrists frequently describe and synopsis Bleuler’s schizophrenia in terms of the ‘four As’ mnemonic. Namely: disturbances of affect, associations, ambivalence and autism. Therefore, it is not uncommon to find statements such as the following from an article entitled ‘Notes on the History of Schizophrenia’:

It was Bleuler who first coined the divisive term ‘schizophrenia’ in 1911. Bleuler defined schizophrenia with his four ‘A’s’, referring to the blunted Affect (diminished emotional response to stimuli); loosening of Associations (by which he meant a disordered pattern of thought, inferring a cognitive deficit), Ambivalence (an apparent inability to make decisions, again suggesting a deficit of the integration and processing of incident and retrieved information) and Autism (a loss of awareness of external events, and a preoccupation with the self and one’s own thoughts) (Kyziridis, 2005, p. 45) (n.b. Kyziridis is in error about the date 1911).
Another example is the following:

The 20th century ended without a resolution of the debate about the supremacy of Schneider’s psychopathological conceptualisation of schizophrenia (the first-rank symptoms) over Bleuler’s ‘four As’ (disorders of association and affect, ambivalence and autism) (Ceccherini-Nelli and Crow, 2003, p. 233).

And yet another reads:

His fundamental, or basic symptoms, the four A’s, i.e., loosening of associations, inappropriate affect, ambivalence, and autism were to become the most extensively employed diagnostic criteria of schizophrenia (Ban, 2004, p. 754).

However, this mnemonic, although useful in opening Bleuler’s theory to a broader public, is somewhat inaccurate. And, as will be shown, it distorts Bleuler’s thinking. Moreover, it does so in a way that is almost certainly symptomatic of a deeper failure to think about symptoms in a historically minded way. Bleuler never used the expression ‘four As’, nor did he consistently give priority or precedence to any four symptoms. As noted, for example, in 1908 Bleuler declared splitting or tearing of the psychic functions to be the outstanding symptom of the group of ‘schizophrenias’:

Ich glaube namlich das die Zerreißung oder Spaltung der psychischen Funktionen ein hervorragendes Symptom der ganzen Gruppe sei (I believe that the tearing up or the splitting of the psychic functions is the outstanding symptom of this whole group) (1908, p. 436).

By 1911 Bleuler dropped ‘tearing up’ but continued to stress the importance of splitting. Significant splitting was found in every case. However, Bleuler now declined to call splitting a symptom per se. Instead, he preferred in the discussion of schizophrenia’s definition to call splitting one of its most important characteristics.

Hence, consider his opening comments in Dementia Praecox or the Group of Schizophrenias, ‘Chapter 1—The Fundamental Symptoms’:

The fundamental symptoms consist of disturbances of association and affectivity, the predilection for fantasy as against reality, and the inclination to divorce oneself from reality (autism) (1911/1952, p. 14).