

FORENSIC PSYCHIATRY FROM PAUL ZACHIAS TO PHILIPPE PINEL AND PANAIT ZOSIN

**Călin SCRIPCARU, Raluca Ioana PREPELIȚĂ,
Mihaela DOBROVĂȚ, Katerina KANAKI**

Călin SCRIPCARU – M.D., Ph. D, Professor, Dept. of forensic medicine, University of Medicine and Pharmacy “Gr. T. Popa”, Iași, Romania; General Manager, Clinical Psychiatric Hospital “Socola”, Iași
Raluca Ioana PREPELIȚĂ – M.D., Resident in psychiatry, Clinical Psychiatric Hospital “Socola”, Iași
Mihaela DOBROVĂȚ – M.D., Resident in psychiatry, Clinical Psychiatric Hospital “Socola”, Iași
Katerina KANAKI – MD, PhD, Expert coroner: Institute of Forensic Medicine “Alexandropolis”, Greece

Abstract:

P. Zachias (1602 – 1675) starts the “naturalization of the madness” and the idea is reinforced by Bonet from the pathological-anatomic aspect. The indisputable markers of madness were for the doctor to ascertain and in consequence the only one able to make the distinction between normal and mad person. Philippe Pinel (1775 – 1827) considered madness to be a disintegration of the physical functions into primitive wishes and simple mechanisms of behavior, in other words “the madness which is linked to the civilization of its time is often mingled with its passions and vices”, being a disorder of the brain functions, a “reckless and without motivation or reason” determination. Panait Zosin (1879 – 1937) justifies the thesis of biological determinism in the case of mental disease when he considers the delinquency as an epiphenomenon of the psychical disorders.

Key words: madness, mental disease, forensic psychiatry

Introduction: Before P. Zachias (1602 – 1675) the madness was a void, knowledge was a stranger to madness, which was represented as a possession of evil spirits (1).

Beginning with P. Zachias there starts the “naturalization of the madness”, in his work “*Questiones medico-legalis*”, Lyon, 1624 – 1650 (2) madness was defined as an “affection of the brain in which there are harmed the reason and the other functions of the soul”. So, the madness is related to a specific disease of the brain thus harming the skill of reasoning (*Amentiae a proprio cerebri morbid et ratiocinatricis lesion dependent*). The idea is reinforced in 1679, in Bonet’s works which show, from the pathological-anatomic aspect, that the maniac’s brain is dry and friable, melancholic’s brain is humid and congested by aqueous humour and in dementia, the brain is rigid, without flexibility (3).

The treatise emphasizes the role of the phantasms in the psychiatric disease, which does not deny or state, but it is fixed in a simple contemplation, the spirit being the only one which makes the image become an error thus abusive and emphasizes, as well, aspects from the madmen logic whose final language is that of reason surrounded by imagination and whose organization produces madness. Thus, language becomes the first and the last structure of madness. Regarding passion

which also involves imagination, captures the beliefs and wishes of the patient in a delirious discourse of body and soul, of imagination and language.

Deliriums are dreams when awake which are not reality (*que in veritate non sunt*), a movement of the soul that releases imagination (4).

The work *Questiones medico-legalis* makes a survey of the Christian jurisprudence regarding madness and introduces a multitude of practical precepts such as: madmen cannot make juridical actions, except testaments (wills) (if they have the psychical capacity to recognize their relatives), in this respect the doctor, being the only one who can judge if someone is mad and what degree of healthy psychical capacity has the disease left to the patient (5). The doctor had the task to transform the presentiments of the jurist about madness in reality by using the fact that in passions, the sadness is continuous and without motivation, reason is superficially abolished in passions, profoundly in melancholy and totally in mania. Thus, the indisputable markers of madness were for the doctor to ascertain and, in consequence, the decision making was in the hands of the medical judgement, the only one able to make the distinction between a normal and a mad person, between a murderer and an irresponsible lunatic (6). This way, on the basis of judicial expertise of alienation there was constituted and developed the medical science of mental illnesses (7), which, in 18th – 19th centuries was enriched with the experience with the madmen from the Paris Police Prefecture, when at a population of 500 000 inhabitants there were sorted out for hospitals over 6 000 madmen.

Starting from Zachias' assertion that madness begins where the connection of man with the truth is troubled (*in hoc constitat quod intellectus non distinguit verum a falso*) and from the classification regarding the mental diseases, the ulterior Encyclopedia will require a correct separation in the patient's connection with his sensations and with the objects up to what was called the blindness of reason as a deviation from the moral truth.

Cabanis' subsequent report asks that justice should be a mission of truth and not of punishment, "with the aim to use freedom in a good way", so as the symbol of justice should not be the strait jacket and chains (8).

Philippe Pinel reform (1775 – 1827) was preceded by Mirabeau's findings according to which hospital generates madness in the same way in which jail generates murders, Samuel Tuke's in England, who favoured the private initiative in the assistance of mental patient (this was not a doctor but a member of a friendship association) or of Scipione Pinel, who was against the idea of some patients with political delirium leaving the hospital.

Philippe Pinel asked for the madness to be a recognized disease, like any other disease, to be treated humanly, the relationship between patient, doctor and expert to lack any complicity and also to be recognized the connection between madness and crime. Starting from the basic instinct to cultivate the earth, he promoted occupational therapy as a way to mirror the mentally ill person's reasoning (9). The enthroning of certain human connections with the mentally ill patient is known as Pinel's myth. For his human ideas, Pinel was arrested and on the verge to be trailed by the Revolution Court, but he continued to state that madness "is a disease which belongs to the society and then to the nature or to the man himself", the hospital having the role to heal these relationships, those in chains from Bicetre continuing to be released (10). For the patient, the doctor has to be regarded like an authority from whom the order and moral come from. Pinel's work, continued by Esquirol (1773 – 1840), giving the madman the natural freedom, even if it is happening in an enclosed space, the ill person is exonerated by the relationship of his madness with the evil, the devil and with the crime, the chains which were cutting any of his wills were transferred to the doctor's responsibility. Moreover, Pinel considered madness to be a disintegration of the physical functions into primitive wishes and simple mechanisms of behavior, in other words "the madness which is linked to the civilization of its time is often mingled with its passions and vices", being a disorder of the brain functions, a "reckless and without motivation or reason" determination. From here comes the conclusion that the cure for madness is found in the other's reasoning (11).

For psychiatry, in general and for the medico-legal psychiatry in particular, Pinel played the role of changing the social attitude towards the mentally ill patient and his release from the ancient mentalities in the same way in which Beccaria revolutionized the law and opened the road to progress.

From Pinel and Esquirol's examples, the forensic psychiatry influenced even the prison which fluctuated to other models like family, military, school or occupational therapy than the judiciary-detention model of human sequester with the aim to detain and obey and not with the aim to re-educate and discipline. Until Beccaria and Pinel, the jail as well as the madmen hospital were representing only the state power to punish and was ignored the fact that they stigmatized and prolonged the delinquency and madness, which become institutional products, a paradox for the re-socialization, discipline and normalization of the individual. The jail can be justified only through its correctional effects and re-adaptation, and, in this respect, work and re-education are the most efficient means. Jail and punishment have to adjust to the finest variables of the delinquency causes, such as that today, the troubled childhood becomes the most prolific explanation principle of the whole human anomalies (12).

Panaite Zosin (1879 – 1937) is the first psychiatrist who gets close to the medico-legal psychiatry, in 1903 he published in "The Hospital" magazine the condition of the hospital from Neamț monastery (13). His works, "The pathological substratum of the European pessimism", "The psychiatric-legal expertise from medical, social and legal point of view" (written by Heidelberg and published in our country, with dedication to Spiru Haret), and "Noxiousness as a symptom for a mental disease", are influenced by A. Comte's positivism and V. Conta's philosophy, and justifies the thesis of biological determinism in the case of mental disease, when he considers the delinquency as an epiphenomenon of the psychical disorders (14). His doctorate thesis "The pathological substratum of the contemporary pessimism" is based on the suicide cases given by Mina Minovici and on the analysis of some works with pessimistic influence (E.A. Poe, Schopenhauer, G. Leopardi, M. Eminescu) (15).

NOTES:

(1) Until then, the biggest torment was that a person to be given to the Devil, as a punishment from God to give a devil "to talk to", especially when the person was remorseful.

(2) The original work is at The Doctors and Naturalists Society, Iași.

(3) These kind of descriptions were possible after the Pope accepted the autopsy on humans (Galen had autopsied only animals and Vesalius was condemned to death) to establish the location of the soul. Later, Morgagni will make the distinction between different areas of the brain.

(4) The madmen have deliriums, that means dreams, when awake (in antiquity, dream = madness). In the dream, the imagination in forging *imposibilia et miracula* (the impossible and miracle) in a *irationali modi* (in an irrational way).

(5) But the doctor's participation at the expertise is made with efforts, the jurist having the quality to recognize a madman by the way he talked and the deeds he was doing (according the incoherence of the gestures and absurdity of the behaviour).

(6) Following these statements, a law from 1670 admits that madness becomes an evidence only after the trial begins, and in this case the judge orders the hospitalization of the person, the report about madness to be done by 2 doctors with a good reputation and probity.

(7) See Foucault M., "The history of madness in the classical era", Humanitas Press, 1996.

(8) Cabanis report from 1784 points out that the alienated are released from torments. The report is read and assimilated in 1789 and at the same time there are set up The Family Courts, as a kind of private trials.

(9) Through his works, *Nosographie philosophique* and *Traité medico-philosophique*, he has released the alienated from the hospitals for chronics, abolished their physical constraints, created them a human environment for their existence, set up the occupational therapy and disregarded the so-called "religious madnesses", the hospital received an activity in accordance to the social moral.

(10) A monk who thought himself to be Jesus and was kept in chains for 12 years was released to "socialize with the others and to have a connection not only with himself".

(11) Three patients were fighting because each of them thought to be Louis the XVIth and by mirror reasoning, each of them projecting the madness on the others.

(12) The thesis known under the name of *Foucault prevision*, from his work *To supervise and to punish*, Paralela 45 Press, 2005, is concretized in the conditions of punishment, to be less arbitrary and according to the nature of the crime, to go to the source of the evil, to be molded on the author's personality and the circumstances, with decreasing gravity and known by public opinion for not making from a criminal a hero.

(13) Comparing to the medieval conditions in which he found the patients, he introduces the daily consultation, medication and observation paper, everyday baths, adequate food, autopsy in case of death etc., from 114 patients (most of them having pellagra dementia), only 4 being murderers.

(14) Later, C.I. Parhon, in his works of forensic psychiatry, will sustain the thesis of social determinism of the crime.

(15) See Scripcaru, Gh. and collection "Medico-legal psychiatry", Polirom Press, 2002 and Georgescu, N., *Mihai Eminescu's death during life*, Carter Press, 2002.