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CREDULITY AND CURES

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The psychology of credulity is the main theme of this article—not credulity in general as applied to various religions, philosophies and political tenets—but credulity as related to the treatment and cure of disease, to the art and science of medicine. Why do people believe in “patent medicines,” in all sorts of systems of healing, and quite generally also in doctors of medicine? Why do physicians often pin their faith to special methods and special medicaments? The general principles that govern faith, opinion, conviction, act also here; but an unusual factor in the field of medicine is the extraordinary complexity of the human body and mind. We often compare the organism to a machine; but even the most intricate machine is simplicity itself compared to the human body. On the one hand, we have metals and mechanics that almost any one can understand, adjust, repair and run; on the other, we have such a combination of sixteen elements in the greatest of chemical and physical laboratories, such complexity of anatomy, such intricate processes of physiology, and the whole permeated by spirit, by psychology and the mutual reaction of body and mind—all having occupied nature a hundred million years to build—that it is small wonder that even the greatest students and experts in this field of work cannot grasp it all, are dismayed at the difficulties they meet, and rejoice if a lifetime of work may chance to wrest one tiny fragment of new and permanent knowledge from the great mass of the still unknown. The healthy organism is difficult enough to know and to understand, but when we have added to this the innumerable diseases that develop within the body and the scores of invisible and intangible enemies that attack it from the outside, the problem grows colossal, and it is no wonder that people in general, no matter how erudite in other directions, have not the smallest conception of the problem of medical therapy.

The more one knows of a subject, the more critical, even skeptical, one becomes. If one knows nothing of a subject, the soil is prepared for faith, preconception, conviction. The great majority of illnesses are temporary, selflimited, and tend to recovery by nature unassisted. It is not surprising, then, that when an intelligent professor or learned clergyman happens to take during such a spell of illness a packet of cottage cheese, carefully powdered, with a long Greek name, his prompt recovery should fill him with a profound conviction of the value of

the remedy. He has this one convincing case, and its being his own lends a strong personal note to his recommendation of the agent to his friends. In fact, he becomes an authority by a single case, commends it to others, and even writes letters of his experience for use by the advertisers.

The physician works differently. If he observes good effects from a remedy in one case he tries it on others, and if it works well on twenty or thirty or perhaps fifty patients he will call it to the notice of other physicians by publication in a medical journal. Others are thus led to try it, some with similar success, some with critical reservation based on exceptional experience and conditions. Gradually, after use in thousands of cases and perhaps through the years by thousands of physicians, a new remedy takes its place in the pharmacopeia with a record of all the facts as to its utility and its limitations. It is thus that the hard won truths in regard to our small armamentarium of really useful therapeutic agents have been wrested from the years¹

CREDULITY AMONG THE LAITY

General intelligence, even great scholarship in all directions outside of medicine, is no criterion for judgment in the matter of means and methods for curing disease. Of Berkeley, one of the greatest minds of England, a philosopher, a scholar, it was said, “Ancient learning, exact science, polished society, modern literature, and the fine arts, contributed to adorn and enrich the mind of this accomplished man.” He was a distinguished bishop as well as an illustrious scholar. But he discovered an elixir of life made by mixing a gallon of water with a quart of tar, leaving it for forty-eight hours, and pouring off the clear water. One of his essays which ran through many editions was “On the Virtues of Tar Water.” Having tried it on himself and his family he was so sure of its efficacy that he felt it a duty to announce the wonderful discovery to the suffering world. Twenty-five fevers in his family were cured by this medicinal water. He recommended it as a preventive and alleviator of smallpox. It would cure impurities of the blood, coughs, pleurisy, pneumonia, erysipelas, asthma, indigestion, hysteria, dropsy, scurvy and hypochondria, and was of great use in gout and fevers, a preservative of the teeth and gums, and a substitute for all diet drinks and mineral waters. He forestalled criticism by saying, “Effects misimputed, cases wrong told, circumstances overlooked, perhaps, too, prejudices and partialities against truth, may for a time prevail,” and furthermore, “Men may

1. This is the normal progress of a useful drug, and of course I refer only to remedies not controlled by special interests. Unfortunately, at times an agent does not follow this normal growth and evolution, but is imposed on a too credulous profession by powerful propaganda and suggestive advertising.

censure and object as they please, but I appeal to time and experiment." It is needless to say that the appeal of this wise and great man has been answered. Tar water is forgotten. I merely refer to this shining example because the same psychologic reaction to cures for diseases has been manifested often since the time of Berkeley.

Even at this moment, a quite new method of therapy is being widely exploited by distinguished scholars, who if not as able as Bishop Berkeley, still have immense influence on the academic circles of their time. An Australian music teacher by the name of Alexander has adopted a system of cure of diseases in general which would seem to be a cross between massage and chiropractic. He has written a book entitled "Man's Supreme Inheritance," describing his theories and results, and this book is now having a huge circulation in this country. Prof. John Dewey, one of the most distinguished educators in the world and a professor of philosophy in Columbia University, writes a laudatory preface to the book. The *Atlantic Monthly* in its April number this year gave the method seven pages of free advertising in the shape of an article by Prof. J. H. Robinson, professor of history in Columbia University, entitled "The Philosopher's Stone," which he found in the Alexander method after "a lifelong personal experience of physical and mental depression." He says:

I am not telling my plain tale because I happen to have been redeemed in body and soul through Mr. Alexander's method, or because I have known others to be so redeemed. I think his ability to straighten out adults and give them new energy and courage is very important, but by no means so important as the possible application of his theories in the field of education, by which it seems as if it might be possible to raise the whole race to a far higher plane than it now occupies.

Now, what is the method? A careful search through the book affords no clear account of what the author does or how he does it, but leaves the reader naturally to infer that the only way to recover from his malady is to consult the author himself, who practices in London six months and in New York six months.

From this book of well over 300 pages, one obtains with difficulty a limited general outline of the method of the new cult. I judge it is not intended that any but the writer should be able to employ this new cure, so that the patient to obtain his supreme inheritance would have to pay doubtless a considerable inheritance tax. However, one gathers by careful reading that the first principle is to establish a normal kinesthesia by placing the patient in a position of mechanical advantage which induces a perfect system of natural internal massage such as has never before been attained by ordinary methods, and which is extraordinarily beneficial in breaking up toxic accumulation, thus avoiding evils arising from autointoxication (This is almost word for word). By the use of his special technic, the author claims to have cured paralysis, varicosity, tuberculosis, asthma, adhesions of the lungs, hemorrhage, congenital and other malformations, effects of infantile paralysis, many varieties of throat, nose and ear trouble, hay-fever, chronic constipation, incipient appendicitis, and colitis. I quote his own list. He anticipates the regeneration of mankind through his scheme of physical therapy.

Thus, we see that the assertions of an authority carry conviction to hundreds of listeners and thou-

sands of readers, and establish credulity in mankind. It does not matter whether the authority be an expert in philosophy, religion, education or history, what he says about a panacea for disease believed in by himself will induce belief in others. The assertion of authority is a powerful suggestion to believe, but a bare *assertion* by any one, even by a newspaper advertisement or the label on a bottle of "patent medicine," acts also as a suggestion to arouse credulity, as psychologic experts in advertising have been delighted to find.

Another factor in credulity is that we are so constituted as to be tremendously inclined to believe in what we would like to believe. When a man is ill there is nothing he desires more than to get well. This predisposes him at once to faith in any promise of cure.

And still another feature in cures is mystery. The commercial and therapeutic value of a "patent medicine" is secrecy as to its ingredients. Tar water was too plain and simple to live long. If it had had an incantation said over it, if it had had to be concocted at the conjunction of some planet with the moon, if it had had some high-sounding name, like Golden Discovery or Sanatogen, it might be alive today. This is true not only of medicines, but also of other methods of cure. The religious mystery associated with Christian science and the phenomena at Lourdes, the elaborate psychologic discussion in connection with "new thought" and mind cures, the anatomic dissertations on the spine and circulation in the advertisements of osteopaths and chiropractors, the rodomontades of men who write books like "Man's Supreme Inheritance," all these dealing with the mysterious, the occult and the unknown, make a wonderful appeal to that instinct of faith in those who are utterly ignorant of the significance of the theories suggested or terms used; and if one recovers by employing one of these methods, as often happens, since most diseases are self-limited and get well of themselves, the personal experience fixes a faith in the means that cannot be shattered. If you add to this personal experience the psychologic fact that once a conviction is firmly established in the mind of a grown man, it is almost hopeless to dislodge it, one learns to understand the credulity and gullibility of the race in the matter of panaceas for its ills. No one will easily give up an opinion when it will show him to have been wrong, even foolish. No amount of argument could have upset the belief of the brilliant Berkeley in tar water, nor could we swerve Professor Dewey or Professor Robinson one iota from their faith in a "readjustment which will establish a normal kinesthesia" in their anatomies.

Now, I do not believe the medical profession has any quarrel with all these cults and methods, certainly not as to the good they may accomplish in some instances, but only so far as they may be hurtful or pernicious or untrue. We do object to the sale of secret "patent medicines" to the gullible public, even though they too may cure at times, because they have often contained dangerous ingredients such as morphin and alcohol, and because they too often lure the people into false hopes and to cruel disillusion. This is especially true of the much advertised tuberculosis, cancer and epilepsy cures. We do not object to cures by Christian science—we welcome cures by any method whatsoever, so long as they are cures—but we do object to the denial of the existence of disease and interference with its prevention in such disorders as smallpox, diphtheria and typhoid fever. It would be

idle to deny the recovery of patients under treatment by osteopathy and chiropractic, knowing what we do of self-limited diseases and the power of faith; but we have all encountered the evil results of their indiscriminate use, and deprecate their employment as a panacea by the unskilled and the ignorant. In the matter of the new cult of "readjustment to establish a normal kinesthesia," the physician cannot accept as evidence the testimony of its one practitioner, or any of the evidence of those who claim to be cured by it, as decisive of a new advance in therapy—for all this evidence is combated by ages of experience in similar exploitations. The truth is that medicine is a great and difficult and progressive science, and that its truths are the results of the sifting of the centuries. No doubt all the cults and fads and fancies that have had and are having their day contribute something to the sum total of medical knowledge. Homeopathy, which is now little practiced, doubtless helped to diminish drug-ging. The numerous mind cures have done good by awakening the profession to a greater realization of the importance of the mind in every therapeutic procedure, though this idea is not new, having been well described by Plato in his *Charmides*. The various schemes of manipulation of the body by massage, osteopathy, Zander apparatus, etc., have made valuable additions to our knowledge of physiotherapy.

CREDULITY IN THE MEDICAL PROFESSION

Now, after this résumé of the many features of credulity among the laity, I approach with some trepidation and a feeling of delicacy the subject of credulity in the medical profession itself. We, above all others, should be hypercritical, should make a cult of skepticism in therapy. But do we? No one knows so well the extraordinary progress in all branches of medicine, especially during the past fifty years; no one knows so well the tremendous difficulties and complexities encountered, the mistakes made, the old paths retraced or abandoned, the amazing vistas opened. All these experiences should make the doctor of medicine, in particular, a profound skeptic, and happily also we may well believe an optimist.

I am afraid, however, that we too—just because dazzled by the effulgence of so many new discoveries—share, in a measure, the credulity of the public in remedial agencies. We see their errors plainly, and sometimes they see ours; but do we see our own? The same psychologic factors are at work in us as in the general public for the creation of faith in the new drug or in the new method. We do not know enough about it to be sufficiently critical. This ignorance of ours prepares the ground for the new belief, the new conviction. Its value is asserted by authority. And we are eager to believe in the new hope of help held out to us for the healing of the sick. Then, again, there are the marvelous mysteries behind all the new names—hormones, opsonins, endocrines, amboceptors, etc.—such a wide field for new facts, such a vast horizon for new theories. We can hardly be blamed for not being always able to get our bearings in these uncharted seas.

It has interested me to go over in this connection some of the therapeutic measures heralded to the profession with more or less vehemence of assertion during my own day. Some of these have already passed into oblivion. When I began practice, clitoridectomy was a reputed cure for many nervous disorders. One

scarcely hears of it now. About that time, too, surgeons were competing for their first hundreds in ovariectomy, an operation often then performed not because of ovarian disease, but for some theoretical relation to epilepsy, insanity and the psychoneuroses. Around that period the rhinologists came into their own with the turbinated bone obsession. I suppose the reason one hears so little of it now is that most of the turbinated bones of our generation were removed. Turbinated bones have gone out, and submerged tonsils have come in. In Vienna many cases, especially those of nervous disorders, were cured by magnets applied to the spine. Electricity had a great vogue, and large static and other machines were a part of office equipment. One rarely sees them now. For a time, suspension of patients with locomotor ataxia on the theory that stretching the spine affected favorably the fibers in the posterior roots had vogue, and it was rather startling to enter a clinic, hospital or doctor's office and see one man or several men hanging by the head from a miniature gallows. The passing of urethral sounds for the cure of locomotor ataxia had a brief but meteoric career. There was a good deal of trephining for microcephalia, under the impression that the brain would grow if it was given more room; and trephining was done for a time in general paresis but abandoned for good reasons in the course of time. The rest cure had a comparatively long life among remedial measures, and it had behind it great authority and much good logic; but as a cure it owed its success chiefly to the psychotherapeutic genius that launched it into existence. Except for the reverberations of his dicta in remote places, it is not employed nowadays, the antipodes of his teachings, namely, exercise and occupational therapy, taking its place. I suppose very few drugs have had such a rapid rise and sudden drop into the medical limbo as croton, exploited for epilepsy. It ended like the sky-rocket. Perhaps I should mention here in connection with croton, *Bacterium cinchonatum*, which caused so many epileptics to have their colons reduced to semicolons by operation. This germ is extinct, along with the general paresis germ discovered in Scotland some years ago. I presume many recall a series of volumes entitled "Biographic Clinics," by which the enthusiastic author, an ophthalmologist, sought to prove that the majority of diseases were due to eye strain and could be corrected by prisms. He was very bitter against certain of his confrères who believed in the same etiology of human illnesses, but who insisted quite violently on the cutting of eye muscles by a long series of delicate operations to remove eye strain. The originator of the latter method was awarded a prize by a distinguished foreign medical society for his great contribution to science!

Our past experience should lead us to be extremely cautious and skeptical in the presence of many of the therapeutic measures before us now. Leaders, despite their great intelligence, and high position, often stamper the rank and file of us like sheep. Our leaders are very human and subject to the sway of the personal equation. I know one general consultant who seldom makes a diagnosis of anything except hypothyroidism or hyperthyroidism; in fact, I believe that he must in his mind have classified the whole human race as superior and inferior thyroids. I know another who does not see ordinary things in the ordinary light of day, but by a prismatic light; he sees them through the

rainbow of the endocrines. Surely, so much pulling of teeth, so much removal of submerged tonsils, is not justified by results. At least I feel so from the many cases of psychoses, nervousness, sciaticas, neuralgia, spinal pains, cervicobrachial neuritis, and the like which have come under observation after such treatment had proved futile.

I am glad to see a growing skepticism with regard to Wassermann tests. They are of real value as corroborative of clinical findings; but when these are in doubt, the Wassermann tests should be controlled by reports from three different laboratories. It is not long since a single laboratory test was considered final, and that despite the presence or lack of clinical evidence.

PSYCHANALYSIS

I shall close with a few words as to psychanalysis, on which subject I am qualified to speak, for I know Freud and Jung personally, have examined the method practically, and have or have had a number of practitioners of this cult as my friends. It has taken a considerable hold in America—though not so much in Europe—and owing to the fact that many reporters and writers are psychopaths and have undergone treatments by psychanalysis, these doctrines are now frequently encountered in editorials in newspapers, magazine articles and a few books by mediocrities. The theories of Freud and Jung are to psychology what cubism is to art, new, sensational and rather interesting. If they were not so pernicious in their application, as well as untrue in psychology, I should say nothing of them, but let them take their place in our historical medical museum along with all the other curiosities which the centuries have accumulated. In a few years they will be catalogued in that museum. I doubt if any persons have been benefited by this treatment. It requires months or years of work over each case, and it is very expensive. I have, on the other hand, seen very bad results from the psychanalysis of young women and men, permanent insanity, even suicide; and if it were not destined to be so short lived, I should advocate a law to prevent its employment in the treatment of young people.

There is only time to touch on one or two of the more salient features of the freudian theories. One of the most prominent is, for instance, that every dream is the fulfilment of a wish. This is a kind of harking back in a very crude way to the philosophical speculations on the world as will and presentation of such men as Berkeley, Schopenhauer and von Hartmann. If there is one clear fact in the psychology of our daily life it is that the essential function of the mind is its ability to deal with the future. It is anticipation of the future that guides our conduct, plans for us, chooses, distinguishes the right paths from the wrong paths that we are to follow, and the ways that are favorable to progress from those that are unfavorable. Our memories are our experience on which we base our life to be; the present is a point, the future is everything. This is true especially of youth, which is fullest of anticipation of the future, a long preparation for all that is in store. Hence our minds are always full of anticipations in our waking life—hopes, desires, wishes, plans, ambitions, aspirations, as well as fears, timidity, anxiety, dread, suspense. Naturally, our dreams, which are a sort of ungoverned replica of waking thought, but with a wider horizon of memories,

reflect in a moonlight kind of way the thinking processes of our day. These anticipations come to us in our dreams. Sometimes they are pleasant; sometimes, anxious and apprehensive. Now, Freud, observing that his children usually dreamed of pleasant things anticipated, the theater, toys, country trips, quite arbitrarily jumped to the conclusion that a dream is the fulfilment of a wish. Then he said all dreams were a fulfilment of a wish, and as the obsession grew in his mind, he decided it must always be a sexual wish, however disguised. When confronted with fear and anxiety dreams he had to invent words like distortion, disfigurement, displacement, etc., to twist around an easily explicable dream, easily explicable by study of the normal anticipations of the mind, to make such a dream in some extraordinary manner fulfil a wish. When a friend of his, after hearing him lecture on this subject, came to him triumphantly with a fear dream, wholly opposed to his theory, Freud suddenly exclaimed exultingly, "You had this dream just to confute my theory. That was the hidden wish." The freudians will talk to you much about an elaborate symbolism which is wholly their invention. There are no symbols in anybody's dream life which were not first present in their conscious life. The freudian makes the claim that all the arts, and in fact all our civilization, had its origin in one drive, the sublimation of the sexual. The reader will remember that Rabelais had Pantagruel meet one Gaster in his travels who claimed that all the arts, powers, accomplishments of our civilization were the sublimation of the desire of the stomach. One theory is as good as the other. They are both rabelaisian. If one reads the analyses made by the psychanalysts, one will find a complete revelation there of the type of mind of the analyst himself, his intelligence, his logic, his symbolism, his character; indeed, one will learn much more of him in this way than one will of the unfortunate patient the analyst thinks he is studying.

CONCLUSION

Most of these methods of cure are in the past. They are a part of our experience, and of certain value as such, although mostly of a negative value. Of course, this has been more than counterbalanced by enormous accessions of positive value during the same period of time. But these errors have a lesson for us today. We must try to take a middle path, if that is possible in the presence of new theories, to be broad enough to know that there are great mysteries in our complex organisms and all the sciences that have to do with them, to feel that precious discoveries are always before us awaiting some Cortez or Columbus, and therefore not to be too prejudiced to weigh, ponder and examine; and at the same time we should cultivate the critical faculty.

20 West Fiftieth Street.

Import of Mental Deficiency.—People speak of "mental deficiency." They seem to mean by that always "intellectual deficiency," or "cognitive deficiency." I think there is far too little attention paid to deficiency in feeling, or emotional deficiency, and to the deficiency in volition or conation. The feelings and the will are just as much parts of the mind as the intellect is a part of the mind, but the term "mental deficiency," as it is often employed, nearly always refers merely to the intellectual or cognitive side. In my opinion, we see just as many, or more, defects on the emotional and conative side as we do on the intellectual or cognitive side.—Dr. Lewellys F. Barker, *New York State Journal of Medicine*.