

**Philippe Pinel's "Memoir on Madness" of December 11, 1794:
A Fundamental Text of Modern Psychiatry**

"MEMOIR ON MADNESS: A CONTRIBUTION TO THE NATURAL HISTORY OF MAN," DECEMBER 11, 1794, BY PHILIPPE PINEL, M.D., PHYSICIAN OF THE INFIRMARIES, BICÊTRE HOSPICE, SEINE DEPARTMENT

When I was appointed physician of the infirmaries at Bicêtre over 1 year ago, the division for madmen attracted my special attention. I had undertaken some preliminary studies and felt the strong urge to try every means of restoring alienated reason. Thus I looked upon Bicêtre as a source of new enlightenment and instruction and a most welcome opportunity to contribute to public usefulness. But successive changes in the administration of Paris hospitals have deprived me of several facilities. I have neither baths nor showers: these were only authorized a few days ago. I have therefore restricted my activities this year to a thorough study of the true nature and varieties of madness, to the effort of obtaining for the insane everything that might improve their condition and especially to a search for fixed principles derived from nature on which to base their management and supervision, which contribute so much to the recovery of reason. I had the satisfaction of seeing 25 of 200 inmates—that is 1/8 of them—recover. I shall therefore present the result of my observations and efforts on this subject during the Year II of the Republic [Fall 1793–Fall 1794].

I

A large gathering of madmen inspires an undefinable thoughtful tenderness when one realizes that their present state derives only from a vivid sensitivity and from psychologic qualities that we value highly. I find that truth ever more convincing and confirmed by my daily notes. Here is the father of a family whom unexpected losses have thrown into despair; here a son exhausted by work and vigils to provide for his parents' subsistence; elsewhere a passionate and sensitive young man, victim of unrequited love; there a tender husband, distracted by suspicions and the justified or false umbrage of jealousy; a young warrior thirsting for glory whose vast and ambitious projects failed, his spirit crushed by the harsh experience. Religious zeal claims its victims,

as does ardent military fervor, which often expresses all the reveries and excesses of manic fanaticism. Man is most often led from the free use of reason to madness by overstepping the limits of his good qualities and of his generous and magnanimous inclinations.

The excessive sensitivity that characterizes very talented persons may become a cause for the loss of their reason: I mention this as a well-meant warning without the intention of discouraging them. Groups as diverse as investigators, artists, orators, poets, geometers, engineers, painters, and sculptors pay an almost annual price to the hospice for the insane. I have on more than one occasion stopped at the cell of a madman speaking about current affairs in the most elaborate terms and with great verve. The exalted imagination of poets also leads sometimes to madness, and I am often importuned by a confabulator who urges me to read his productions, while I see only the urgent need to subject him to treatment for madness. Recently I watched one of the most distinguished sculptors of the Pantheon die in the hospice for the insane. One of the most skillful clock-makers of Paris, infatuated with the fantasy of perpetual motion, spent a long time in the hospice but has now been returned to his family. Patriotism is pained to find among the inmates an engineer employed during the siege of the town of Condé who exhausted himself by work and sleep deprivation. There are usually some famous painters, at the moment two skilled artists named after the famous Le Sueur. I also give special care to a man versed in the most profound mathematical meditations who lost his reason because of ever-renewed fears that Vandalism visited upon true Knowledge. How many talents lost to Society and what great efforts are needed to salvage them!

Madness may be continuous during a large part of life or show long remissions, increase steadily, without interruption, or occur in regular or irregular attacks. This points to two kinds of madness: one continuous or chronic, the other intermittent or characterized by the most violent recurring symptoms.

In continuous insanity, the madman is ceaselessly preoccupied by an exclusive thought or a fixed sequence of thoughts or else led to acts of violence while his reasoning faculties appear intact. He seems dominated by a sinister tendency to harm and to destroy. This derangement of his psychologic faculties stays with him for a large part of his life, with very little change. In this hospice for the insane there is a melancholic inmate with sinister looks who has been chained for 25 years and who tries to vent his fury on anyone daring to set foot in his cell. He relents only in the presence of women, toward whom he behaves in a gentler manner. Another madman who is just as agitated and violent has been chained for 45 years, and it is only since the harsh winter of 1788 that he is calmer, or rather, advancing age has rendered him harmless. In contrast, neither the change of seasons nor the passage of time has markedly altered the condition of an Irish priest chained for 15 years: he combines a deadly inclination to harm with perfidious cunning, and his polite

behavior is designed to detect opportunities for venting his fury. The insanity caused by religious fervor or a zeal for devout thoughts usually persists without interruption until the end of life. Puffed-up ambition or the mad thought of believing oneself a king or prince is just as hopeless, an almost indestructible and seductive illusion. The madman who believes he is Louis XIV and who often hands me Dispatches for the Governments of his provinces is so enchanted with his exalted power that his imagination holds on to it: he would make too great a sacrifice in stepping down from his imaginary throne.

One cannot ignore a striking analogy in nature's ways when one compares the attacks of intermittent insanity with the violent symptoms of an acute illness. It would in either case be a mistake to measure the gravity of the danger by the extent of trouble and derangement of the vital functions. In both cases a serious condition may forecast recovery, provided one practices prudent management. These bouts often depend on the seasons and should not be confused with the passing effervescence and tumultuous agitation caused by the state of the atmosphere. The fact is that in very hot weather or during thunderstorms, almost all the madmen in the hospice turn garrulous, vociferate ceaselessly, and show an agitation comparable to the violent state. But this kind of nervous excitement ends with its cause. A purely automatic imitation may also involve the madmen's limbs, imparting a temporary perturbation. Suppose a madman on the ward unexpectedly seized by an attack or, between attacks, exploding indignantly with shouts and vociferous threats against the employees or directors. It is then quite usual to see all the madmen crowd around him, share in his mental state, and participate for a few moments in this mad delirium.

The idea of madness should by no means imply a total abolition of the mental faculties. On the contrary, the disorder usually attacks only one partial faculty such as the perception of ideas, judgment, reasoning, imagination, memory, or psychologic sensitivity. A madman who died this year and who thought that he was Louis XVI was a living example of the nonconformity of ideas with the objects that occasioned them, since he saw in all persons who entered the hospice so many Pages or Guardsmen come to receive his orders. Should I give examples of errors of judgment? I found them in a rather frequent kind of madness that consists of the unfounded association of poison with food and the consequent refusal to take any nourishment. Errors of reasoning are much rarer among madmen than is commonly thought, for they derive reliable inductions from a particular sequence of ideas that preoccupies them. The white-haired 70-year-old still living at Bicêtre who believes that he is a young woman is in perfect agreement with himself when he obstinately refuses other than feminine clothing, adorns himself with care, is flattered by the polite behavior of the staff and their talk of his prospects of an approaching marriage, or when his modesty seems alarmed at the least indecent gesture. How many examples I could cite of illu-

sions or flights of the imagination, this being one of the human faculties most susceptible to madness. A total upheaval of the rational faculty, or rather, a bizarre association of the most incongruous and incoherent ideas is quite rare, and I confine myself to citing the example of a madman whom I transferred to the infirmary a few months ago and who presents a veritable image of chaos, with the most absurd and ridiculous aberrations unconnected to any of his previous thoughts.

Madness is by no means characterized by a constant uniformity of willed physical actions or inclinations of the heart. Some madmen, possessed by a somber misanthropy, seek only solitude and live withdrawn in their cells; others remain motionless and take on a stupid expression if one speaks to them; others talk, shout, and rant day and night and appear continually agitated, but they are not to be feared unless provoked. It is distressing to see others, apparently possessed by the demon of malice, always do the opposite of what they are told in order to try the patience of the administrators, spy on the employees to trick them in mean ways or dump garbage on them, in other words, derive odious pleasure from disorder and trouble. Another much more dangerous madness seems connected with a blind rage and a kind of destructive instinct that impels to tear everything reachable to pieces and inspires the most bizarre cruelties, as some unfortunate madmen confess after their attacks subside. How often delirious fury is the product of the mystical dreams of fanaticism! One of the madmen who must be kept tightly locked up is subject to visions at night, and during these ravishing ecstasies he believes that an order from heaven commands him to bestow the Baptism of Blood and merciless immolation upon all those whose happiness in the next life he craves. How much supervision such madness demands! In the horrible derangement of his reason this wretch plunged a dagger into the hearts of his own children.

I have tried to understand how attacks of madness usually begin and have been surprised by the diversity of signs that foretell an approaching explosion of manic delirium in a variety of madmen. Sometimes there are futile excesses of fervid joy and immoderate bursts of laughter, at other times a somber taciturnity or extreme anxieties and groundless tears; a readier anger, a livelier glance, or brusque replies often lead me to predict an approaching attack and the urgent need to use coercive measures. But what seems to me likely to frustrate all human prudence is that sometimes the attack occurs with lightning speed. The eyes begin to glint, the face turns fiery, all muscles tense up violently and acquire extreme strength while the madman's single wish seems to be to tear and to destroy. What a contrast when one compares this delirious fury with the raptures of a man rendered mad by love who, the day before his attack, confided to me a dream designed to make his lifelong happiness: his love had appeared to him with features of the most ravishing beauty, and he believed that she promised soon to unite her destiny to his. I have never heard love spoken of with such ardor.

The ways of nature are no less admirable in the termination of attacks of madness than in the critical resolution of other illnesses and the gradual recovery of health. These attacks sometimes end in a kind of progression, and the madmen who had remained for a long time in a turbulent agitation or who tore everything become calmer; but they still feel troubled, their thoughts are disordered, and they themselves know that they are not sufficiently in control of themselves to be responsible for their willed behavior; each day the movements and actions that impelled them beyond the bounds of reason grow more temperate and all the mental faculties recover their rights; some of them indicate the exact moment when one can give them their freedom within the hospice, while others demand it too soon, when it would be very dangerous to turn them loose.

One can observe at Bicêtre a different outcome of madmen's attacks that requires great vigilance from the staff because it demands the most active intervention. This termination is quite abrupt and succeeded by a certain atony, a state of dejection and cold when one must warm the madman and even cover him with three or four woolen blankets to prevent his demise. The remission of maniacal delirium is most frequent in fall and early winter; if this sudden change occurs at night it can become fatal for lack of help; this happens every year, whatever precautions one may take.

To consider madness as a usually incurable illness is to assert a vague proposition that is constantly refuted by the most authentic facts. An understanding of the varieties of madness teaches one to identify the almost certainly curable cases, the doubtful ones, those where relapses are to be feared, and those without any hope of cure. If a mature man has a strong constitution, if the cause of his madness is a violent passion and the attacks recur periodically, then reason eventually regains its rights provided the madman is guided wisely and pursues work or a hobby with regularity. But what are the prospects of insanity that is hereditary or that derives from an organic flaw? Sometimes the reiterated attacks degenerate into dementia or lead slowly to the tomb. Two kinds of madness seem, more than any other, made to last a lifetime: the first springs from puffed-up self-importance, making believe that one is a prince or a divinity; the other derives from the derangements and frenzies of fanaticism. What to do for a madman grown old in the belief that he is Louis XVI who, confusing times and places, wishes me to attend him at court and thinks that he is alternately at Bicêtre, in Paris, or in Rome? But nothing is more atrocious and savage than the somber dreams and fanatical madness of an atrabilious worshiper. I have already mentioned a madman who became the executioner of his own children, seeking only to dispense a Blood Baptism that brings eternal bliss. Recently the director of the hospice was attacked by one of these pious visionaries while he was making his rounds. The madman seized him by the hair from behind, hit him repeatedly with the back of a Bible till he lost consciousness, and would unquestionably have beaten him to death had the employees not come to the

rescue. When questioned a few moments later about the motive that had compelled him to commit this furious act, the madman coolly cited examples from the Bible and added that, moreover, he should be considered another Maccabaeus.

II -

The hospice for madmen at Bicêtre was considered under the old régime as no more than a place of sequestration and imprisonment for a class of dangerous men who needed to be segregated from Society. It was deemed sufficient to subject them first to a rough treatment at the Hôtel-Dieu consisting of bleedings, baths, and showers. They were then abandoned to the incompetence of a callous director and to the cold brutality of servants who opposed a premeditated force of their own to impetuous acts of a blind and seemingly automatic violence. No one paid heed to the only means of restoring deranged reason firmly; I mean the art of studying the tastes and inclinations of the various madmen in order to guide them in a contrary direction, and the even more difficult art of combining affability with firmness in a well-timed manner, distracting the exclusive thoughts that preoccupy them, using only innocent repressive means, never blows or harsh treatment: these serve only to exasperate madness and often render it incurable.

It is true that a person who seeks to acquire the right ideas and fixed principles about the psychologic treatment of madness hardly knows where to turn. Medical treatises offer only general views, and in specialized treatises one finds only isolated observations irrelevant for a large group of maniacs. Travelers have not yet brought us specific enlightenment in their reports about various European institutions of this kind. The rights of man are too little respected in Germany to make the study of their ways of handling the insane in public establishments worthwhile. Spain has taken only a few steps toward this great goal, as I showed a few years ago in a periodic publication: the inmates of a public asylum dedicated to their custody are managed with the greatest gentleness and assigned to regular work which has served to cure most of them. But it is mainly England one must envy for the artful wisdom of managing a large group of madmen and effecting the most unexpected cures. Why does that haughty and self-righteous nation spoil such a great gift to humanity by keeping a mysterious silence and guiltily casting a veil over its skill to restore distracted reason? The English proudly display the majestic sight and the internal arrangements of the asylums that Philosophy has dedicated to the unfortunate insane. But they keep the art of managing the insane a deep secret which they apparently want to control and keep from other peoples. I have therefore been restricted this first year to the slim resources of the preliminary studies I had done and to the observations I was making daily; I have carefully examined and compared the several varieties of insanity to deduce firm rules for managing all of them. I summoned new cour-

age for the endless fight against all kinds of obstacles, be they unsuitable lodgings or the kind of neglect from which madmen still suffer because of inveterate prejudices. I shall now indicate how their lives have been improved, until we can do better still.

I asked that the registers be used to establish an exact count of the numbers of deaths in the hospice for the insane during the years immediately preceding the Revolution. I must say that there is no more convincing evidence of the flagrant neglect to which the old regime abandoned this part of suffering humanity. Of 110 madmen admitted to the hospice during the year 1784, 57, i.e., more than one-half, died. The proportion was even worse in 1788 when 95 of 151 died, a frightening result in a group of men who are usually full of life. In contrast, during this past year, I only lost 28 of 200—and if one were to count only those who died of an illness, this would mean deducting eight who succumbed a few days after their arrival because of the violent treatment administered at the Hôtel-Dieu and four who died during epileptic fits. Among the causes that exerted such a fatal influence on the lives of the insane at Bicêtre under the old régime, one must count the lack of food, since the daily ration of bread was only one and one-half lb, with an ounce or so of a carelessly prepared dish. This ration was distributed in the morning, or rather, it was instantly devoured and the rest of the time was spent in a ravenous delirium. This only served to exacerbate their madness and caused most of them to die of exhaustion. In 1792 the hospital administration hurried to do away with this unnatural outrage, and for approximately 2 years the daily ration of bread has been raised to 2 lb, while care was taken to distribute part of it in the morning and part at night. That has stopped all complaints about the dearth of food.

True friends of humanity should also learn of the attentive empathy that the directors of the hospice for the insane have displayed in order to implement the government's wishes. One rarely sees such untiring devotion combined with resourcefulness, industry, and wise economy. To watch with scrupulous care that no food-stuffs be spoiled, to keep some reserves for difficult days and thus compensate for the unevenness of the supplies, always to serve succulent and tasty soup, as good, I daresay, as any citizen may desire, to make up for the shortages of lean days by setting aside soup bones from previous days and skillfully extracting their gelatin, intelligently to regulate the heat at which the meat is cooked by raising it first very high and then keeping it moderate for several hours, to find ingredients for two meals a day when the rest of the institution gets only one, in a word, to bring the small attentions and constant care of domestic economy to a large establishment—such is the arduous and touching task accomplished daily and modestly by the director of the hospice for the insane and his esteemed wife, in the midst of all kinds of vexations and obstacles: I present the summary of a conduct that I could document more fully, with details pried out with some insistence.

The true principles of managing the insane in a psychologically sensitive manner are also well understood at Bicêtre. I mean a kind of supervision adapted to the nature of their madness, the prevention of dangerous consequences of their impetuous outbursts without any mistreatment, a timely deprivation of liberty, or permission to move about freely within the hospice. If a madman suddenly experiences an unexpected attack and arms himself with a log, a stick, or a rock, the director—always mindful of his maxim to control the insane without ever permitting that they be hurt—would present himself in the most determined and threatening manner but without carrying any kind of weapon, so as to avoid additional vexation. He speaks with a thundering voice and walks closer toward the maniac in order to catch his eye. At the same time the servants converge on him at a given signal, from behind or sideways, each seizing one of the madman's limbs, an arm, a thigh, or a leg. Thus they carry him to his cell while thwarting his efforts and chain him if he is very dangerous or merely lock him up. That is how one dominates agitated madmen while respecting human rights. The employees are expressly forbidden to retaliate even if they are hit, but they must use force and cunning to avoid this. This is another point that I can guarantee and that I have verified several times because malevolence has ceaselessly spread rumors to the contrary.

One of the fundamental principles of the conduct one must adopt toward the insane is an intelligent mixture of affability and firmness. When they are obstinate one must sound totally superior and unshakable so as to convince them to bow to the will of the directors. But one must avoid any unnecessary constraints and use only enough force to restrain them. In order to avoid vague precepts I shall cite some facts, and I could add many more.

A soldier becomes insane and is sent to the hospice. Obsessed with the thought of his imminent departure, he obstinately refuses to go to bed in the evening or even to enter his cell, and he threatens the servants. When repeated entreaties and all other expedients prove useless, the director finds it necessary to take urgent measures. Assuming the most firm and imposing tone and surrounded by the employees, he adds threats to these terrifying preparations and has the man tied down. The madman tears everything to pieces during the night and turns so violent that recourse to chains becomes necessary. He is thus given time to expend his mad fury, and they check every day to see if he is calming down. On the eighth day, during the director's rounds, he appears submissive, kisses his hand, and says, "You promised to set me free if I was calm; well, I call on you to keep your word." The other responds in the friendliest and most fraternal manner and sets the madman free, first in his cell and then within the hospice.

Another man, dominated by religious prejudices and appalled by the abolition of the Catholic religion in France, is sent to the hospice with all the symptoms of totally alienated reason. He remains for almost 3 months in a state of somber taciturnity and hardly

leaves his cell. Solitude excites his imagination, and he is ceaselessly terrorized by torments concerning the next life. Thinking about the mortifications of the saints' penitential lives, he obstinately refuses any kind of food and appears close to death. All admonitions, all enticements are in vain; he even rejects a little succulent bouillon and brushes away the straw so as to sleep on the bare floor. The director concluded that the only way to save the man is to terrorize him so as to change the direction of his sinister thoughts. He addresses him with a thundering voice, assembles all the staff, and threatens him with the harshest measures. Disconcerted and intimidated by this firm tone, the madman resolves to take nourishment and accept a softer bed than the bare floor. Sleep gradually returns, he regains strength, and escapes certain death. After recovering his reason, he admitted that he owed his cure to the measures taken to confront his derangement. He described the cruel hesitations he felt during more than 24 hours and the kind of inner struggle he experienced between the resolve to die from total abstinence and the harsh measures he faced if he refused to eat. This terror finally won out and allowed him to take substantial food, and from then on calm and sleep prepared the return of his strength.

Thus one of the major principles of the psychologic management of the insane is to break their will in a skillfully timed manner without causing wounds or imposing hard labor. Rather, a formidable show of terror should convince them that they are not free to pursue their impetuous willfulness and that their only choice is to submit. If a madman ruled by his wild extravagance sees only two or three employees advance toward him, he senses his superior strength. He will attack, wound, and crush them, and this kind of triumph will only heighten his delirium. If, on the contrary, he sees a large number of employees converge on him, he foresees a strikingly uneven contest. His agitation appears disarmed by the idea of his impotence, he will submit without resistance and grow more quiet and calm. Great skill is required to retain the insane locked in their cells only for the necessary length of time and only while they are capable of extreme acts of violence. The general rule in well-run hospices is to watch all phases of their attacks closely, anticipate their termination, and, generally speaking, grant as much freedom as possible to those madmen who content themselves with mere gesticulations, loud declamations, and acts of extravagance that hurt no one. To lock up this kind of madman on the pretext of maintaining order means to impose needless constraints that provoke his rebellion and violence and render his madness more inveterate and often incurable.

This summary review of my observations on the insane at Bicêtre indicates that we are well on our way

toward the great principles of their management of which England does not hold the exclusive secret. My dedication to improving the fate of these unfortunates and enabling a large number to return to Society has been spurred by various obstacles and hurdles that hoary prejudice has raised. I wish to acknowledge the humane intelligence of the hospice's director who has assisted me. But how limited my means have been because of the unsuitable and restricted space, the impossibility of dividing the insane into general classes, the unrealized although long-held project of therapeutic baths and showers, the idleness of the inmates, and the lack of some manual labor to provide useful distraction from their somber thoughts. The Commission on Public Aid is beginning to turn its attention toward this important matter of public usefulness. But it is the Legislative Body itself that should endow a public asylum for the insane with the well-planned grand design that this nation requires. May it create magnificent establishments like those that Philosophy has erected in another country. Renouncing sumptuous ostentation that strikes the senses with vain splendor, this institution should reflect a well-ordered wisdom corresponding to the varied needs of the insane and proclaim from afar the respect due to distress and misfortune.

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