

Hungarian Psychiatry, Society and Politics in the Long Nineteenth Century. By Emese Lafferton.

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Emese Lafferton's comprehensive account of the nineteenth-century history of Hungarian psychiatry, defended as a PhD dissertation in 2003 at Central European University, has certainly been eagerly awaited by historians of science and medicine for almost two decades. Being the first volume to approach the entangled questions of nation-building, medicalization, medical and psychiatric professionalization, and the challenges evoked by modernity and urbanization in a complex, multidimensional, and dynamic framework, Lafferton offers a contained and clear overview of the main transformations, institutions, debates, and actors shaping the landscape of Hungarian psychiatry in the nineteenth century in (not counting the introduction and the conclusion) seven well-focused chapters building primarily on printed materials.

The introduction promises a “uniquely interdisciplinary approach” (p. 2) to the world of psychiatric institutions and the intellectual history of concepts and theories of mental illness, as well as a micro-historical study of institutional practices and doctor–patient relationships, the struggle for the organization of a professional community, and its gradual engagement with social critique near the turn of the century fueled by theories of degeneration in a comparative, Austro–Hungarian perspective. However, and especially in the first half of the book focusing rather superficially on the development of psychiatric practices before the establishment of the first private and, subsequently, state-funded institutions for psychiatric care, the author in some measure falls short of her promises. While the book is certainly a good introduction to the most important issues surfacing in the organization of psychiatric care, to the internal struggles of the profession, and to psychiatrists' main social responsibilities, and even though the author rightly admits that the field is too vast to allow for an in-depth discussion of minute details, its undertakings are still over-ambitious. This is a problem rooted mostly in two major methodological oversights sometimes resulting in rather trivial deductions. Given the lack of thorough archival research and, more importantly, the fact that the author has largely ignored the latest results

in the field of medical history in both Hungary and Austria,¹ even though including fresh perspectives and more recent research could have to some extent balanced the primacy given to mostly normative, printed accounts on medical professionalization, institutionalization, and institutional practices, Lafferton's analyses and conclusions—certainly offering a novel and pioneering overview of the development of psychiatry in Hungary twenty years ago—sometimes seem rather unsubstantiated.

Chapter 2 offers a summary of the most significant problems and milestones of psychiatric professionalization and institutionalization in Hungary, starting with the self-image of late-nineteenth-century psychiatry through the reflections of formative psychiatrists, such as Ernő Moravcsik and Gusztáv Oláh, and psychiatry's entanglements with the 'national project', above all, the stake of the establishment of an asylum for Hungary viewed as a civilizing force. To underpin this argument, Lafferton briefly reviews the national histories of psychiatric development and their differences in Europe based on the by now classic and influential analyses and accounts of Michel Foucault, Roy Porter, Edward Shorter, Andrew Scull, and others. As for Central Europe, especially Austria, a region in the focus of the volume and, therefore, yielding a more dynamic and reflective interpretation, however, Lafferton only recounts a well-known, descriptive, and rather fixed narrative of psychiatric institutionalization from the establishment of the Viennese asylum, the so-called 'Narrenturm' through Bruno Görge's private institution in Döbling to the establishment of the first 'proper' asylum, the Imperial Royal Institution for the Treatment and Care of the Insane in Bründlfeld in mid-century, implementing at least partially the non-restraint system and the ideals of moral treatment. This chapter, similarly to most reflections on Austrian psychiatry later in the book, from education through the intellectual history of the theories of mental illness to institutionalization, relies heavily on the English translation of Erna Lesky's influential 1965 book,² an unquestionably important, but by today in many respects challenged account of the development of late eighteenth-century and nineteenth-century medicine in Austria, while contributions from the newer generation of historians of psychiatry, including Carlos Watzka, Elisabeth Dietrich-Daum, or Maria Heidegger,³ are overlooked.

1 The introduction mentions the works of Ferenc Erős, Pál Harmat, Csaba Pléh, Judit Mészáros, Júlia Gyimesi, and Melinda Kovai, but leaves out others who have been active in the research of the history of psychology and psychiatry for the past decades, among them Anna Borgos or Zsolt K. Horváth.

2 Lesky, *Die Wiener medizinische Schule*. In English translation: Lesky, *The Vienna Medical School*.

3 See for example: Dietrich-Daum et al., eds, *Psychiatrische Landschaften*; Heidegger and Dietrich-Daum, "Die k. k. Provinzial-Irrenanstalt"; Heidegger and Seifert, "Nun ist aber der Zweck einer Irrenanstalt Heilung..."; Watzka, *Arme, Kranke, Verrückte*; Watzka, "Psychiatrische Anstalten in Österreich"; Watzka and Charour, eds, *VorFreud*.

In a similar vein, the sub-chapter discussing the Hungarian model of medicalization and psychiatric institutionalization up to the turn of the century, focusing on religious care, early state initiatives, and the long history of lobbying for an asylum, doctoral and hospital supply, medical and professional forums, the boom of psychiatric and medical institutions, and finally modern scientific research and professionalization between the 1870s and 1920s is merely an unsystematic review of older literature, including either historical reflections written at the turn of the century by eminent psychiatrists, among them László Epstein, Ernő Moravcsik, Gusztáv Oláh, and Kálmán Pándy, or largely descriptive summaries published after 1945, by, for example, György Gortvay and István Zsakó. While these articles are certainly informative, more problem-oriented literature on medical reforms, education, or the development of healthcare and the hospital network has since emerged, including books and articles by, for example, Lilla Krász and Balázs Pálvölgyi, or in the Austrian context, Martin Scheutz and Alfred Stefan Weiss,⁴ whose analyses would certainly have added to the depth of the discussion of these topics, similarly to religious care, a profoundly important practice from the point of view of psychiatric professionalization in the region, and a fairly well-researched area since the early 2000s.⁵

Following the summary of general trends, Chapter 3 zooms in on the first proper mental asylum in Hungary, established as a private enterprise by Ferenc Schwartzter in 1850 in Vác and moved to Buda two years later, subsequently playing an important role in mental normalization up to the early twentieth century. The chapter recounts the circumstances of creating a private asylum, reflecting on an earlier attempt in the 1840s by József Pólya, and then, based on Ferenc Schwartzter's 1858 book, *A lelki betegségek általános kór- és gyógytana, törvényszéki lélektannal* [General Pathology and Treatment of Disorders of the Soul, with Forensic Pathology], the first comprehensive account of concepts of mental illness in Hungarian, Lafferton reconstructs Schwartzter's rather eclectic vision of mental illnesses in the mid-nineteenth century within the context of the medical culture of Vienna and Pest based on Lesky's earlier cited volume, reviewing the conflict of reformist and traditionalist thinking in medical education, the traditions of Romantic psychiatry, and the growing influence of neurology and patho-anatomical findings. Lafferton considers Schwartzter's book a "*unique*⁶ mixture of medical and psychological traditions and

4 See for example: Krász, "From Home Treatment to Hospitalisation"; Krász, "A mesterség szolgálatában"; Pálvölgyi, *A magyar közegészségügyi közigazgatás*; Scheutz and Weiss, *Das Spital in der Frühen Neuzeit*.

5 See for example: Watzka, *Vom Hospital zum Krankenhaus*; Watzka and Jelínek, "Krankenhäuser in Mitteleuropa"; Jelínek, ed., *Germanische Provinz*; Kovács, "Szegénység, betegség, örület."

6 Italics are mine.

[...] remarkably idiosyncratic and eclectic in nature” (pp. 109–110), even though contemporary medical literature, and especially literature used in medical education in the first half of the nineteenth century and, thus, having shaped the first years of Schwartzner’s professional socialization, as well as contemporary medicine’s concern with the nature of the psyche and mental illnesses, show the same eclecticism. Schwartzner uses most of the commonplaces which had a long tradition in medical and early psychological literature, and therefore should not be considered unique, but rather deeply embedded in and reflective of contemporary traditions in Hungary and elsewhere in the Habsburg Monarchy.⁷ The remainder of the chapter focuses on the ideals of moral treatment and their implementation in the therapeutic setting of the Schwartzner asylum based on Ferenc Schwartzner and his colleagues’ summaries and reflections on the statistics, therapeutical aims, and regulations of the asylum, emphasizing that the institution was instrumental in training a generation of alienists (asylum doctors) who shaped the development of Hungarian psychiatry in the subsequent decades, among them Károly Bolyó, Gyula Niedermann, Károly Laufenauer, Károly Lechner, and Schwartzner’s son, Ottó Babarcsi Schwartzner.

Chapter 4, largely through the operation of the above-mentioned alienists, systematically reviews the development of state-run asylums, especially the Lipótmező Royal National Asylum opened after decades of struggle in 1868 and its life under directors Emil Schnirch, Gyula Niedermann, Károly Bolyó, Jenő Konrád, and Gusztáv Oláh. Though the chapter partly relies on original archival documents from the archive of the National Institute of Psychiatry and Neurology closed in 2007, the documents are not properly referenced (neither is there a general description of the material, nor are titles or dates given when single documents are cited). Thus, the reader cannot always infer from the notes which conclusions are based on these immensely valuable and still available sources.⁸ Though an in-depth original analysis of the documentation would have been enormously important as the archive is accessible, Lafferton seems to restrict her focus on a descriptive summary of printed accounts and secondary literature, as she does in previous chapters. Nevertheless, she still raises a number of questions, among them the issue of the transfer of knowledge between leading Western European asylums and Hungarian institutions (a fashionable and widely researched area in the history of science today) that remain largely unexplored, but can give impetus to new research in the field.

7 On early psychological knowledge in medical education, see: Kovács, “Az orvostudomány »legsetétebb mezeje«”.

8 Contrary to the author’s claims that the documentation has been inaccessible since the institution was closed (180, footnote 12), the archive of the National Institute of Psychiatry and Neurology is held by the National Healthcare Service Center in Budapest and is accessible to researchers.

A glimpse into the everyday life of asylums is provided through the analysis of the practices of coercion, restraint, and discipline. Here, Lafferton compellingly argues, based partly on original patient files, that “therapeutic aim [...] clashed with the custodial reality of institutions” (p. 160), and even if theories of moral management were widely known by alienists, their implementation in practice was problematic. The last part of the chapter dwells on this problem, systematically reviewing the legal regulation of admission, the double system of admission and guardianship, and discharge from asylums. However, while aiming to reconstruct the clash of legal regulations and everyday practices, the author juxtaposes only legal sources instead of using the actual documentation of the asylum to reveal the ‘reality’ of asylum life.

Another area vital to the development of psychiatric practices, the university clinic, and the birth of biological psychiatry is in the focus of Chapter 5, which recounts the prelude to the establishment of the Department of Mental Health and Pathology in 1882 and its threefold role in teaching, research, and therapy from the 1880s in a comparative European context reflecting on French, British, German, and Austrian traditions. The scientific-based experimental medical culture of Germany and its research-oriented practices exerted a great influence on both Austrian and Hungarian medicine via cultural transfers, while the establishment of the clinic was necessitated by practical factors, namely the inadequacies of public asylums and internal professional needs, as professionalization required the foundation of university departments where both the production of knowledge and its transmission were simultaneously possible. In Hungary, due to the lack of financial resources, the insufficiency of the institutional infrastructure, and the emerging conflicts between asylum doctors and clinicians, discussed also in Chapter 6, meant a constant struggle for resources and the rivalry of approaches, finally giving way to emerging studies on neuro-anatomical research at Károly Laufenauer’s clinic and hypnosis studies sparking serious controversies at Ernő Jendrássik’s ward at the Second Clinic of Internal Medicine.

A rather descriptive summary in Chapter 6 concentrates on the emerging new institutions battling the influx of incurable patients and hopeless cases, which led to the over-crowdedness of asylums from the 1880s onwards. This was in strong connection with the emergence of therapeutic nihilism characterizing late-nineteenth-century psychiatry in Europe and also in Hungary, stemming mostly from the same general problems. This pessimistic view of the role of asylums in therapy urged psychiatrists to look for alternative solutions, which led to the fragmentation and specialization of psychiatric care. By the turn of the century, four large state-run institutions were opened in Sibiu (Nagyszeben, Hermannstadt) (1863), Lipótmező (1868), Angyalföld (1884), and Nagykálló (1896), but the number of patients awaiting admission and the low numbers of institutionalization necessitated other cheaper and more viable options to make up for the shortcomings of large nineteenth-century asylums. From the turn of the

nineteenth century onwards, as a (seemingly) cheaper option, annex asylums (wards in general hospitals) were opened, sparking criticism in professional circles, while family care and colonies providing more humane care for patients suffering from less serious conditions proved to be both therapeutically and economically more successful.

The fragmentation or specialization of psychiatric care is more evident in the proliferation of smaller institutions focusing on the treatment of certain groups of patients, such as imbeciles or idiots, the deaf and dumb, epileptics, alcoholics, or nervous patients, all being private enterprises offering care mostly for well-to-do ‘customers’ of the—to borrow William Parry-Jones’s term—“trade in lunacy”⁹ (and other ailments). The only state-funded specialized institution opened in the late nineteenth century was the National Observation and Mental Hospital for Persons in Detention and Prisons, originally established for 140 patients. Here, the ‘real troublemakers’ of mental asylums were admitted, the instigators of conflicts having a criminal background (pre-trial detainees and prisoners), who needed special nursing and more surveillance. Financial problems, however, hindered the establishment of more progressive institutions fulfilling therapeutic ideals, demonstrating the limits of traditional institutional psychiatric care by the turn of the century.

Chapter 7 focusing on asylum statistics and the social composition of patients is perhaps the most original study in the volume. Based on published statistics and a systematic survey of (unreferenced) patient files, Lafferton compellingly argues that the impact of social factors on mental health necessitated the entrance of psychiatrists into the arena of public discourses on social problems discussed in more detail in Chapter 8, while refuting some age-old claims prevalent in nineteenth-century psychiatric literature and even the (not-so-recent) historiography of psychiatry. The author zooms in on two of these claims in more detail. Firstly, she discusses that madness, according to Elaine Showalter’s influential 1985 study, *The Female Malady* emerged as a ‘female problem’ by the 1850s, asserting that women were overrepresented in both cultural representations of madness and institutional statistics. As Lafferton convincingly argues, this does not hold for the Hungarian case, where a large proportion of patients suffered from *paralysis progressiva* as a consequence of syphilis. Thus, in the light of asylum statistics, the author concludes, madness did not depend on biology, but gender-specific social conditions and resulting medical problems. Secondly, the popular medical idea of ‘Jewish nervousness’ is refuted based on statistics, the analysis of social factors, and the related unequal access to medical care in fin-de-siècle Hungary: while in fact, there is a strong overrepresentation of Jews in the Lipótmező case files and statistics, this is due largely to the overrepresentation of urban dwellers and bourgeois intellectuals in the patient population, rather than to biological factors.

9 Parry-Jones, *The Trade in Lunacy*.

Strongly related to issues raised in connection with asylum statistics, Chapter 8 focuses on how psychiatric expertise and knowledge moved into the arena of the discourse on social problems, and, following Elizabeth Lunbeck's¹⁰ approach, explores how the psychiatric perspective became prevalent in society, detaching itself from psychiatric institutions. Based on medical literature produced at the turn of the century, Lafferton calls attention to a significant shift of psychiatrists' understanding of their own function in society and the roles they undertook in actively battling emerging social problems related to suicide, crime, or alcoholism, for example, by engaging in temperance movements. A case in point of this issue, discussed in more detail by Lafferton, is the problem of shell shock and traumatic neurosis, an issue that—in most of Europe—medical professionals could not overlook after the World War I. These were problems entangled with questions of patriotism, masculinity, national versus individual interests, and the social and economic consequences of war and the trauma written into the psyche of soldiers returning from the battlefields. In Hungary, as in most European countries, psychiatric professionals were split over both the etiology of the disease (neurological, degenerationist, and psychoanalytical interpretations) and, consequently, the best possible therapeutic options.

All in all, and my critical remarks notwithstanding, Emese Lafferton's comprehensive volume on nineteenth-century Hungarian psychiatry, and this is especially true for the second, more concentrated and measured part of the book focusing mostly on the turn of the century, offers a good introduction and important insights into issues of psychiatric professionalization and the institutionalization of psychiatric care in Hungary, highlighting the most significant debates, as well as financial, infrastructural, and professional struggles around establishing and operating well-functioning therapeutic spaces from private asylums through state-funded institutions to university clinics. It is an undisputable merit of the author that she has systematically collected and organized the most important printed sources related to the history of psychiatry from the second half of the nineteenth century, and thus provides the first overarching narrative in Hungarian historiography on the development of psychiatry in the period. It offers a useful manual for researchers engaging in related topics and—hopefully—more thorough archival research will follow in both Hungarian and Austrian collections that could either complement or challenge the narrative delineated by Lafferton. Nevertheless, it should be repeatedly emphasized that the use of literature produced by various Hungarian and Austrian researchers in the past twenty years and the incorporation of their results based largely on extensive archival research could have added more depth to the analyses, could have led to more substantiated conclusions, and would probably have resulted in a volume more embedded in the current trends of Hungarian and Austrian medical and psychiatric historiography.

10 Lunbeck, *The Psychiatric Persuasion*.

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