

PIBLOKTO OR HYSTERIA AMONG PEARY'S ESKIMOS¹

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While reading Admiral Peary's fascinating book "The North Pole,"² I was especially interested in his description of what he calls a peculiar form of nervous affection found among the Eskimos, of the western coast of Greenland from Cape York to Etah, which they call piblokto, and which he designates as a form of hysteria. Peary states that he has never known a child to have piblokto, but that some one among the adult Eskimos would have an attack every day or two, and that one day there were five cases. He also informs us that the immediate cause of this affection is hard to trace, though "sometimes" (I am quoting his words) "it seems to be the result of a brooding over absent or dead relatives, or a fear of the future."

Concerning the attack proper he speaks as follows: "The patient, usually a woman, begins to scream and to tear off and destroy her clothing. If on the ship, she will walk up and down the deck, screaming and gesticulating, and generally in a state of nudity, though the thermometer may be in the minus forties. As the intensity of the attack increases she will sometimes leap over the rail upon the ice, running perhaps half a mile. The attack may last a few minutes, an hour, or even more, and some sufferers become so wild that they would continue running about on the ice perfectly naked until they froze to death if they were not forcibly brought back." He goes on to say that when the attack takes place indoors nobody pays much attention unless the sufferer should reach for a knife or attempt to injure someone. The attack usually ends in a fit of weeping, and when the patient quiets down, the eyes are bloodshot, the pulse high, and the whole body trembles for an hour or so afterwards."

¹ Read before the New York Neurological Society, June 3, 1913.

² Pp. 166-167, Fred'k Stokes, 1910.

When I read these interesting statements of Admiral Peary I realized that they represented only a few general observations about a subject which to say much was only of secondary interest to the writer. I therefore expressed the inner wish to know more about this neurotic manifestation, thinking that it might throw some light on our modern problems of the psychoneuroses. My wish was gratified a few weeks ago when I had the pleasure of meeting Prof. Donald B. MacMillan who was one of Admiral Peary's trusted lieutenants during the successful quest of the North Pole in 1908-1909. A natural born anthropologist, Professor MacMillan utilized every opportunity to study these primitive people and his observations and deductions concerning piblokto are therefore very interesting.

I asked Professor MacMillan to tell me something about piblokto, and he described the attack as follows: "A woman will be heard softly singing and accompanying herself by striking the fist of one hand with the palm of the second, making three sounds, one long followed by two short ones. The rhythm and motion continues to increase for some time, during which she usually tears off her clothing, and ends in a fit of crying or screaming in which the woman may imitate the cry of some familiar animal or bird. No two women act alike; there is a certain individuality to every attack. Some drop down on their hands and knees and crawl around barking like a dog. One woman used to lie on her back on the snow and place some ice on her breasts. Some jump into the water and wade among the ice cakes, all the time singing and yelling. Others wander away from the houses into the hills, beating their hands as if demented."

As further illustrations of the individuality of the attacks, Professor MacMillan cited the following cases: (1) "Inahloo, a woman of 45 years, was very violent during her attacks. She did not know what she was doing, she appeared crazy and demented, and would bite when an attempt was made to restrain her." Her specialty was to imitate the call of birds and to try to walk on the ceiling. She also put ice on her chest. (2) Whenever Elkiahsa, nicknamed Bill, had an attack she would walk around the deck of the *Roosevelt* and pick up everything lying loose and throw it up in the air. She also climbed up the rigging and foresheet and stuck her head under the sail. (3) Inahwaho showed her attack by walking on the ice, singing and beating her

hands together. (4) Alnaha, nicknamed Buster, 25 years old, was the only woman who jumped into the water during her attacks.

The attacks last from about one to one and a half hours, and usually end in sobbing or in falling asleep, from which they awaken in a perfectly normal state. These attacks reminded me of the running amok among Malays which is usually ascribed to epilepsy³ and I therefore tried to ascertain whether the attacks were accompanied by a loss of consciousness. Professor MacMillan was certain that all of them showed a loss of consciousness; he thought they were all in a confused state. Thus they were perfectly harmless when left to themselves, but showed a blind resistance if prevented from following out their various vagaries. He was sure that at least one of them, Inahloo, was totally unconscious of her surroundings,—to put it in his own words: "She never knew what she was doing, she was crazy." He distinctly recalls that her face was very congested, her eyes were bloodshot during the attacks, and that she foamed at the mouth. On the other hand he was also convinced that some of them sometimes feign an attack as is shown by the following incident. He was told that Inawahō was running around on the ice having an attack. He got his camera and went out to take some pictures of her while in this state. He saw her running on the ice and beating her hands, but as soon as she noticed him her whole attitude changed, she became very excited, grabbing big chunks of ice and hurling them at him. The following day she told him that she did not have piblokto, that she was only shamming, and asked him not to use her pictures because she was naked. Whether or not she was fully conscious during the attack is difficult to say. Professor MacMillan is sure, however, with this exception the other attacks in Inawahō and in all the others were accompanied by some loss of consciousness. Granting this it would not simplify matters as regards diagnosis. Loss of consciousness may be a concomitant symptom of hysterical or epileptic attacks. My only reason for suspecting the latter is the case of Inahloo whose attacks—congestion of head and bloodshot eyes, foaming from the mouth, loss of consciousness, and violent resistances—would indicate that malady. I was trying to ascertain

³ Kiernan maintains that the running amok of the Malay is a form of *furor sexualis*. See Lydston, "Diseases of Society," p. 397.

whether any of those afflicted ever showed a typical *grand mal* attack, but Professor MacMillan had not seen any. We may be sure that it does not exist, otherwise it would not have escaped the notice of so competent an observer as Admiral Peary, who spent about twenty years among these people and has an intimate knowledge of every member of the tribe. On the other hand everything points to hysteria. The disease is almost exclusively confined to the female sex. Professor MacMillan quotes Peary as saying that in twenty years he saw only one man who had what was thought to be piblokto. As cited above Admiral Peary never knew a child to have piblokto. Of the twenty women aboard the *Roosevelt* eight had piblokto. This concurs with the relative frequency of hysteria among civilized people, where female hysteria is by far the most prevalent. And last but not least, the etiology, too, points to hysteria.

The Eskimos themselves think that the disease has something to do with the evil spirit, and for that reason they are reluctant to touch the afflicted one during the attack. When an Eskimo woman wanders away while in such state two women follow her, one on each side, and gently push her in the right direction. This conception, as you see, is not so different from the early theories entertained regarding mental afflictions among Europeans. The only probable cause of this affection mentioned by Admiral Peary is of a psychogenetic nature. He says, "The immediate cause of this affection is hard to trace, though sometimes it seems to be the result of a brooding over absent or dead relatives, or a fear of the future." In other words, in the ultimate analysis it is love and hunger. I asked Professor MacMillan whether he formed any idea as to the causation of this malady, and his answer was as follows: "I believe that the attacks are caused by abuse. Most of the Eskimo women who had this disease were of a jealous disposition. They either imagined themselves ill treated or they actually suffered abuse at the hands of their husbands, who often beat them with their fists. Many Eskimos are cruel to their wives." Speaking of the attack he said: "It reminded me of a little child discouraged and unhappy because it imagines that no one loves it or cares for it and therefore runs away." This excellent description from a man who is just an observer and who has never read anything on nervous or mental diseases is most interesting, to say the least. Professor MacMillan de-

scribed in untechnical language the etiology of hysteria as promulgated from the time of Hippocrates to our present day. As a further corroboration of his theory he mentioned the case of Alnaha. She was twenty-five years old and the only unmarried woman in the north. Eskimo girls marry at a very early age, usually at the age of twelve years, but no one wanted Alnaha, not because she had no charms but because she was a very poor seamstress. She had more attacks than any one else. He also witnessed an attack of piblokto in an Eskimo woman immediately following a rebuff by a white man who first showed her some favor.

This plainly shows that just as in civilized people it is love that plays the great part in the causation of the malady. It is also interesting to note that it is not the lack of the gross sexual, but the ungratified desire for love that is the determining factor. None of the women mentioned lacked the gross sexual. Alnaha, because single, was common property. *Apropos* it may be mentioned that the Eskimos may be called an unmoral people in our sense. The woman is as much a part of the man's property as his dog and sledge. They indulge in trial marriage and when things do not run smoothly they try again and again. By mutual consent wives are often exchanged between friends. Divorces are very simple. If a man grows tired of his wife he simply tells her there is not room for her in his igloo.⁴ Under such conditions it is readily comprehensible that whereas the men fully gratify their sexual impulses the women may never experience those elements of love so essential to feminine nature. In this respect I wish to mention that Professor MacMillan definitely asserts that the Eskimo woman is just as capable of loving as a civilized woman. He related to me many incidents as well as discussions with Eskimo women which convinced me of the truth of his assertions.

In fine we may say that the greatest determinant of piblokto is sex in all its broad ramifications. This, too, corresponds with our psychanalytic experiences gained among our own women, where contrary to the prevailing opinion of some the gross sexual does not necessarily play the great rôle in the determination of the hysterical symptom.

Those who are acquainted with the etiology of the neuroses as

⁴ Cf. Peary, *l. c.*, Chap. VI.

formulated by Freud will also understand the almost entire absence of any hysterical manifestations among the male Eskimos.

As far as my inquiries went I could not find any conversion hysterias among these people. The question may therefore be asked why one does not also find in those suffering from piblokto the phenomena of conversion. To answer this question we will have to bear in mind the nature and mechanism of conversion. My experience with such hysterias has taught me that in all cases of lasting conversions, such as astasia abasias, paralyses, aphonias, etc., I always dealt with persons of very complex psychic organizations who were usually suffering for a long time before the conversion took place. Almost all of them belonged to that class of patients who suffer in silence without letting any one know about it. I also recall a great many patients who belonged to the talkative kind who showed their attacks through laughing, crying, and screaming. They did not show as complex a mental organization as the former patients. It is also significant that one rarely encounters conversion hysterias in children. All cases of hysteria that I have seen among children belonged to the anxiety hysteria types. Moreover, when we enter into the deeper mechanism of conversion we know that the symptom like the dream is a concealed expression of a repressed wish. Those who are acquainted with dream analysis are aware that whereas the dreams of adults show hidden symbolized wishes, children's dreams are always quite transparent. Children have not yet learned to suppress or repress, they may wish anything not knowing that it is unattainable and cry when they cannot get it. In other words the dreams like hysterical manifestations among children and adults of a lower type are not as complicated and hidden as those of grownup and intelligent adults.⁵ To use psychological terms it may be said that there is no definite line of demarcation between conscious and unconscious, and hence the psychic elaboration and subsequent motor reactions are quite superficial. They may evince themselves in crying spells, laughing spells, screaming spells, or some other simple manifestations. Peary says: "Eskimos are children in their grief, as in their pleasure." Their motor reactions to unattainable wishes are also childlike. Instead of a complicated hysterical attack or a chronic

⁵ Freud: "The Interpretation of Dreams," p. 107. The Macmillan Co., N. Y.

hysterical symptom like paralysis or aphonia, the attack usually follows the injury and manifests itself in an emotional outburst of the most primitive type. There is hardly anything more childish than the imitation of the dog or bird, or the running away into the hills singing or crying. And yet is there really so much difference between the hysterical mechanisms as evidenced in *pib-lokto* and the *grande hysteric* or other modern hysterical manifestations? We may answer unhesitatingly that the difference is more apparent than real. The deeper determinants as we have seen are the same in both. With due apologies to Mr. Kipling we may say that the modern lady and Eskimo Julia O'Grady are the same under the skin.