Summary

In early 20th century Sweden psychiatry appeared as a distinctly different medical discipline. According to the leading psychiatrist of the time, Bror Gadelius (1862–1938), psychiatry was not merely relying on natural science, the discipline was also informed by psychology and neo-kantian epistemology. To Gadelius this meant that psychiatry was not only as scientific as the rest of medicine, it was permeated with an additional scientific competence. Natural science had its limitations, he said. The sick mind is a “world of secrets” and to reach this mysterious realm you need to tread on different paths.

The fact that psychiatry appears as an odd medical discipline will not come as a surprise to anyone with knowledge of its history. Since its formation in the late 18th century psychiatry has struggled to find its place within medicine and to form a unified theoretical approach to its special domain, the mental illnesses. And while the ideas of what characterises scientific psychiatry has remained a controversial question, the central problem of the practical care has been to keep up with an apparently ever increasing mental distress in society.

It is argued in this dissertation that this dual problem can be understood from the perspective of two partly intertwined processes, the medicalization of madness and deviance, and the scientific specialization of psychiatric knowledge. While the medicalization of the undifferentiated madness into more or less well defined mental illnesses during the 19th century was rather successful, the specialization of psychiatric competence in medical terms was less so.

In terms of scientific specialization, psychiatry differ from most other areas of medicine. While the idea that madness is due to mental illness was spreading, the methods to care for the ill were not distinctly medical. Rather than developing from within medicine, we can say that psychiatry gradually joined the family of medical specialties. As a consequence the differences, stemming from psychiatry’s concentration on illnesses of the mind, were generally played down in favour of a more traditional somatic approach.

These international trends are apparent also in the Swedish context. As psychiatry became a branch of Swedish academic medicine in 1861, the discipline tried its best to align itself with the rest of medicine, rather attempting to rouse a general medical interest in psychiatric issues than to stake out its own professional territory. Throughout the century psychiatrists tried to adopt a physiological perspective and find organic causes to the mental illnesses although there were hardly any empirical evidence.

However, when Bror Gadelius was inaugurated as professor of psychiatry at the Karolinska Medico-Surgical Institute and chief physician at Stockholm mental hospital in 1903, all this changed. Instead of downplaying the difference Gadelius stressed psychiatry’s position of exception in relation to the other medical subjects: Psychiatry abides in a completely different atmosphere and proceeds with different concepts, values and opinions to the abiding constituents of more precise disciplines, he claimed. And above all, at last the psychiatric care had
turned human and respectful to the poor souls afflicted with mental illness; all according to Gadelius.

The aim of this dissertation is to understand this radical change in the portrayal and self-understanding of psychiatry in the early decades of the 20th century. Why was it so important to describe psychiatry in different terms at the turn of the century? How well did this description mirror the actual psychiatric discipline and the care given to the patients? And how was it perceived by the patients? These questions run through the four chapters of the dissertation. On the one hand they analyze the discursive aspect, that is the establishment, and the harsh discussions about this establishment, of a scientific psychiatry. On the other hand the chapters focus on the patient, on the allocation of disciplined identity and subjectivity in the mental institution. It will be obvious that these aspects largely coincide and influence each other, but thematic emphasis is placed on one or the other angle of approach in the four chapters that follow.

The first chapter, “A useable past”, delves into the history of psychiatry as well as its historiography. It consists partly of a rhetorical analysis of Bror Gadelius’ own historical writings, and partly of an exploration based on secondary literature of the picture the psychiatrist is trying to paint. The aim is to examine the role historiography played in Gadelius endeavor to form a psychiatric specialty, as well as to chart the historical background of 20th century psychiatry.

The second chapter, “Psychiatry and public opinion”, describes one of the heated debates around one of the famous stories of incarceration in the early 1900’s. It takes as starting point a correspondence of bitter public letters between two professors, and follows the story in the newspapers and further into the Swedish Medical Society’s session hall. In this chapter the greater processes, medication and specialization, are given concrete significance when psychiatry’s humanity and scientific status are put to the public.

Chapter three, “Psychiatry’s borders”, focuses on the rhetorical significance of epistemology and philosophy when Gadelius argues for the disciplinary boundaries of psychiatry. Based on the concepts of Thomas Gieryn, I investigate how Gadelius through border work tries to define and expand the area of psychiatry’s epistemic authority on the cultural map. The chapter takes its starting point in internal appointment battles at Karolinska institutet, and then broadens its perspective on other areas and contexts where Gadelius fought for the significance of psychiatry.

The fourth and last chapter, “Biography and bio power”, concentrates on the use of narratives in psychiatric practice, research and teaching. I investigate the conflict that appears between, on the one hand, the ability of the story to lead to comfort, healing, self-awareness and emancipation, and the normative, disciplinary and stigmatizing effects that may occur on the other. The chapter deals with case records from the Stockholm mental hospital and ends with a longer study of how autobiography, biography and bio power interact when an individual’s psychotic experiences are transformed into a well-known case study in Gadelius’ textbook, Human Mentality.