



HISTORY OF PSYCHIATRY SPECIAL INTEREST GROUP AUTUMN MEETING

PROGRAMME & ABSTRACTS

Thursday October 26th 2017

Glenside Campus, University of West England, Bristol.

Organised and chaired by Dr Peter Carpenter and Dr Jo Davies

TIME	SESSION
09:30-10:00	Registration and refreshments
10:00 – 10:05	Welcome – Dr Peter Carpenter
10:05 – 10:50	<p>Dr Will Pooley, Lecturer in 19th/20th Century Western European History, University of Bristol – Diagnosing Witchcraft in 19th Century France</p> <p>Abstract: Criminal prosecutions involving allegations of witchcraft were surprisingly common in France between 1789 and 1940. There were no laws prohibiting witchcraft in itself, but both the men and women who feared witches, and those who claimed to have powers of witchcraft, committed crimes including assault, murder, slander, fraud, and illegal medical practice.</p> <p>These criminal cases would have provided obvious opportunities for medical experts interested in madness and delusion to intervene in court, yet they very rarely did. Why? This cannot have been out of reluctance to condemn widely-held supernatural beliefs, as many of the leading thinkers on madness and health, including Pinel, Esquirol, and later Charcot were perfectly willing to pathologize excessive religious devotion, demonic possession, and visions.</p> <p>The paper offered three explanations for the reluctance of the medical men to explain witchcraft as madness: a desire to distance their own treatment practices from unorthodox magical beliefs; a bad fit between the assumptions about gender inherent in their diagnostic categories and the crimes committed out of belief in witchcraft; and the element of cultural relativism introduced in the court system by the official recognition in slander laws of the social reality of witchcraft.</p>
10:50 – 11:40	<p>Prof John Foot, Professor of Modern Italian History, University of Bristol - Franco Basaglia and the Revolution in Mental Health Care in Italy in the 1960s and 1970s</p> <p>Abstract: This research looks at the movement for reform which emerged from within Italian psychiatry in the 1960s and 1970s. It analyses the ideas of the movement, its practice, its leaders (most importantly Franco Basaglia), the texts produced by the</p>

	<p>movement and its global influence. There is also a discussion of the 1978 'Basaglia Law' which closed down Italy's asylum system, and its aftermath.</p> <p>Key issues:</p> <ul style="list-style-type: none"> - The anti-asylum movement - De-institutionalisation - New ways of understanding mental illness - Therapeutic communities - Anti-psychiatry - Decentralisation of mental health care - The life and work of Franco Basaglia
11:40 – 12:00	Break and refreshments
12:00 – 12:45	Dr Peter Carpenter, Consultant Psychiatrist and Glenside Hospital Treasurer – Avon and the Evolution of Mental Healthcare (see powerpoint)
12:45 – 15:00	Visit to Glenside Museum, and lunch
15:00 – 15:45	<p>Dr Lesel Dawson, Senior Lecturer in 16th/17th Literature and Early Modern Psychology, University of Bristol - Grief and Trauma in Early Modern Literature and Psychology</p> <p>Abstract: Although the Renaissance did not have a theory of Post-Traumatic Stress Disorder, literary characters from this period frequently exhibit the hallucinations, repetitive behaviour, and recurring memories that we would now associate with PTSD. This research paper considered early modern explanations of this behaviour, highlighting some of the differences and similarities to current ideas about grief and PTSD. It is part of a wider research project being developed with Naomi Baker at Manchester University called 'Good Grief!', which investigates early modern ideas about grieving and what aspects can be considered healthy and unhealthy.</p> <p>We are would be interested in putting early modern ideas into dialogue with current thinking. We are therefore keen to talk to, and collaborate with, psychiatrists currently researching grief. If you are interested, please contact: Lesel.Dawson@bristol.ac.uk and naomi.baker@manchester.ac.uk.</p>
15:45 – 16:30	<p>Medical student presentations</p> <p>Sam Burrows, Birmingham University</p> <p>OBJECTIVE: To explore the philosophical and historical approaches to defining disease within psychiatry.</p> <p>METHOD: The study explores what it is to be a disease and argues against a constructivist approach, highlighting that such a stance cannot explain diseases that appear not to be valued and valued conditions that are not diseases. Accepting a naturalist approach, I reject the claim that psychiatric disease is 'metaphor' and highlight that the key problem within psychiatry is a lack of causal understanding. The example of major depressive disorder then demonstrates a psychiatric disease understood in descriptive terms rather than by causation. I argue that a symptom-based recognition of depression undermines a naturalist approach because it includes non-diseased individuals who are appropriately responding to adverse events, such as in bereavement, the loss of a romantic partner or the loss of a valued job. Post-traumatic stress disorder is then used to demonstrate a psychiatric disease understood according to its causation, as the result of a traumatic event.</p> <p>RESULTS: This study demonstrates that depression has undergone a departure from a naturalist conception to a constructivist one, whereas PTSD cannot be understood in terms other than as a naturalist's biological dysfunction.</p> <p>CONCLUSIONS: The implications of being diagnosed with psychiatric disease are far reaching. An ideal disease class ought to ensure that individuals with normal biological functioning are excluded. An aetiological approach may then be the best measure of</p>

	<p>ensuring a naturalist class that represents specific biological dysfunctions. In this case PTSD can act as an exemplary example of such a disease, and an appreciation of its conception may guide future endeavours in introducing aetiology to such descriptive diseases as depression.</p> <p>Eleanor Walsh, Birmingham University Abstract: Nineteenth-century psychiatry was riddled with stories of abhorrent treatment of patients on both sides of the Atlantic. Many of the famous stories of such abuses have been explored greatly in the literature, including by the infamous investigative journalist, Nellie Bly, who in 1887 was admitted to New York’s public Blackwell’s Island Asylum and revealed the atrocities taking place. The equally distressing and appalling story narrated by Julius Chambers, an investigative journalist, who feigned insanity and was subsequently admitted into one of the most elite and exclusive psychiatric institutions, Bloomingdale Asylum in Manhattan, New York. It attracted the famous and wealthy not just in New York but also further-a-field due to its reputation of providing superior care, facilities and accommodation for its patients.</p> <p>However, by the late 1860s there began to be grumblings and complaints about the treatment of patients from both patients and former staff members and as a result Chambers went undercover as a patient and revealed the abuse, corruption and neglect within the institution and published his story in the New York Tribune in August 1872. As a result of his exposé, psychiatric reform took place. This article provides both a narration of the scandal and an analysis of the events at Bloomingdale, focusing on the concept of social class and the impact of investigative journalism as they played out in this controversy.</p> <p>Russ Machin, University of Bristol Abstract: This dissertation examines delusions, traditionally regarded as beliefs held contrary to all evidence which can have bizarre and impossible content. The phenomenon of ‘double bookkeeping’ is used to highlight the controversial ‘belief’ aspect of delusions. Several philosophical approaches to delusions are examined which aim to understand double bookkeeping. Matthew Ratcliffe’s phenomenological approach is examined and shown to offer a promising way to understand double bookkeeping.</p> <p>(Double Bookkeeping: Described by Bleuler (1911/1950, p.378), in patients with schizophrenia, “double bookkeeping” is a puzzling phenomenon where despite strongly asserting and holding onto their delusions with unshakeable faith (incorrigibility) even in the face of strong evidence to the contrary, patients would frequently fail to act on their delusions. In fact they would sometimes act as if the delusions were false.)</p>
16:45 – 17:30	Tour of Glenside campus