Charcot, Hysteria, & La Salpêtrière
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An exhibition at the Library of the Royal Society of Medicine
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Open to all

OPENING TIMES
Monday – Thursday: 9.00 – 21.00
Friday: 9.00 – 17.30
Saturday: 10.00 – 16.30

The Library, Royal Society of Medicine,
1 Wimpole Street, London, W1G 0AE
Tube: Oxford Circus or Bond Street
“A Museum of Living Pathology”

“This great asylum holds a population of 5,000 persons, among whom are to be counted a large number who have been admitted for life as incurables; patients of all ages, affected by chronic diseases of all kinds, but particularly by diseases affecting the nervous system. The clinical types available for study are represented by numerous examples, which enables us to study categoric disease during its entire course, so to speak, since the vacancies that occur in any specific disease are quickly filled in the course of time. We are, in other words, in possession of a sort of museum of living pathology of which the resources are great.”


Jean Martin Charcot was born in Paris in 1825. The son of a coach-maker, he was appointed physician to the Salpêtrière Hospital in 1862 and remained there for the rest of his professional life. Charcot’s Leçons cliniques sur les maladies des vieillards et les maladies chroniques (1867), and his Lecons sur les maladies du foie, des voies biliaires et des reins (1877) contributed greatly to the study and practice of geriatric medicine, and to knowledge of diseases of the liver, biliary passages, and kidneys, but it was at the Salpêtrière that Charcot created the foundations for the science of neurology, advancing knowledge of conditions such as multiple sclerosis, locomotor ataxia, amyotrophic lateral sclerosis, neuroses, hysteria, and muscular atrophy.

It was Charcot who first named the shaking palsy “Parkinson’s disease.” His pupils included Joseph Babinski, Gilles de la Tourette, Pierre Janet, and Sigmund Freud. His biographer wrote: “To take from neurology all the discoveries made by Charcot would be to render it unrecognizable.”
Jean Martin Charcot (1825-1893)

Source Wikimedia Commons
The Salpêtrière Hospital

The Salpêtrière Hospital consisted of a large group of buildings built on the outskirts of Paris. Once described as “the Versailles of pain”, it was originally a gunpowder factory, but it became a prison for prostitutes and an asylum for the criminally insane, for the disabled, the homeless, the senile, and the destitute. In 1656, the site was converted to a hospital and became Hospice de la Salpêtrière. The building was expanded in 1684 until, by 1789, it had become the world's largest hospital with 10,000 patients and 300 prisoners.

It was almost a walled city within a city with gardens, squares, streets, and a church. By the time of Charcot’s appointment, the hospital housed a very large number of long-term patients suffering from a wide range of neurological conditions. Charcot modernised the hospital and installed consulting rooms where he and his colleagues examined patients, meticulously recording and classifying their symptoms. He later added a pathology museum, a large lecture theatre, an out-patients’ department, laboratories, and a photographic service.

Charcot instituted a series of Tuesday morning lectures presenting patients to a large audience of doctors and students. But it was his Friday morning lectures that attracted most notice, and which drew a capacity crowd of professional and lay people, including, in the words of Axel Munthe, “authors, journalists, leading actors and actresses, fashionable demimondaines.”
Hôpital Salpêtrière, Paris, France.

Source Wikimedia Commons
“Charcot entered at 10 A.M...Amidst the absolute silence of the audience, he started speaking in a low pitch and gradually raised his voice, giving sober explanations that he illustrated with skilful colored chalk drawings on the blackboard. With an inborn acting talent, he imitated the behaviour, mimicry, gait, and voice of a patient afflicted with the disease he was talking about, after which the patient was brought in.

The patient’s entrance was sometimes also spectacular. When Charcot lectured on tremors, three or four women were introduced wearing hats with very long feathers. The trembling of the feathers allowed the audience to distinguish the specific characteristics of tremors in various diseases. The interrogation took the form of a dramatic dialogue between Charcot and the patient. Most spectacular were the lectures that he gave about hysteria and hypnotism.

Another of Charcot’s innovations was the use of photographic projections...The lecture concluded with a discussion of the diagnosis and a recapitulation, stating the lecture’s main points; both of which were models of lucidity and concision. It lasted two hours, but the audience never found it too long, even when the topic concerned rare organic brain diseases.”

Hôpital Salpêtrière in 1909.

Photograph by Eugene Atget (1857 – 1927)

Source Wikimedia Commons
In 1870 Charcot took charge of a ward at La Salpêtrière for patients suffering from epilepsy. They shared this ward with patients diagnosed as hysterics. Over time, the hysterics began to suffer what appeared to be epileptic fits. This fascinated Charcot who differentiated its symptoms from those of true epilepsy and named this phenomenon “hystero-epilepsy,” and later “la grande hystérie” and “hystérie major.” Charcot contended that hysteria was the behavioural manifestation of an underlying disorder of the nervous system.

Charcot described four distinct stages of hysteria. The first stage was the *epileptoide* stage, during which the patient suffered a fit, following which the patient underwent extreme physical contortions sometimes adopting an *arc-en-cercle* position where the only parts to touch the ground were the head and the heels of the feet. Charcot called this stage the “period of contortions and *grands mouvements*.” There then followed a stage characterised by *attitudes passionelles* where the patient posed as if crucified or in the throes of erotic passion. In the fourth and final stage, the patient experienced hallucinations and delusions which would eventually subside.

For Charcot hysteria was an organic condition of the nervous system and in 1882 he wrote:

“In the hysterical fit, nothing is left to chance; to the contrary everything unfolds according to the rules, which are always the same and characterise what we see in outpatients as well as inpatients; they are valid for all countries, for all epochs, for all races, and are, in short, universal.”
Answering critics who suggested that his subjects may have been malingering and play-acting, Charcot denied that “to discern the real symptomology from the imaginary” was by no means as difficult as some appeared to believe, and declared that “simulation, which is talked about so much when hysteria and allied affections are under consideration, is, in the actual state of our knowledge, only a bugbear, before which the fearful and the novice alone are stopped.”

While acknowledging that the symptoms of hysteria “do not present themselves to the mind of the physician with that appearance of solidity, of objectivity, which belong to affections connected with an appreciable organic lesion,” he nevertheless maintained that they have “their seat in the nervous system” in the same way as conditions such as multiple sclerosis. But Charcot was a charismatic and authoritative man, the “Napoleon of the neuroses.” It has often been proposed that Charcot’s colleagues and assistants were anxious to safeguard his reputation and credibility, and may have coached and offered inducements to some patients to stage their performances at his lectures, acting out the symptoms of hysteria.

While some left the lecture theatre with a feeling of exhilaration, others dismissed what they had witnessed as “an absurd farce” carried out by “mere frauds, knowing quite well what they were expected to do, delighted to perform their various tricks in public, cheating both doctors and audience with the amazing cunning of the hysteriques.” Some have suggested that “being a hysterical patient was a promise of some security and even freedom within the confines of the hospital” and that some patients aspired to be “not just an ordinary hysteric but an exemplary one, displaying medically perfect symptoms of the condition.”
The painting shown overleaf is **A Clinical Lesson at the Salpêtrière** ("Une leçon clinique à la Salpêtrière"), painted in 1887 by the artist Pierre Aristide André Brouillet (1857-1914) and exhibited at that year's Paris Salon. It depicts Charcot delivering a lecture at the Salpêtrière Hospital.

To the right of the picture is a group of four figures standing to Charcot’s left. They have been identified as Mlle. Ecary, a nurse at the Salpêtrière; Marguerite Bottard, the Salpêtrière's nursing director; Charcot's patient Marie "Blanche" Wittman, shown here under hypnosis and supported by Charcot's chief house officer, Joseph Babinski. On the table to Charcot’s right can be seen an item of electrotherapeutic apparatus invented by Charcot’s teacher Duchenne.

The remaining figures in the painting are Paul Richer, medical artist, anatomist and physician, shown pen in hand and possibly illustrating the scene before him (the painting that can be seen on the back wall derives also from a drawing made by Richer and shows a patient in the *arc-en-cercle* position); Charles Samson Féré, a psychiatrist; Pierre Marie, neurologist; Édouard Brissaud, neurologist and athologist; Paul-Adrien Berbez, neurologist; Gilbert Ballet, physician; Alix Joffroy, pathologist, neurologist and psychiatrist; Charcot's son, Jean-Baptiste Charcot, then a medical student; Mathias Duval, Professor of anatomy and histology; Maurice Debove, later Dean of the medical school; Philippe Burty, art collector, critic, and writer; Victor Cornil, pathologist, histologist, and politician; Théodule Ribot, psychologist; Georges Guignon, neuropsychiatrist; Albert Londe, director of photography at the Salpêtrière Hospital; Léon Grujon Le Bas, chief hospital administrator; Albert Gombault, neurologist and anatomist; Paul Arène, a novelist; Jules Claretie, journalist; Alfred Joseph Naquet, physician, chemist, and politician; Désiré-Magloire Bourneville, neurologist and editor of *Iconographie photographique de la Salpêtrière*; Henry Berbez, a student of Charcot; Henri Parinaud, ophthalmologist and neurologist; Romain Vigouroux, who discovered the electrical activity of the skin; and, leaning forward attentively, the neurologist Georges Gilles de la Tourette.

The painting now hangs at the entrance of the Museum of the History of Medicine, L'Université Paris Descartes. Sigmund Freud owned a lithographic copy of the painting which, from 1886 to 1938, was hung on the wall of his consulting rooms in Vienna. It now hangs in the Freud Museum, at 20 Maresfield Gardens, London NW3.
Charcot’s lectures also included demonstrations of hypnosis. He showed that the hypnotic episode consisted of three stages: lethargy, catalepsy, and somnambulism. In 1882 Charcot presented his findings in a lecture to the Academie des Sciences, following which hypnosis gained a respectability it had formerly been denied. According to Charcot, if a subject was susceptible to hypnotic suggestion, it demonstrated that they were a hysteric, and therefore suffering from an organic disease of the nervous system. But here again Charcot also had his detractors, one of whom described his demonstrations of hypnosis thus:

“Their demonstrations were as follows: Some of them smelt with delight a bottle of ammonia when told it was rose water, others would eat a piece of charcoal when presented to them as chocolate. Another would crawl on all fours on the floor, barking furiously when told she was a dog, flap her arms as if trying to fly when turned into a pigeon, lift her skirts with a shriek of terror when a glove was thrown at her feet with a suggestion of being a snake. Another would walk with a top hat in her arms rocking it to and fro and kissing it tenderly when told it was a baby.”  

2ᵉ PERIODE — PERIODE DE CLOWNISME

Fig. 1. Phase des grands mouvements

Fig. 2. Phase des contorsions
(Arc de cercle.)
As a young man, Charcot had to decide between a career in art and a career in medicine. It was at La Salpêtrière that he sought to bring together this dual devotion to art and science. A skilled draughtsman, Charcot often made sketches of his patients, and his study of art history allowed him to identify, in the work of artists from centuries before, depictions of clinical signs and symptoms like those seen in his patients. For Charcot such depictions added some historical proof and validity to his theories.

Charcot’s interest in the visual arts came to include photography. This, he felt, would provide an objective record of the symptoms shown by his patients who, as part of their neurological evaluation, would be photographed as part of the diagnostic process. “I am a photographer,” wrote Charcot: “I only observe, nothing more.” Iconographie photographique de la Salpêtrière: service de M. Charcot was first published in 1877.

It was a photographic atlas, with case histories, of patients suffering from epilepsy and hysteria. A later volume includes cases of hypnosis, somnambulism, and magnetism. In 1888 it resumed publication as La Nouvelle Iconographie et la Salpêtrière. Its editors wrote: “With the aid of this immediate record, we are able to freeze the abnormality, to decompose the various abnormal movements one by one, and thereby capture the disorder with precision.”

However, given what were then the technical limitations of photography, including long exposures that required the subject to remain immobile for several minutes at a time, it is possible to see these depictions as staged, posed, manufactured, and far from spontaneous or objective.
Hôpital Salpêtrière in 1909.

Photograph by Eugene Atget (1857 – 1927)

Source Wikimedia Commons
“No doubt the whole of what Charcot taught us at that time does not hold good to-day: some of it has become doubtful, some has definitely failed to withstand the test of time. But enough is left over and has found a permanent place in the storehouse of science. Before leaving Paris I discussed with the great man a plan for a comparative study of hysterical and organic paralyses.

I wished to establish the thesis that in hysteria paralyses and anaesthesias of the various parts of the body are demarcated according to the popular idea of their limits and not according to anatomical facts. He agreed with this view, but it was easy to see that in reality he took no special interest in penetrating more deeply into the psychology of the neuroses. When all is said and done, it was from pathological anatomy that his work had started.”

*Sigmund Freud.*

Charcot’s pupil Sigmund Freud re-examined the concept of hysteria and concluded that its symptoms were the result not of brain lesions or of hereditary degeneration but of repressed memories and early trauma, and that hypnosis, used as a diagnostic method, also brought about a cure, or, at least, a recovery from the effects of the neuroses.
Freud and Josef Breuer cited the case of a little girl who had “suffered for years from attacks of general convulsions which could well be, and indeed were, regarded as epileptic. She was hypnotised with a view to a differential diagnosis, and promptly had one of her attacks. She was asked what she was seeing and replied ‘The dog! The dog’s coming!’; and in fact it turned out that she had had the first of her attacks after being chased by a savage dog”, and the case of “an employee who had become a hysteric as a result of being ill-treated by his superior, suffered from attacks in which he collapsed and fell into a frenzy of rage, but without uttering a word or giving any sign of a hallucination.

It was possible to provoke an attack under hypnosis, and the patient then revealed that he was living through the scene in which his employer had abused him in the street and hit him with a stick.”

Indeed it is now known that at least one of Charcot’s patients, Louise Augustine Gleizes, “admitted for paralysis of sensation in her right arm, preceded by pains in her lower right abdomen” and famously photographed for the Iconographie photographique de la Salpêtrière, had been sexually abused from the age of 13.

And perhaps the Surrealists Louis Aragon and Andre Breton were more than accurate when, in 1928, in a piece written to celebrate Charcot’s work, they described hysteria as “the greatest poetical discovery of the end of the nineteenth century.”
ATTaque HYSTÉRO-ÉPILEPTIQUE
TÉTANISME

Planche II.
Books featured in this Exhibition

**Pierre Briquet (1796-1881)**
Traité cliniqu et thérapeutique de l'hystérie.
Paris; New York: Bailliere, 1859.

**Guillaume-Benjamin Duchenne (1806-1875)**
Album de photographies pathologiques complementaire du livre intitulé de l'electrisation localisée.

**Guillaume-Benjamin Duchenne (1806-1875)**
Mécanisme de la physionomie humaine, ou, Analyse électro-physiologique de l'expression des passions applicable à la pratique des arts plastique.

**J. Russell Reynolds (1828 – 1896)**
Paralysis and other disorders of motion and sensation, dependent on idea.
British Medical Journal. 1869; 2: 483-485

**Jean Martin Charcot (1825-1893)**
Leçons sur les maladies du système nerveux: faites a la Salpétrière.

**Jean Martin Charcot (1825-1893)**
Leçons sur les maladies du système nerveux: faites a la Salpétrière.
2nd edition.
Paris: Delahaye, 1875-1876.
Desire Magloire Bourneville (1840-1909) & Paul Regnard (1850-1927)
Iconographie photographique de la Salpêtrière: service de M. Charcot.

Paul Marie Louise Pierre Richer (1849-1933)
Paris: Delahaye et Lecrosnier, 1881.

Jean Martin Charcot (1825-1893)
Lec̦ons du mardi à la Salpêtrière: policliniques, 1887-1888.

Jean Martin Charcot (1825-1893) &
Paul Marie Louise Pierre Richer (1849-1933)
Les démoniaques dans l'art: avec 67 figures intercalées dans le texte.
Paris: Delahaye et Lecrosnier, 1887.
Conserved by donation from the Friends of the RSM Library

Paul Regnard (1850-1927)
Les maladies épidémiques de l'esprit: sorcellerie, magnétisme, morphinisme, délire des grandeurs. Ouvrage illustré de cent vingt gravures.
Paris: E. Plon, Nourrit, 1887.

Jean Martin Charcot (1825-1893) &
Paul Marie Louise Pierre Richer (1849-1933)
Les difformes et les malades dans l'art.
Paris: Lecrosnier et Babé, 1889.

Georges Gilles de la Tourette (1857-1904)
Traité clinique et thérapeutique de l'hystérie d'après l'enseignement de La Salpêtrière.
Paris: Librairie Plon, E. Plon, Nourrit et Cie., 1891-1895
Jean Martin Charcot (1825-1893)
Clinique des maladies du système nerveux.

Paul Marie Louise Pierre Richer (1849-1933)
L'art et la médecine.
Paris: Gaultier, [1901?]

Pierre Janet (1859-1947)
Névroses et idées fixes.
Travaux du Laboratoire de Psychologie de la clinique à la Salpêtrière; | 2ème sér.

Georges Guillain & Pierre Mathieu
La Salpêtrière.
Paris: Masson, 1925.

Walter G. Spencer
Bibliography of the writings of Jean Martin Charcot, compiled and annotated by W.G. Spencer Hon. Librarian, Royal Society of Medicine.
1925

Sigmund Freud (1856-1939)
Studies on hysteria by Josef Breuer and Sigmund Freud.

Georges Guillain
New York, Hoeber, 1959
Among the books consulted in the making of this exhibition, the following, all of which are held in the RSM Library, were especially helpful:


Exhibition Curated by Robert Greenwood, Heritage Officer
Booklet compiled by Robert Greenwood & Ashley Phillips