THE INSTITUTE FOR THE HISTORY OF PSYCHIATRY

ANNUAL REPORT TO THE FRIENDS

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Oskar Diethelm Library
Richardson History of Psychiatry Research Seminar
Cornell Studies in the History of Psychiatry
Eric T. Carlson Memorial Grand Rounds

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Designed by Siovahn A. Walker.
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Friends of the Institute for the History of Psychiatry

Annual Report Committee
The Institute for the History of Psychiatry is an inter-disciplinary research unit in the Department of Psychiatry of the Joan and Sanford I. Weill Medical College of Cornell University and The New York Presbyterian Hospital. Its objective is to carry out, encourage, and advise scholarship in a broad range of historical topics that are relevant to the present day theory and practice of psychiatry. Its basic activities include the Richardson History of Psychiatry Research Seminar and the administering of the Oskar Diethelm Library.

The foundation of the Institute was laid in 1936, when Dr. Oskar Diethelm, Chairman of the Department of Psychiatry and Director of the recently opened Payne Whitney Psychiatric Clinic, began assembling books and journals important to the history of psychiatry, convinced as he was of their value to clinicians. Stimulated by this growing resource, Dr. Eric T. Carlson formally launched the History of Psychiatry Section (as the Institute was originally known) in 1958, when he received a grant from the National Institute of Mental Health to pursue research into the history of American psychiatry. At the same time, Dr. Diethelm appointed him to a newly created position as Director of the Section.

Under the leadership of Dr. Carlson, the activities and collections of the Section steadily expanded to serve a wide range of interests, from the education of medical students and residents to the exchange of ideas among historically oriented scholars from many disciplines. In the early 1960s, Dr. Carlson instituted a biweekly research seminar, which in 1993 was renamed the Richardson Research Seminar in honor of the Richardsons’ generous support.

When Dr. Diethelm retired in 1962, the Section’s rare books library was named in his honor. The Oskar Diethelm Library now contains over 50,000 printed items, constituting the most comprehensive collection of its kind in the United States. Initially, the emphasis was on collecting British and American works from the 17th, 18th, and 19th centuries as well as Renaissance works in Latin. As the Library...
grew, however, it developed major collections dating from the 15th century in French, German and Italian, as well as acquired selected works in Arabic, Dutch, Hungarian, Portuguese, Russian, Spanish, and Swedish.

The Library now counts among its holdings nearly every edition of the monographs of such important figures as Emil Kraepelin, Sigmund Freud, Isaac Ray and Benjamin Rush. The Library holds significant collections in such areas as the history of hypnotism and psychoanalysis, the American mental hygiene movement and temperance movement, as well as religious and medical debates on witchcraft, suicide, and sexual behaviors. There are also many early and rare first-person accounts of psychiatric illness, alcoholism, and drug abuse. The Library is has the complete runs of several crucial and uncommon journals and an impressive collection of hospital and asylum reports of the 19th and early 20th centuries, amounting to more than 3,500 items.

Dr. Diethelm recognized the value of knowledge contained in early dissertations written for the medical degree in pre-Enlightenment Europe. He traveled throughout Europe to identify them in foreign repositories and collect what he could for the Library, eventually collating his work into his *Medical Dissertations of Psychiatric Interest before 1750* (Basel: Karger, 1971). The Library’s collection of these theses now stands at nearly five hundred.

In 1976, the manuscript division of the Library was officially established, indicating its growing importance as a repository for the unpublished papers of many organizations and individuals vital to the history of psychiatry. The Library now houses over sixty manuscript collections. It is the official depository of such institutions as the Group for the Advancement of Psychiatry, the American Psychoanalytic Association, and The Cheiron Society. Its holdings of the papers of D.W. Winnicott and David Levy make it an important resource for the study of child psychiatry and psychoanalysis. Through the generosity of Dr. Bernard L. Diamond, primary sources have been amassed relating to cases vital to the history of forensic psychiatry, such as the M’Naughton trial and the Guiteau trial. There are notable holdings related to the American mental hygiene movement, biological psychiatry, and such renowned figures as Clifford Beers, Sigmund Freud, Morton Prince, William James, G. Stanley Hall, Johann
Spurzheim, Andrew and George Combe, Herbert Spencer, August Forel, Francis Galton, S. Weir Mitchell, and Harry Stack Sullivan.

From its earliest days, numerous scholars have worked in the Oskar Diethelm Library, publishing their discoveries as articles or books. From the Renaissance psychiatry that Dr. Diethelm pursued and the early American psychiatry that Dr. Carlson explored, the topics of inquiry have multiplied. The list has grown to include biographies of psychiatrists, psychologists, and pioneers in mental hygiene; accounts of the development of child psychiatry and the changing attitude toward children; books on psychoanalysis and its reception in various parts of the world; histories of psychiatry during specific periods, of particular mental hospitals that epitomized the development of the field, and of particular sub-specialties such as the treatment of alcoholism or schizophrenia; studies in legal psychiatry; topics in British, German, and French psychiatry; histories and analyses of ideas and concepts in psychiatry, psychology, and psychoanalysis; works on the relationship between psychiatry and literature, and psychiatry and religion; and investigations of multiple personality and hypnosis. There are also two published volumes of symposia sponsored by the Institute.

Dr. Carlson organized the Friends of the Oskar Diethelm Library in 1964, thus widening the Library’s circle of interested and active supporters. Those who could not participate directly, but who recognized the value of the Library’s programs, began to give generously to benefit the collections and support the scholars who use them. The Friends’ regular membership has grown steadily, while larger grants from far-seeing individuals and foundations have permitted the awarding of fellowships, the acquisition of special collections, and the consolidation of historical materials from the New York Hospital’s Westchester Division into the Library.

After the death of Ted Carlson in 1992, Dr. George Makari assumed the Directorship of the Institute. During his tenure, Dr. Makari has undertaken a number of initiatives, including the launching of the Cornell Studies in the History of Psychiatry book series, the inauguration of the Carlson Grand Rounds in the History of Psychiatry, the creation of specialized research working groups, and the modernization and professional cataloguing of the ODL’s holdings. In 1994, the Institute for the History of Psychiatry responded to the prospective razing of the Payne...
Whitney Clinic by moving the Oskar Diethelm Library to temporary quarters at the New York Academy of Medicine. The Library returned to the campus of Weill Medical College and the New York Presbyterian Hospital in the spring of 1999 where it now occupies state-of-the-art facilities. In 2003, Nathan M. Kravis was appointed Associate Director of the Institute.

Robert Goldstein, M.D.
The Institute for the History of Psychiatry has long supported research by medical students, psychiatry residents, and post-doctoral scholars and in turn, these students have deeply enriched our community. In support of this mission, we will be inaugurating a new initiative. Beginning with the recruitment of psychiatry residents during the coming year, the Cornell Department of Psychiatry will offer the Benjamin Rush scholarship to a highly qualified and motivated, incoming resident who hopes to pursue a career in historical scholarship or mental health policy. In addition to normal clinical training, the Rush Scholar will embark on a parallel track of study in the history of psychiatry, neuroscience and the behavioral sciences. The Rush Scholar will commence these studies at the beginning of the PGY-II year with “Oxford” style tutorials and readings intended to cover such subjects as the history of psychiatric diagnosis and treatment, psychiatric professionalization and institutionalization, psychiatry and the law, the emergence of psychoanalysis and neuroscience, and psychiatry in culture and society. Midway through the third year of residency, the Rush Scholar will choose an independent course of study in a branch of history or mental health policy and will be assigned a mentor to facilitate and guide that research. I will oversee this new program, but the student will have access to a broad array of faculty, including Nathan Kravis, Leonard Groopman, Robert Michels, Jack Barchas, David Hamburg, Betty Hamburg, and Theodore Shapiro.

I am thrilled to welcome a new faculty member who will also be available to the Rush Scholar and has already been an extraordinary addition to the Institute. Professor Rosemary Stevens, the former dean of Arts and Sciences at the University of Pennsylvania and a central member of their vaunted History and Sociology of Science faculty, has joined the department of psychiatry as a DeWitt Wallace Scholar. A national expert on the history of hospitals and hospital policy in America, Professor Stevens is the author of the much acclaimed *In Sickness and in Wealth: American Hospitals in the Twentieth Century*. A member of the American Academy of Arts and Sciences and the Institute for
Medicine, Rosemary has embarked on several new book and research projects, and is now studying, among many other things, the history of Veterans’ hospitals in the United States (see an all-too-brief biography of her in these pages).

The Institute hosted a fascinating range of scholarly activities over the past academic year as you, dear reader, will see. The Eric T. Carlson Lecture was delivered by Stanley Finger, whose work on the history of neuroscience has been important in consolidating and advancing that field of inquiry. Thanks to the leadership of Nate Kravis, the Richardson Seminar introduced scholars from around the country (as well as England and France) who presented on fascinating topics such as the origins of PTSD, neuroethics, Tolstoy’s psychology, and Freud’s concept of \textit{Wissenschaft}. The First Aaron Esman Lecture, which is reserved for a student of psychology and the arts, was delivered by the Joyce Scholar and psychoanalyst, Paul Scwaber, who gave an inspired exegesis of Hamlet.

The topics covered by the three Working Groups are enough to make a scholar’s mouth water. Katherine Dalsimer’s burgeoning group read Vladimir Nabokov, Truman Capote, and William Faulkner, among others. Francis Lee’s group, dedicated to the history of the neurosciences, spent its first year discussing the mind-brain experiments of John Hughlings Jackson, A.R Luria and Wilder Penfeld. Nate Kravis’ Working Group on the History of Psychoanalysis examined the perennial question of whether psychoanalysis is a science by studying historical claims about the nature of science.

As always, Diane Richardson managed the great Oskar Diethelm Library with care and acuity. A brilliant bibliographical sleuth, Diane has developed a legion of grateful fans, who gush about the time she let them stay late or found some impossible to find item crucial to their work. Working with the Winthrop Group, she has continued to make steady progress cataloguing the papers of the American Psychoanalytic Association. Moreover, Dianne has mounted an extraordinary show on the history of hydrotherapy in psychiatry, an understudied subject that surely deserves attention.

Finally, this year marked the last one for the always exuberant, wise and helpful Tanya Uhlmann, who began training as a
Physician’s Assistant at Harlem Hospital in the fall of 2006. We are all terribly grateful for the three years of intelligence and cheer that she gave to us. Luckily, we have had the good fortune of finding Siovahn Walker, who now takes Tanya’s place as the new administrative assistant. A graduate of Brown and Stanford Universities, Siovahn studies medieval psychology, gives historical tours of New York City, and has experience in publishing. Her honed editorial skills will be on display in this Report.

George Makari, M.D.

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A patient at the Water Cure, getting drenched, wrenched, and restored to health.

Joe Allopathy, M.D.  (Water Cure Journal)
The 2005-2006 academic year has been a productive one for the Oskar Diethelm Library. The Library’s electronic catalog is nearing completion—to date, nearly 30,000 items have been cataloged. A rare books cataloger was contracted to index the Library’s pre-1801 books on OCLC several years ago. Those records have since been obtained from OCLC and added to the online catalog. In fact, the project is so far advanced that the Institute for the History of Psychiatry will soon have to determine who will have access to the catalog—whether it will be available only in the Oskar Diethelm Library, within the Joan and Sanford I. Weill Medical College, or to all via the internet.

The project to organize and conserve the records of the American Psychoanalytic Association is also well under way. The Winthrop Group has compiled a preliminary finding aid and folder list for the collection that enables us to make the collection available to researchers. They will commence processing records next year.

I am also pleased to announce that the new exhibit on The History of Hydrotherapy in Psychiatry has been completed and will soon be the first Oskar Diethelm Library exhibit available both in the Library and on our website. Moreover, providing all goes well, it will soon be joined by other virtual versions of previous exhibits, such as those on Nostalgia and Perkins Tractors.

As always, a number of scholars, students, and residents have used our library facilities for research during the year. Researchers have used the papers of Clifford Beers, D. W. Winnicott, and Joseph Wortis. Most notably, Sabine Arnaud, a doctoral student from France working on the development of the concept of hysteria, has spent many hours with our eighteenth century French and English books and will, hopefully, be presenting some of that research at the start of the next academic year.

Diane Richardson, M.L.I.S.
Therefore it happened at Antwerp, that a Carpenter, persuading himself, that in the night-time he had seen horrid appearances or ghosts, became wholly mad with the terror thereof: And he was sent unto the Tomb of St. Dympna the Virgin, where those who are possessed by an evil spirit are wont to be freed; the matter being thereby wrested into an abuse, that all mad men should indiscriminately be sent thither: As if the condition of those that are possessed, and mad, were the same: the Carpenter therefore is nourished a whole year, and mad, however the wonted remedies are implored; and when as moneys were not sent from Antwerp, for the last half year, they sent back the mad man bound in a wagon, who when he had loosed his bonds, he leapt out of the Wain into a deep and neighbouring pool: He being at length drawn on was laid up into the Wagon, for a dead Carcass; but he lived for eighteen years after, free from madness. By which example, I (being raised unto an hope) knew, that not only the madness from a mad dog, but also that an inveterate or ancient Mania or madness might be cured: And that thing I afterwards often tried; neither hath the event deceived me, but as oft as through fear, I drew these mad persons over hastily out of the water. I likewise learned by the example of the Carpenter, that it would be all one, whether the aforesaid plunging, or choaking of the mad Idea, should happen to be in fresh water, or salt.

- John Baptista Van Helmont (1662)
Oriatrike or, Phyfick Refined
The Origins of Psychiatric Hydrotherapy

Using water to treat mental illness is a very old practice and one which today is most often called Hydrotherapy. Encompassing a wide range of water cures, hydrotherapy (also sometimes called balneotherapy or bathing-therapy) is a practice of great antiquity and appears in the works of ancient Egyptian, Greek and Roman physicians, who prescribed it for muscle fatigue and similar ailments, but also for the treatment of mental derangement arising from bodily disorders like hydrophobia (rabies or rhabdovirus) and fever. In fact, one of the standard treatments for hydrophobia in the Roman world called for, among other things, the “dunking” of the patient in a cool pool of water—a prescription which makes its first textual appearance in the work of the first century Roman encyclopedist Aulus Cornelius Celsus.

While clearly informed by ancient precedent, the modern history of hydrotherapy as a psychiatric tool began with the posthumous publication of Jean Baptiste Van Helmont’s Ortus Medicinae. A massive tome on philosophy and medicine, the Ortus Medicinae was first published in 1643 and later translated into English by John Chandler under the title Oriatrike, or Physick Refined (1662). As was common for the time, Van Helmont’s book combined philosophy with diagnostics and practical medicine. In it he claimed that it was possible to cure insane patients by the same method Celsus prescribed for hydrophobia victims: sudden immersion in cold water. However, Van Helmont took matters one step further and contended that only by keeping the patient under water until he lost consciousness could the treatment be truly effective. Naturally, this put the patient in serious danger of drowning, but Van Helmont insisted that this danger had to be braved because it was only by sudden, near death immersion in cold water that one could “kill the mad idea” which caused mental derangement.

Because of the great danger involved, Van Helmont’s immersive treatment never became widespread. Still, his staunch advocacy of water as a psychiatric tool did give the imprimatur to
other psychiatric uses for hydrotherapy, so that by the late 18th century water-cure was used in a number of European insane asylums, including Charenton and Bicêtre.

Although their theoretical underpinnings differed, almost all these treatments were variants on two types of water-cure: namely, the *douche* or cold shower and the *balneum* or bath (either cold or tepid). In the first, cold water was poured on the patient’s head or sprayed from jets at the patient’s body in order to lessen the heat of madness or rouse the depressed from melancholy. In the second, a bath was used—when cold, to restore vim and when tepid or warm, to calm overwrought nerves and encourage sleep.

In keeping with available technology (and the ad hoc nature of much early psychiatry), hydrotherapy as advocated by Van Helmont and his admirers was generally performed outdoors, in a sea or pond. However, as institutions and asylums for the insane became increasingly widespread in the 18th century, water-cure moved indoors, inspiring the invention and development of a wide variety of hydrotherapeutic apparatus. Among these were the elaborate

The douche, for calming mentally disturbed patients, as practiced at the beginning of the 19th century. (Raymond de Saussure. “Philippe Pinel and the reform of the insane asylum” Ciba Symposia 11:5, 1950.)
cold showers rooms used at Charenton, as well as far more whimsical contraptions such as the *bain de surprise* or “bath of surprise,” described by Guislain. Yet, it was not until the 19th century and the development of a significant number of institutions devoted to the treatment of psychiatric illness that hydrotherapy became a *consistent* feature of psychiatric treatment. For, as more and more doctors specialized in treating the mad or melancholic, a standard series of psychiatric treatment options evolved—options that almost always included some form of water-cure and thus made hydrotherapy a standard tool in the mad-doctor’s toolkit.

**Différens appareils de douche.** (Joseph Guislain *Traité sur l’aliénation mentale et sur les hospices des aliénées*. Amsterdam: J. van der Hey et Fils, 1826.)
That said, in the late 18th and early 19th century the most common use of psychiatric hydrotherapy was not curative, but punitive. In an age when people increasingly viewed the binding and cuffing of mad people as inhumane, hydrotherapy offered a way to coerce without physical restraint. Indeed, it was for this reason that France became a leader in the use of hydrotherapy, for it was in France that Philippe Pinel—the man most famous for unshackling the mad—began using cold showers as a form of punishment.

Following the example of Pinel, many European and American doctors came increasingly to advocate the use of the *douche* as a coercive tool. Among these were Jean-Etienne Dominique Esquirol, a student of Pinel and doctor at Salpêtrière Hospital, and François Leuret, successor to Pinel at Bicêtre. Likewise, the case notes of Dr. William Handy, a physician of New York Hospital’s asylum from 1817 to 1818, testify to similar uses in New York City. In fact, in 15 of the 75 cases recorded by Dr. Handy, the “shower bath” was explicitly used to punish infractions such as the tearing of clothing, “silly behavior and laughing,” soiling a cell or room, striking attendants, and attempted escape. Moreover, there is clear evidence that the same practices were standard in the early years of the Bloomingdale Asylum.

In fact, one of the best accounts of the punitive uses of hydrotherapy comes from an American. Pliny Earle, resident physician at the Friends’ Asylum in Frankford, Pennsylvania, toured Bicêtre in 1840, when François Leuret was its director, and left behind a description of the punitive use of the *douche* as a “moral agent,” designed to “persuade” patients to renounce their “fantastical ideas.” According to Pliny Earle, Leuret’s use of hydrotherapy (on a patient who believed himself to be an intimate of Charles X and husband of the Duchess de Berri—he was neither) progressed as follows:

[Leuret] approached the patient…and then asked if he still believe himself to be a favourite of the royal family. “Oui, Monsieur,” was the instantaneous reply. “Give him the douche,” said [Leuret]. A servant who stood waiting orders, turned the water-cock and the stream fell directly
upon the vertex of the patient’s head. He struggled, writhed and screamed under the shock, and begged that it should be stopped. This request was complied with in a few seconds. [Leuret]. “Do you still entertain the foolish idea that you are an intimate friend of Charles X.” Patient. “I think I do.” [Leuret]. “Let him have the douche.” This was no sooner ordered that obeyed. The patient floundered, hallooed, and begged as before. The douche was stopped. [Leuret]. “Are you an intimate friend of Charles X. and the Duke de Bordeaux?” Patient. “I
“presume so.” [Leuret]. “Give him the douche.” It was given with all the previous results...In this manner nearly half an hour was occupied, the douche being administered whenever the patient insisted upon the truth of his fantastical ideas. At length, what with the arguments of the doctor, and what with the still more cool and cogent logic of cold water to the head, the patient yielded his points...

To such a course of treatment, Earle, a Quaker, was resolutely opposed. Indeed, he described it as “destitute of utility,” and declared that it was evident that the “the douche compelled the man to sacrifice truth on the altar of fear.” Yet, Earle did not reject hydrotherapy entirely. Instead, he argued that though water should not be used coercively, it could be of “decided advantage in all cases in which there exists a determination of blood to the brain, indicated by flushing of the face, and excessive heat, either constant or variable, of the integuments of the cranium.” In such cases, Earle described the douche as a “refreshment,” claiming that patients submitted readily to it.

Thus, there was in the first half of the 19th century, two distinct forms of hydrotherapeutic treatment of the mad: one based on
coercion and the other based on the rousing or soothing physiological effects of water. The chief distinction between Earle’s “refreshment” and the douche as it was used at Bicêtre or Salpêtrière, lay not in the ultimate goal of the doctors involved, but in their treatment philosophy… a philosophy best measured by the force with which the water struck the patient’s head or body. At Frankford, according to Earle, the cold shower was “constructed as to make the stream of water of variable size, from one-fourth to three-fourths of an inch in diameter” and to fall “from two to four feet, according to the situation of the head of the patient.” At Bicêtre the water was released by means of a “water-cock” and expelled at great force against the crown. The latter was used to cause pain and the former as a tonic.

In both cases, however, psychiatric hydrotherapy was regarded as a great improvement over punitive restraints or stupefying psychotropic drugs. Thus, more and more asylum doctors, in Europe and America, came to rely on hydrotherapy in the first half of the 19th century and to have suitable facilities erected at the hospitals they served.

(Ebenezer Haskell. The trial of Ebenezer Haskell, in lunacy, and his acquittal before Judge Brewster in November, 1868. Philadelphia: E. Haskell, 1869.)
Moreover, as the century wore on the punitive uses of the *douche* fell away, and the cold shower was used (or so it was claimed) exclusively to cool those who needed calming and rouse those who, because of a melancholic torpor, needed stimulus. In fact, the use of “refreshing” hydrotherapy became so widespread that Dr. Frederick Peterson, a physician at the Hudson River State Hospital in the 1880s, was able to write that in a tour of asylums for the insane in Germany, Holland, France, Belgium, Italy, and Austria in the winter of 1886-1887, I was surprised to find how universally hydrotherapy was employed in the treatment of certain conditions of insanity, and with what excellent results; and in a visit to the new insane asylum at Athens Greece, in 1892, I was astonished to note how well equipped a hydrotherapeutic establishment it possesses, although situated in a country we are disposed to consider somewhat out of the track of modern progress.

*Modern Psychiatric Hydrotherapy*

The surge in construction and use of modern hydrotherapeutic facilities recorded by Peterson was the result of several factors, of which the two most important were the expansion in basic sanitation infrastructure and the standardization of psychiatric education. That is, with the completion of massive municipal water projects—best exemplified in the United States by the construction, in 1815, of Philadelphia’s Fairmount Water Works, and in New York, in 1842, of the massive Croton Aqueduct system—more localities had the infrastructure to support hydrotherapy or, as it was sometimes called, hydropathy. (Such treatment had been previously limited to areas with easy access to water.) And, with the professionalization of psychiatry, programs especially designed to educate psychiatrists became more common, introducing greater uniformity into the the practice of psychiatry.

In other words, starting in the late eighteenth and continuing throughout the nineteenth, our modern sanitary infrastructure and psychiatric education system developed more or less concurrently.
And, as a result of their development, the availability and, hence, use of hydrotherapy exploded. Of particular importance was the increasingly “scientific” tenor of psychology and psychiatry. As psychiatric study became more firmly attached to science and physical medicine, psychiatric hydrotherapy became increasingly divorced (at least overtly) from both punishment and moral philosophy. It took on a more overtly scientific guise, and in place of philosophical expositions about the “mad idea”—which necessarily invoked Platonic idealism and ethics—doctors studied the physiological effects of different water treatments so that they might provide a scientific explanation for the efficacy of water-cure.

As a trend this coincided with a great upsurge in the use of hydrotherapies in popular culture. Urged on by the proprietors of hundreds of water-cure establishments throughout Europe and America, the middle and upper classes were seduced into trying a wide array of water treatments—all of which promised relief from the common ills of the day. Gout, rheumatism, tuberculosis, melancholy, indigestion were all treatable, or so it was argued, with water. The most influential advocate of such treatment was a peasant from Gräfenberg in Austrian Silesia named Vincenz Priessnitz, who developed the “cold water cure”—a combination regimen that required regular exercise, sweating and the use of

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**Morison’s “apparatus for giving the douche.”** (Sir Alexander Morison. *Cases of mental disease, with practical observations.* London: Longman & Highley, 1828.)
cold water immersion or wraps. A simple man with no medical training and only a rudimentary education, Priessnitz based his technique on traditional healing methods and offered neither luxury nor, in many cases, even ordinary comfort. Still, within just a few years of the opening of his *wasserkur* clinic in Gräfenberg in 1822 Priessnitz had attained a continental reputation; and, by 1840 he was treating 1,600 patients a year, including royalty.

Of course, because he lacked medical training, Priessnitz kept no case records and therefore could provide no clinical proof of success. Yet, he seems to have had no need of proof. His fame was spread so effectively by patient testimonials that by the 1840s *wasserkur* had become a full-fledged fad. Imitators opened up non-medical water-cure establishments throughout Europe, Great Britain and the United States, so that within very short time, hydrotherapy became the alternative of choice for patients seeking to augment or avoid more orthodox medical treatments. As Janet Browne writes in her article on Darwin’s stay at the hydrotherapeutic facility at Malvern, by the 1850s “despite scandals about the

![Vincenz Priessnitz, developer of the water cure.](Wikipedia. Public Domain.)
First morning at Water Cure. Bathman brings the wet sheet.

"But I am sure I shall get my death of cold."


Preparing for the packing.

"Why my nearest and dearest friends wouldn't know me. I'm a perfect mummy!"

dramatic death of at least one aristocratic patient, there were 24 water-cure establishments in Britain and Ireland, many of which were famous enough to be known simply by the owner’s name, and the water-cure had become an extraordinary social phenomenon noisily discussed in *Punch*, and other prominent London journals.”

It was in this environment that modern advocates of hydrotherapy established the scientific basis of treatment by water and advocated its institutional use.

Of these advocates, Wilhelm Winternitz (1835-1917) of Vienna, though not a psychiatrist *per se*, was probably the man most responsible for giving hydrotherapy its physiological basis and hence paving the way for institutional psychiatric use of hydrotherapy. Winternitz wrote his dissertation on Priessnitz’s *Wasserkur* as a medical student—in his research measuring the pulse rate of Priessnitz’s patients and performing other physiological tests of the efficacy of water-cure. Later he established a hydrotherapy clinic while on the faculty of the University of Vienna and opened his own water cure resort at Kaltenleutgeben, a short distance from Vienna, using the term *hydrotherapy* to distinguish

Fig. 6.—Preparation of wet pack: a, b, Blanket over pillow 1 inch above nucha; c, wet sheet being smoothed out by nurse. After lecture at Naval Medical School. (Courtesy of Surgeon-general’s Instruction Laboratory.)

his methods from the unscientific hydropathy of the water cure practitioners.

A contemporary of Winternitz and admirer of his work, Simon Baruch (1840-1921) was the most influential and tireless advocate of psychiatric hydrotherapy in the United States. After presenting, in 1889, a paper at the New York Academy of Medicine entitled “A Plea for the Practical Utilization of Hydrotherapy,” Baruch, who was staff physician at Montefiore hospital, equipped and opened a hydrotherapy unit. At first he treated a variety of chronic conditions, particularly tuberculous, with limited success. Yet, over time Baruch began accepting neurasthenic patients referred to him by S. Weir Mitchell and others and met with more success treating “functional diseases”—i.e. psychosomatic complaints.

Attempting to refine his use of hydrotherapy, Dr. Baruch then went on to work with plumbing fixture manufacturers to design and produce the equipment needed for hydrotherapeutic treatment. Indeed, he designed and equipped the hydrotherapy suite at the new Bloomingdale Hospital in White Plains (opened in 1894) and in 1895 directed the extension of the settlement facilities at the Riverside Association, including the creation of a hydriatic department. Moreover, unlike the spa and water-cure establishments that proliferated in the first part of the century,
Baruch’s facilities were often used to treat the poor and those afflicted with chronic diseases who had been referred by dispensaries and outpatient departments of the city’s hospitals. And, it was largely on the basis of his work with such patients that Baruch published his famous textbook, *The Principles and Practice of Hydrotherapy*, in 1898. This firmly established his reputation as the foremost hydrotherapist in the United States. A reputation that was further cemented when, in 1907, Dr. Baruch was named Professor of Hydrotherapy at Columbia University’s College of Physicians and Surgeons, where he succeeded in having a course in hydrotherapeutics added to the required course of study.

From this beginning, use of hydrotherapy in American psychiatric hospitals grew rapidly in the first two decades of the twentieth century. It was an era with few successful treatments for mental disorder, and so prolonged baths and wet packs, considered “therapeutic” by psychiatrists, replaced physical restraints for agitated patients in many instances.

Indeed, Bloomingdale Hospital well illustrates the rise and decline of hydrotherapy: in 1921, 3,226 prolonged continuous baths were given to 126 patients. By 1929 the figure had increased to
8,181 prolonged baths given to 206 patients. However, by 1944 the New York Hospital-Westchester Division’s annual report indicated that 3,907 prolonged baths were given to 137 female patients, and that “packs and prolonged baths were used to a substantially smaller degree for the men patients who in general are not as disturbed and difficult to care for as the women patients.” It was a decline seen throughout the country. Moreover, foreshadowing the future, the annual report also said that “the pack room in the men’s physical therapy building has been especially equipped and utilized for electric shock treatment of the men patients.”

The development of chlorpromazine and other neuroleptics in the 1950s ended the widespread use of hydrotherapy in American psychiatric hospitals. Hydrotherapy treatments were staff-intensive, and so as staffing costs rose, simply dispensing medication became more cost-effective. By the 1970s, the unused hydrotherapy suites of mental hospitals had become relics of a bygone era.

*Diane Richardson, M.L.I.S.*
*Siovahn A. Walker, M.A.*

*Monitoring Water temperature in a continuous prolonged bath, Payne Whitney Clinic.* (Photography courtesy of Weill Cornell Medical Archives.)
In September 1912, Carl Jung delivered a series of lectures at Fordham University whose ostensible purpose was to explain Freud’s theories of psychoanalysis, but whose outcome was to demonstrate Jung’s own dissension. In the lecture on the Oedipus complex, Jung rejected Freud’s emphasis on the father-son-mother triad and almost offhandedly suggested a corresponding Electra complex. He never developed this paradigm to formulate a specific theory of female psychological development, but almost fifty years later he again cited Electra, when referring to his idea of psychological exogamy, the individual’s need to leave his/her family and its entanglements to create a new family. Jung argued that intra-familial conflict could impede that process.

Freud dismissed the Electra complex as theoretically redundant and did so three times over eighteen years—once in a footnote and twice in the text of his essay [see Index to Standard Edition]. Significantly, he never mentioned Jung’s name. Perhaps because the allusions are made without attribution, Freud’s own name has remained insistently attached to the Electra complex. So insistently and frequently that, arguably, the misattribution has created its own cultural history. And it is for this reason that Jill Scott’s study of Electra, *Electra After Freud*, affords Freud a central position—not because she proposes to validate psychoanalysis but because of Freud’s widespread influence and references to the Electra complex. Scott is well aware that it was Jung who introduced the Electra complex as a corollary to the Oedipus complex. Her argument infers that because Jung never expanded on this idea, whereas Freud took up the subjects of female psychology and sexuality (if not to the satisfaction of all), Freud can be said to have theorized about an Electra complex.

It is not necessary to claim that Jung’s time has come in order to contend that Electra’s has. Reasons for her importance thread
their way through Scott’s reiterated themes (as she asks whether Electra has not proven more important to the twentieth century than Oedipus and then affirmatively answers her own question through a close reading of some of the many works on Electra written in modern times). One reason concerns the many challenges to psychoanalysis as well as a widespread skepticism about the accuracy and universality of the Oedipus complex. There has also been a general dissatisfaction with Freud’s account of woman’s psychological development. Likewise, the stories of Electra’s conflict with her mother Clytemnestra join a growing mother-daughter literature that demands consideration alongside traditional father-son works. Finally, there is currently a quest to find in myth and literature female models of strength, endurance, and heroism.

Although outside the boundaries of Scott’s study, there is yet another reason why Electra’s story has acquired importance: that is, the growing interest in the so-called dysfunctional family. It would be a great exaggeration to say that compared to the House of Atreus, the House of Laius hardly seems exceptional—but it makes the point. In *Tragic Drama and the Family*, Bennett Simon cites Aristotle to claim that the “best tragic dramas deal with famous mythological houses, families in which terrible deeds took place.” Simon’s opening sentence proclaims that “tragic drama and the study of the family are inextricably intertwined—that is the thesis of this book.” Significantly, Simon mentions Oedipus only in passing but devotes an entire chapter to the Oresteia, to the House of Atreus, whose crimes include cannibalism, infanticide, incest, adultery, murder, human sacrifice, widespread intra-familial lying and treachery, and finally the matricide in which—depending on whether Aeschylus, Sophocles, or Euripides is under consideration (all wrote surviving plays about Clytemnestra’s murder)—Electra is depicted either as a relatively passive accomplice of her brother Orestes or an active participant. As a result, disturbed family relations are to be found on most pages of Scott’s book, creating absorbing reading for anyone interested in the family as a psychological unit.

Among many possible texts, Jill Scott has chosen to discuss the Elektra drama of Hugo von Hofmannsthal and the Richard Strauss
opera based on it; Heiner Müller’s *Hamletmaschine*, Robert Musil’s *The Man without Qualities*, the Electra poetry of H.D. and Sylvia Plath; and Freud’s case history of “Fraulein Anna O.” (Had she chosen Eugene O’Neill’s *Mourning Becomes Electra*, Scott might have had to consider Oedipus and Electra in the twentieth century rather than as the two complexes coexist in that play.) In her analyses, Scott proves an extraordinarily talented close reader of texts, able to engage other critics in dialogue over shared themes, for her book is extremely well-researched and those she draws on for support or those with whom she disagrees are clearly invoked in her discussion. The 172 pages of her text are very dense, packed with detail and argument. Still, despite its brevity *Electra after Freud* is not a quick read (there are also footnotes, an extensive bibliography, and a detailed name and subject index). Among her themes, in addition to those noted above, Scott offers a fascinating discussion of dance as a cultural phenomenon, a “somatic” language, tracing its meaning from the ecstatic movements of those thought to be possessed, to the Dance of Death, to the Viennese waltz as a sign of cultural decadence, and even to the body language of the hysteric. The latter is part of an extremely interesting and provocative argument that in his *Elektra*, Hofmannsthal was indebted to Freud’s case study of Anna O.

Probably the greatest challenge to Scott’s study has to do with claims for Electra as a feminist heroine. In order to afford her that status, it is necessary to diminish Orestes’s role in the matricide. Scott does so in her opening sentence when she asks whether the twentieth (and presumably twenty-first) century belongs to Oedipus or Electra, depreciates Aeschylus in favor of Sophocles and particularly Euripides (because in their plays Electra is a stronger, less passive character), and approvingly discusses authors who allow Electra to overshadow Orestes. All of these arguments are debatable. Scott moreover fails to consider the psychoanalysts who have written on the close connection between Orestes and Oedipus. Their views find support in Aeschylus’s *Agamemnon*, which depicts the oedipal conflict Orestes experiences when confronting Clytemnestra, who is both frantic and seductive as she tries to prevent her son from killing her. In Aeschylus the main dramatic confrontation is between mother and son. In
Sophocles, it is mother and daughter who angrily face each other. And, in Euripides sibling relations appear emphasized.

Even more challenging is a large body of writing that Scott relegates to a footnote. Defenders of Clytemnestra—and there are many—view Electra as an apostate to the feminist cause for two reasons. First, she helps kill her mother, an act opposed to female bonding and a sign of how Electra has internalized patriarchy. Some anti-Electra critics point out that in Euripides, Electra lures Clytemnestra to her death by manipulating and perverting what should unite mothers and daughters: Electra summons Clytemnestra to her with the lie that she has given birth and needs her mother. Second, the acquittal of Orestes in a court of law presided over by Athena (the goddess born without a mother) can be read as the final defeat of matriarchy by patriarchy.

Scott herself moves toward and then away from this position when she discusses J. J. Bachofen, one of the cultural theorists she “engages” in her book. Like Freud, who was influenced by him, Bachofen writes approvingly of the evolution from matriarchy to patriarchy, Clytemnestra’s death emblematic of that process. But whereas Freud only tentatively cites the Oresteia in Moses and Monotheism (perhaps he did not want to draw too much attention to a myth that might rival Oedipus’s), Bachofen elaborates on the matricide—and in a most interesting fashion. Rather than dwell on Clytemnestra’s crimes (perhaps because they can be excused if not justified), he focuses on the Erinyes (the Furies) who will not condemn her for killing Agamemnon. They are those primitive beings who represent an archaic justice predicated on vengeance. Defeated but placated in Aeschylus’s Eumenides, which dramatizes Orestes’s trial by jury, the Erinyes retain a position in the new Athenian society. For Bachofen (and Freud) they represent an irrational female principle that cannot be eradicated and must therefore be contained. From this perspective it is difficult to create a feminist heroine out of Electra. As Carolyn Heilbron has argued, Electra is not so much the victim of patriarchy as “its instrument.” That position has yet to be successfully defeated, although the whole point of Scott’s book is to try.

Is the mythical Electra to be characterized as the young woman who loved her father too much, or as one who too fiercely loathed
her mother? Scott’s book raises both possibilities, her discussion indicating that in the former instance, reconciliation with the mother is more easily achieved. One can add that in the latter case, Electra’s story closely resembles Oedipus’s. To prevail as a strong, resolute woman, Electra must subdue her rival, same-sex parent, defeating a weaker Clytemnestra than the myth or contemporary feminism allow. (For portrayal of this subservient Clytemnestra, see Scott on H.D.) Electra after Freud opens up these issues and is therefore a welcome addition to myth and the history of psychiatry. Jill Scott’s Electra will remain a difficult, ambiguous character who may not displace Oedipus but who will almost certainly demand her position alongside him.

Barbara F. Leavy, Ph.D.

On May 17, 2006, Dr. George Makari, when introducing Professor Stanley Finger from the Department of Psychology at Washington University in St. Louis, Missouri at Psychiatric Grand Rounds, characterized Dr. Finger’s role in furthering historical studies in neuroscience as somewhat parallel to Dr. Carlson’s role regarding the history of psychiatry. Finger’s highly regarded books, *Origins of Neuroscience: A History of Explorations into Brain Function* and *Minds Behind the Brain* (NY: Oxford University Press, 1994, 2000) as well as his hot-off-the-press *Dr. Franklin’s Medicine* (Philadelphia: University of Pennsylvania Press, 2006), when assembled alongside several other co-edited and co-authored books, over 150 papers, book chapters and encyclopedia articles, reflect not only original contributions to the understanding of brain damage, brain recovery, and other aspects of neuroscience, but also have been foundational for the history of neuroscience.

Holder of an A.B. from Hunter College (1964) and an M.S. and Ph.D from Indiana University in Bloomington (1966 and 1968), Dr. Finger got his first academic appointment at Washington University where he remains today as a productive and appreciated faculty member, participating actively not only in the Psychology Department but also in the Program in Neural Sciences and the Philosophy-Neuroscience-Psychology Program. In the wider world, among other activities, Dr. Finger is a charter Member and past President (1995-96) of the International Society for the History of the Neurosciences and has been Senior Editor of the *Journal of the History of the Neurosciences* since 1996. He has received many research grants, awards and honors, and has served as advisor for various media presentations and museum exhibits.

In recent times, Professor Finger began researching the considerable medical and public health interests and contributions
of that remarkable American enlightenment figure, Benjamin Franklin. Following a brief review of Franklin’s long life (1706-1790) in Boston, Philadelphia, England, and France, his late life personal ills (gout, bladder stone, presbyopia), and his world-wide fame as printer-publisher-writer, postmaster-general, statesman-diplomat, and scientist (or experimental natural philosopher), our speaker moved to Franklin’s role as “Man of Medicine,” citing more than a dozen areas of involvement. Among these Finger mentioned Franklin’s founding of the Pennsylvania Hospital (1751), first permanent public hospital for indigents in the colonies; establishment of the first medical school in the American colonies (1765) which later became the University of Pennsylvania Medical School; sending Drs. William Shippen, John Morgan, Benjamin Rush and other gifted physicians to work at the leading medical school of Edinburgh, Scotland so they could participate in the founding and development of the medical school; promoting good hygiene and exercise (he was an excellent and inventive swimmer); emphasizing the need for fresh air (his Franklin stove was designed not only for better heating efficiency but to clear unhealthy soot from rooms); advocating for a lead-free environment; backing the recently developed smallpox innoculation; preaching proper nutrition, breast-feeding, and good methods of child-rearing; debunking wild claims for the efficacy of mesmerism with experiments that showed its limitations; inventing a glass keyboard instrument, the Armonium, which produced an eerie sound, used by Anton Mesmer during group sessions (and thought by some as a kind of music therapy but by others as a stimulus to madness); inventing prosthetic aids including bifocal eyeglasses and a long-arm pincer to extend one’s reach to high shelves; and perfecting a practical method of applying electrical shocks for medical and psychiatric purposes.

Dr. Finger summarized Franklin’s experimental and theoretical contributions to the study of electricity, including his theory of “points”, his kite experiments, his invention of an effective lightning rod (1750), his coining of terms and concepts still used in the field, and his internationally circulated publication “Experiments and Observations on Electricity” (1751) that brought him great acclaim in Europe as well as in the American colonies. It was
related how Franklin imported, improved, and distributed equipment for applying medical electricity, treated clients himself and taught them or their doctors to use the apparatus. Furthermore, he accumulated trial and error results, obtained by him and others, regarding safety and effectiveness. He eventually concluded that electric shock treatments had valid applications but were definitely not a panacea. Medical treatments must be established through scientific experimentation, and it was unwise to generalize without sufficient evidence.

Later in the day, Professor Finger presented a talk to the Richardson History of Psychiatry Research Seminar that overlapped with the Carlson Lecture, but focused on Benjamin Franklin’s interest in electrical shock-induced amnesia and made the case that Franklin was the first to offer detailed descriptions of this phenomenon in the 1750s. There were letters to colleagues recounting shocks to the head that Franklin himself suffered while attempting to treat clients using electricity generated by Leyden jars. Experiences of patients Franklin saw and with whom he corresponded were reviewed, along with accounts of eminent contemporary colleagues at home and abroad, with whom Franklin corresponded freely.

A lively and free ranging discussion followed each presentation, provoking additional interesting historical facts and prospectives from Professor Finger, who stoutly defended Franklin’s strong scientific curiosity, love of discovery and altruistic wish to aid humanity and characterized them as driving his interest in medicine and public health. Moreover, he emphasized that knowledge of Benjamin Franklin’s life keeps accumulating. When Carl Van Doren wrote his biography only 6,000 letters were available to him; but Dr. Finger stated that now 30,000 are known (as catalogued by the Packard Humanities Institute at Los Altos, California) and that the intriguing founding father is still “a moving target.”

The reviewer was stimulated by these talks to further reading on Ben Franklin, all of which can be highly recommended: Professor Finger’s *Doctor Franklin’s Medicine* (University of Pennsylvania Press, 2006); Walter Isaacson’s *Benjamin Franklin: An American Life* (Simon & Schuster, 2003); Stacy Schiff’s *A Great Improvisation: Franklin, France and the Birth of America* (Henry Holt,

*Doris B. Nagel, M.D.*

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The Richardson History of Psychiatry Research Seminar, the longest running seminar of its kind in the nation, continued to flourish as the venue for an eclectic series of presentations by a variety of homegrown and imported speakers. As usual, our speakers addressed a wide range of topics including psychiatric nosology, philosophy, psychoanalysis, and literature. Moreover, this year’s seminar series was graced with the inauguration of a lectureship honoring our long-time member and dear friend, Aaron Esman. This lectureship, endowed by Dr. Esman’s family, commenced with a wonderful presentation entitled “Hamlet and Analytic Experience” by Prof. Paul Schwaber.

While our distinguished speakers deserve kudos, I am especially grateful to the cadre of loyal members who attend and support our seminar. Their participation determines in large part the quality of our discourse. I also wish to thank my predecessor, Daria Colombo, for handing off the seminar in thriving condition.

Nathan Kravis, M.D.
September 7
Leon Hankoff, M.D., Cornell University.
“The Thrice-told Tale”

September 21
David Sloan Wilson, Ph.D., SUNY Binghamton.
“Health and the Ecology of Altruism”

October 5
Ben Shephard, Oxford University.
“Abram Kardiner, Thomas W. Salmon, and the Origins of PTSD”

October 19
Diane O’Donoghue Ph.D., Tufts University.
“Lingua Flora: Deciphering the ‘Dream of the Botanical Monograph’”

November 2
Richard B. Grose, Ph.D., IPTAR.
“Mikhail Zoshchenko: A Soviet Writer’s Understanding of Freudian Psychoanalysis”

December 7
Joe Fins, M.D., Cornell University.
“Neuroethics: Historical Considerations”

December 21
Paul Schwaber, Ph.D., Wesleyan University.
First Annual Aaron Esman, M.D. Seminar
“Hamlet and Analytic Experience”

January 4
Daniel Rencour-Laferriere, Ph.D.,
University of California/Davis.
“Leo Tolstoy’s Pantheism in Psychoanalytic Perspective.”
February 1
Charles Shepherdson, Ph.D., SUNY/Albany.
“Fear and Anxiety: Kant, Freud, Lacan”

February 15
Gregg Horowitz, Ph.D., Vanderbilt University.
“The Weak Father”

March 1
Louis Sass, Ph.D., Rutgers University.
“Explaining Schizophrenia: The Relevance of Phenomenology”

March 15
Joel Whitebook, Ph.D., Columbia University.
“Was Heisst Wissenschaft? On Freud’s Concept of Science”

April 5
Sabine Arnaud
CUNY and École des Hautes Études en Sciences Sociales.
“The Construction of the Category of Hysteria and the Shift from a Humoral to a Nerve Paradigm in France (1750-1810)”

April 19
Steven Meyer, Ph.D., Washington University.
“An Alternative to the Dynamic Unconscious? Whiteheadian Symbolism, Francis Bacon, John Ashbery”

May 17
Stanley Finger, Ph.D., Washington University in St. Louis.
Eric T. Carlson M.D. Memorial Grand Rounds Lecture
“Dr. Benjamin Franklin’s Neurology and Psychiatry”

Richardson History of Psychiatry Seminar
“Benjamin Franklin and Electrical Shock-Induced Amnesia”
The Working Group on Psychoanalysis and the Arts has expanded its membership from last year to this. We have continued our lively discussions of works of literature suggested by members of the group. Having ended last year with Faulkner, we decided to continue this fall with his *Absalom! Absalom!* Christina Treece, a new member of the group, led the discussion. On an altogether different note, we then read Philip Roth’s *Portnoy’s Complaint*, with David Ott leading the discussion. In the spring our first two meetings were about memoir—specifically, *The Autobiography of Benjamin Franklin* and Vladimir Nabokov’s *Speak Memory*, with discussion led by Nathan Kravis and Katherine Dalsimer, respectively. Neala Rafizadeh led a discussion on Truman Capote’s *In Cold Blood*, and for our final meeting we returned to Nabokov, with Anne Hoffman leading a discussion of *Lolita*—now 50 years old.

*Katherine Dalsimer, Ph.D.*

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*Katherine Dalsimer, Ph.D.*

Beginning with our reading of excerpts from the *Minutes of the Vienna Psychoanalytic Society* and Waelder’s 1962 paper on “Psychoanalysis, scientific method, and philosophy,” the group plunged itself into an extended historical examination of how notions of science have evolved over the past century and how these changes affect our understanding of psychoanalysis and its history.

We sampled several works – including Ludwik Fleck’s *Genesis and Development of a Scientific Fact* (1935), R.G. Collingwood’s *The Idea of History* (1946), and W.V.O. Quine’s “Two dogmas of empiricism” (1951) – that stimulated the group to explore ways in
which history and science are organized by discursive communities, or what Fleck called “thought collectives.” Whether devoted to the tasks of history or science, thought collectives ask questions and generate answers governed by rules of evidence consen-sually agreed upon by a community of similarly trained practitioners.

Our earlier discussions of the Minutes and of Waelder led us to consider the designation of scientific facts. According to Fleck, ‘facts’ are the boundaries within which the thought collective works. A ‘fact’ is a variable taken as constant for the purpose of the task at hand, ignoring or forgetting that it was chosen as a necessary boundary or constraint to facilitate theory building. A similar perspective led Quine to reject the sharp dichotomization by logical positivism of statements into synthetic and analytic (the former being sensory data reports admitting of confirmation or disconfirmation, the latter are the propositions of logic and mathematics whose denial would involve self-contradiction), as well as the reductionism that holds that individual statements are verifiable. The unit of verification for science (Quine might not have had psychoanalysis in mind, but we did) is not single statements but the whole science – a kind of radical holism. Building upon Duhem’s notion of the under-determination of theory by experience, Quine sees any field of inquiry as comprised of an “experiential periphery” and an interior of core ideas, beliefs, or principles. With this schema in mind, it becomes “misleading to speak of the empirical content of an individual statement – especially if it is a statement at all remote from the experiential periphery of the field…[since any] statement can be held true come what may, if we make drastic enough adjustments elsewhere in the system.” Despite this apparent invitation to relativism, Fleck insisted that truth is neither relative nor subjective. Rather, he thought of truth as the strongly determined boundary product of the historically evolved “thought style” of a given thought collective. “Truth is not a convention,” Fleck wrote, “but rather (1) in historical perspective, an event in the history of thought, (2) in its contemporary context, stylized thought constraint.”

Many in the group noted the striking similarity of Fleck’s classic work to what Kuhn was later to write in The Structure of Scientific Revolutions (1962), though Fleck placed greater emphasis
on the inter-connectedness or inter-dependence of knowledge claims. (So did Collingwood, who wrote that “historical knowledge can only grow out of historical knowledge.”) Both Fleck and Kuhn can be read as viewing science as a collective human endeavor co-determined by reality and by socio-cultural factors. At certain stages it is important for the thought collective to shut out the larger world and work with a closed system in order to develop its core ideas; at a later stage, the reverse is true.

While neither Fleck nor Kuhn interest themselves much in the natural history of thought collectives, some of the other authors we read prompted such consideration. Excerpts from Elliot Krause’s *Death of the Guilds: Professions, States, and the Advance of Capitalism, 1930 to the Present* (1996) juxtaposed to a re-reading of Freud’s *On the History of the Psychoanalytic Movement* (1914) led us to examine the uneasy marriage of guild and science in psychoanalysis. The latter text not only illuminates a turning point in Freud’s thinking with respect to how to define psychoanalysis, it also can be said to epitomize an historical moment of clash between – or, more charitably, an intersection of – the necessary codification of doctrine for the purposes of scientific progress and the guild-strengthening aims of professionalization, including the marshalling of social and political resources implied by the invocation of the term ‘movement’.


As in the past, the passionate disagreements of its members sustained the group’s tradition of animated and invigorating colloquy.

Nathan Kravis, M.D.
WORKING GROUP ON THE HISTORY OF NEUROSCIENCE

The Working Group on the History of Neuroscience, chaired by Dr. David Silbersweig, Dr. Francis Lee, and Dr. George Makari continued into its second year in order to bring together neuroscience researchers at Cornell to engage in historical readings that would stimulate discussions on past and current issues in neuroscience. The group consists of research psychiatrists, psychologists, and neurologists. The group read three different reports, at different stages of observation, of the famed Kluver Bucy experiments (1937) in which monkeys underwent bilateral temporal lobectomy. Next, the group read works from Wilder Penifeld (“The Mystery of the Mind,” 1975) and Donald Hebb (“The Organization of Behavior,” 1949). As the group develops, additional models of central nervous system function will be explored, with the hope of making relevant connections to the previous readings, as well as current models in neuroscience.

Francis Lee, M.D.

(Courtesy of the John W. Hartman Center for Sales, Advertising & Marketing History, Rare Book, Manuscript and Special Collections Library, Duke University.)
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Nathan M. Kravis,  Associate Director
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Samantha Boardman, M.D.
Daria Colombo, M.D.
Norman Dain, Ph.D.  (Rutgers University)
Katherine Dalsimer, Ph.D.
Aaron H. Esman, M.D.
Joseph J. Fins, M.D., F.A.C.P.
Lawrence Friedman, M.D.
William A. Frosch, M.D.
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Paul E. Stepansky, Ph.D.
Rosemary A. Stevens, Ph.D., M.P.H.
Craig Tomlinson, M.D.  (Columbia University)

All have appointments at or are employed by Weill Medical College of Cornell University. If a member’s primary academic position is elsewhere, it is given in parentheses.
Anna M. Antonovsky, Ph.D. has continued to be active as a training and supervising analyst of the Institute for Psychoanalytic Study and Research and to pursue her interest in the nature of thinking and understanding and their place in the individual’s psychic life. Currently, she is exploring the approach offered by the late Hannah Arendt to these questions.

Michael Beldoch, Ph.D. continues as a Clinical Professor at Weill Medical College of Cornell University and is an active member of the Working Group on the History of Psychoanalysis.

Samantha Boardman, M.D. studied History of Science at Harvard University before completing her medical training at Cornell and her residency in Psychiatry at Payne Whitney. Most recently, she gave a lecture on psychiatric medications for social workers at the Medical and Health Research Association (MHRA) and collaborated with Dr. George Makari to write an article on the history of Blackwell Island for the American Journal of Psychiatry.

Daria Colombo, M.D. is a senior candidate at The New York Psychoanalytic Institute and supervises Payne Whitney residents. She is the editor of Philoctetes, the new journal of The Philocetetes Center, where she moderated a roundtable in June on psychoanalytic journals. She is also an editorial associate for The Journal of the American Psychoanalytic Association.

Norman Dain, Ph.D. continues to survey his research files and book collection, and in consultation with Librarian Diane Richardson has donated additional historical material to the Oskar Diethelm Library.

Katherine Dalsimer, Ph.D. taught an elective on poetry to PGY III’s and IV’s—a seminar entitled “Ear Training.” Within the History Section, she coordinates the Working Group on Psychoanalysis and the Arts. In spring, 2006, her book Virginia Woolf: Becoming a Writer was reviewed in the Journal of the American
Psychoanalytic Association. Dr. Dalsimer also supervises post-doctoral fellows at the Columbia University Mental Health Service.

Aaron H. Esman, M.D. has continued his activity in the Institute, participating in the Working Group on the History of Psychoanalysis and the Working Group on Psychoanalysis and the Arts. In addition to his publications listed below, Dr. Esman lectured on “The Case of Adolf Wölfli” for Grand Rounds at AECOM, Department of Psychiatry (Montefiore Hospital) on Dec. 1, 2005 entitled and taught a seminar on Adolescent Development in The Child and Adolescent Analysis Program at IPTAR.

Joseph J. Fins, M.D., F.A.C.P. is Chief of the Division of Medical Ethics in the Departments of Public Health and Medicine at Weill Medical College of Cornell University where he serves a Professor of Medicine and Professor of Medicine in Psychiatry. In 2005-2006, Dr. Fins was a fellow at the Richard W. Riley Institute of Government, Politics and Public Leadership of Furman University, received a Weill Cornell Teaching Award, was elected to the Board of Directors of the American Society of Bioethics and Humanities, and served as Governor Elect Designee for the American College of Physicians (New York Downstate Region), among many other activities and honors. Dr. Fins also presented widely, giving talks at the Center for Neurological Restoration at The Cleveland Clinic and to the American College of Physicians, as well as serving as grand rounds lecturer at Montefiore Medical Center, South Hampton Hospital, New York Methodist Hospital, Memorial Sloan-Kettering Cancer Center and elsewhere. His current scholarly interests include ethical issues at the end-of-life and palliative care, research ethics in neurology and psychiatry, medical education and methods of ethics case consultation.

Lawrence Friedman, M.D. is on the Faculty of the N.Y.U. Psychoanalytic Institute, an Advisor to its Curriculum Committee, and a member of its Curriculum Revision Committee. He is on the Board of Directors of the Psychoanalytic Association of New York and teaches a yearly session on hermeneutics at the Columbia Psychoanalytic Institute. In the American Psychoanalytic
Association, he serves on the Program Committee, the Project for Innovation in Psychoanalytic Education, and a subcommittee on Psychoanalytic Teaching. He continues as Associate Editor of the *Journal of the American Psychoanalytic Association*, and is a member of the Editorial Board of *Psychoanalytic Inquiry*, and the *Psychoanalytic Quarterly*, for which he serves also on the Board of Directors. North American coordinator for the Education Section of the *International Journal of Psychoanalysis*, he presented the Freud Anniversary Lecture at the Denver Psychoanalytic Society and participated in a Panel on Gray’s Close Process Attention, at the Annual Meeting of the American Psychoanalytic Association.

**William A. Frosch, M.D.**, now Professor Emeritus, remains an active teacher of medical students during their third year clinical rotation on the in-patient service, and continues to supervise residents, as well as provide administrative supervision for Chief Residents. He is currently preparing a book review, *Psychiatric Issues in Parkinson’s Disease: A Practical Guide* (editors M. Menza and L. Marsh) for an upcoming issue of the *American Journal of Psychiatry*.

**Sander L. Gilman, Ph.D.**, a cultural and literary historian, is the author or editor of over seventy books and serves as Distinguished Professor of the Liberal Arts and Sciences at Emory University. Most recently, he published a biography of Franz Kafka.

**Robert Goldstein, M.D.** is on the voluntary faculty at NYPH/Weill-Cornell Medical College and continues his research on heritable dimensions of temperament. He is a participant in the History of Neuroscience Working Group.

**Gerald N. Grob, Ph.D.**, Henry E. Sigerist Professor of the History of Medicine, Emeritus at Rutgers, is completing (with Howard H. Goldman, M.D., Ph.D.) a book on mental health policy from 1945-present. During this past year he received a Lifetime Achievement Award from the American Association for the History of Medicine, presented on “Biomedicine in the 20th Century: Practices, Policies, and Politics” at the NIH, “Deinstitutionalization: Policy Failure or Success?” at the NYU School of Medicine, as well as on “The
Causes and Consequences of Deinstitutionalization” at the Department of Psychiatry, Einstein Medical Center.

**Leonard C. Groopman, M.D., Ph.D.** is a Faculty Associate in the Division of Medical Ethics at Weill Medical College of Cornell University and in this past year received an Excellence in Teaching Award from Weill Cornell Medical College for his teaching of ethics. His essay “The Patient’s Work” (co-authored with Dr. Joe Fins and Dr. Frank Miller) is forthcoming in *The Cambridge Quarterly*.

**Leon D. Hankoff, M.D.** continues as a voluntary faculty member at Weill Medical College of Cornell University. He is currently working on a book called *The Founders of Judaism and Christianity*, and recently gave a lecture to the Archeological Society of America on the life of Flavius Josephus.

**Nathan M. Kravis, M.D.**, Associate Director of Cornell’s Institute for the History of Psychiatry, teaches and supervises Payne Whitney residents and psychoanalytic candidates at Columbia University where he is a Training and Supervising Analyst. In the 2005-2006 academic year, he presented his paper, “À la recherche du temps jamais vu: Thoughts about the Future for Columbia’s Sextennial” at a sixtieth anniversary symposium of the Columbia Psychoanalytic Center (November 2005). He serves on the editorial board of the *Journal of the American Psychoanalytic Association*.

**Barbara Fass Leavy, Ph.D.** continues to write reviews and performer profiles for the entertainment magazine *Cabaret Scenes*, choosing shows with particular cultural interest. This year she has also begun to seek a publisher for her book on crime fiction and the Electra complex. See this issue for her review of Jill Scott’s *Electra After Freud: Myth and Culture* (Cornell University Press, 2005).

**George J. Makari, M.D.** is Director of the Institute for the History of Psychiatry, Associate Professor of Psychiatry at Cornell, and continues as Visiting Associate Professor at Rockefeller University. He serves on numerous editorial boards including: *Psychoanalytic Quarterly, Academic Psychiatry, History of Psychiatry, Psychiatrie, Sciences*
Humaines, Neurosciences, American Imago, and Journal of the History of the Behavioral Sciences. He also serves as co-editor of the Cornell Studies in the History of Psychiatry book series. Dr. Makari teaches aspects of the history of psychoanalysis and psychiatry to Cornell’s psychiatry residents and Columbia’s psychoanalytic candidates as well as supervises electives in the history of psychiatry with Cornell medical students. During the past academic year, he gave the Samuel Perry Memorial Lecture at Cornell’s Weill Medical College, co-authored an article with Samantha Boardman on the psychiatric institution at Blackwell’s Island, and published book reviews in American Imago and the Bulletin of the History of Medicine. His book, A Revolution in Mind, on the development and evolution of psychoanalysis in Europe is forthcoming from HarperCollins.

Robert Michels, M.D. delivered grand rounds at North Shore University Hospital in Manhasset, New York and at the Metropolitan Hospital Center in New York City. He presented a paper at The New York Freudian Society and spoke at the Columbia University symposium, “Psychoanalysis at Columbia: the First 60 Years.” Dr. Michels was a panelist at a multi-IPA institute sponsored symposium on boundary violations as well as discussions hosted by the Association for Psychoanalytic Medicine, The Philoctetes Center in New York, and National Public Radio (on its “On Point” program marking the 150th anniversary of Freud’s birth). Deputy Editor of The American Journal of Psychiatry, Dr. Michels is active on the editorial boards of Clinical Neuroscience Research, Psychiatry, Psychoanalytic Quarterly and The International Journal of Psychoanalysis.

Doris B. Nagel, M.D. continues her research on the diagnosis and the treatment of schizophrenia in the first half of the 20th Century in the United States.

Louis A. Sass, Ph.D. was a Visiting Professor on the Psychology Faculty of the University of Oviedo and a Visiting Professor at the Center for Subjectivity Research at the University of Copenhagen. President-elect of Division 24 of the American Psychological Association (Society for Theoretical and Philosophical Psychology), Dr. Sass lectured widely in the past year:
at, among others, the Universities of Utrecht, Copenhagen, and Melbourne, as well as the PACE Clinic in Melbourne and the Institute of Psychiatry in London.

Theodore Shapiro, M.D. Professor of Psychiatry, Emeritus, at Weill Cornell College of Medicine, is a member of the Working Group on the History of Psychoanalysis. Still Director of the Infant Psychiatry Program of the Sackler Institute, Dr. Shapiro continues to teach Residents. He completed six months as Chair of the Search Committee for the Editor of the Journal of the American Academy of Child and Adolescent Psychiatry and has been asked by the Academy to write and deliver a memorial statement to honor Dr. Pauline Kernberg of this medical school. Dr. Shapiro has contributed an essay, “The Mystery of the Unsaid Name” to a volume that will serve as a Festschrift for the Italian Psychoanalyst, Jacqueline Amati Mehler and will present his paper, “Santa the Robber” at the New York Psychoanalytic Society in November 2006 as well as debate the issue of teaching dynamic psychotherapy and principles at the Annual meeting of the Canadian Academy of Child and Adolescent Psychiatry.

Paul E. Stepansky, Ph.D. has resigned as Managing Director of the Analytic Press, a post he held since 1984. He is now Executive Director of Online Scholarship for “The Psychoanalytic Connection,” the major online communications and educational-technology provider for psychoanalysts and psychoanalytic psychotherapists. As a historian, he continues to explore topics in the history of medicine and surgery in the 19th and early 20th centuries and has begun work on a history of psychodynamic and psychoanalytic publishing since World War II.

Craig Tomlinson, M.D. continues to teach, work and supervise in the Department of Psychiatry at Columbia University, as well as at the Columbia University Center for Psychoanalytic Training and Research. He presented a paper on the history of psychoanalytic research as part of the Columbia Psychoanalytic Centers 60th anniversary symposium, and led a study group on historiography for the Association for Psychoanalytic Medicine.
Rosemary A. Stevens, Ph.D., M.P.H. is a DeWitt Wallace Distinguished Scholar in Social Medicine and Public Policy at Weill Cornell Medical College, Department of Psychiatry. She is also the Stanley I. Sheerr Professor Emeritus in Arts and Sciences at the University of Pennsylvania, where she was a member (and sometime chair) of the Department of History and Sociology of Science and a senior fellow at the Leonard Davis Institute of Health Economics.

A native of England, Stevens began her career as a historian/policy analyst with a degree in English language and literature at Oxford University. She was selected to a competitive management traineeship for the British National Health Service, which included two years of graduate work in applied social science and management studies at the University of Manchester. She became, at the age of 25, the youngest administrator of a hospital in London. Migrating to the United
States in 1961, four years before the landmark Medicare and Medicaid legislation, Stevens developed a strong interest in American medicine and its history, as well as in organizational and social comparisons between health care in Britain and the United States.

Stevens holds an M.P.H. degree in health services administration and policy, and a Ph.D in epidemiology, both from Yale. Between 1968 and 1976, she held assistant, associate and full professor positions at the Yale Medical School in the Department of Epidemiology and Public Health, and was a fellow at Yale’s Institute for Social and Policy Studies. Stevens moved to Tulane in 1976, serving as chair of the department of health systems management just as profit-making hospitals were moving to center stage—a harbinger of the managed care movement of the 1990s. She moved to Penn in 1979, with a break in the years 1991-96 when she served as dean of the School of Arts and Sciences. She joined the emeritus faculty in 2002.

Dr. Stevens has published six books and edited History and Health Care Policy in the United States: Putting the Past Back In (Rutgers University Press, 2006). Currently, she has a book of essays titled The Public-Private Health Care State (Transaction Publications) at press. Stevens has published many articles, and chaired or been a member of national policy committees on subjects as diverse as national blood policy, for-profit health care, physician assistants and nurse practitioners, alternative medicine, graduate medical education payments, Medicare as social contract, and (in 2006) traumatic brain injury. She has served as a public member on the National Board of Medical Examiners, the American Board of Pediatrics, the Educational Commission for Foreign Medical Graduates, and the American Board of Medical Specialties. Among many honors, she has won national awards in the histories of medicine and public health, and in health services research. She is a member of the Institute of Medicine of the National Academies of Science and of the American Academy of Arts and Sciences.
Stevens’s publications include books on the history of medical practice in England, the history of specialization in American medicine, the early implementation of Medicaid, physician migration policy and its implications, and the history of American hospitals. Her current research focuses 1) on the formal organization of specialization in American medicine and the public roles and self-regulatory structures of the medical profession, and 2) on the formation and early problems of federal hospital services for veterans in the 1920s.

Rosemary Stevens is married to neuroscientist Jack D. Barchas, chair of the Department of Psychiatry at Weill/Cornell Medical College, and lives in New York City and Brownsburg, VA — with a studio in both locations to practice her second career in painting.

**Alumni News**


**Hannah S. Decker, Ph.D.**, fellow (1967-1970), is Professor of History at the University of Houston. She is currently working on a book on the making of DSM-III and has received a grant from the University of Houston for the academic year 2006-2007 in support of her research.

**John Efron, Ph.D.**, fellow (1988-1989), is the Koret Chair in Jewish History at the University of California-Berkeley.
Eric Engstrom, Ph.D., fellow (2000-2001), continues to work at Humboldt University (Institute for the History of Medicine) in Berlin and at the Max-Planck-Institute for Psychiatry in Munich. He is currently completing work on the sixth volume of a multi-volume edition of the works of the German psychiatrist Emil Kraepelin. Recent publications include: “The Economy of Clinical Inscription: On Diagnostic and Nosological Writing-Practices in Psychiatry” in: Psychographien, edited by Cornelius Borck & Armin Schäfer (Zurich: Diaphenes, 2005), 219-240; and “The Directions of Psychiatric Research: Introduction,” History of Psychiatry 16 (2005): 345-64. At the Anglo-Dutch Wellcome Symposium in Utrecht, he presented on “Academic Psychiatry in Germany, 1867-1900: On Economies of Knowledge and the Politics of Professional Practice.” And, at the University of Edinburgh, on “Psychiatry and Criminal Responsibility,” he delivered a paper on “Forensic Psychiatry in Germany: Historical Perspectives 1880-1933.” At the Berlin institute Dr. Engstrom also taught graduate seminars on 19th century psychiatry, Richard Rorty, and Reinhard Koselleck. Together with other colleagues at the Institute, he is currently building a research unit in the history of psychiatry.


Stephen Kern, Ph.D., fellow (1966-1970), has taught in the Department of History at Ohio State University since 2002 and
was appointed a Humanities Distinguished Professor at Ohio State in 2004. His area of specialization is modern European cultural and intellectual history, with a particular interest in childhood, psychoanalysis, modernism, phenomenology, and the histories of philosophy, literature, art, and narrative.

**Research Faculty Publications**


Oosterheis, Joost Vjseelaar, and Hugh Freeman. Amsterdam: Amsterdam University Press, 2005, 141-161.


* Partial Bibliography
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We would like to express our warm appreciation to Dr. Jack D. Barchas, Dr. Michael Beldoch, Dr. Samantha Boardman, Ms. Janet Diethelm-Peck, Ms. Monique Diethelm, Dr. Eli Einbinder, Dr. Nathan Kravis, Dr. John Loomis, Dr. Jacques M. Quen and Mrs. Rosa Esman (in honor of Dr. Aaron H. Esman) for their continuing contributions far beyond the categories of membership.

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