

# The History of Asylums

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Entertainment

Midnight Facts for Insomniacs

Podcast Transcript

(Note: transcript consists of  
episode outline)

Are you in the mood for a fun, lighthearted episode for a change? Well, tough. This isn't that. We're going to be talking about the history of mental asylums. This is a sensitive subject; mental health is obviously a touchy issue. I've had my own struggles with mental health, and many of my friends have, I have friends who have been 5150d and confined to institutions for varying durations. And it's always controversial when someone is confined against their will based on their state of mind. But most of these institutions that we're going to be discussing today are NOT particularly controversial because they were undeniably horrendous. And that's because up until a few decades ago most of the so-called treatments for mental health disorders were flat out barbaric. But I want to be clear: this is an episode full of gray areas. Many of

the people who pioneered these treatments and founded or administered these institutions were not villains, they weren't rubbing their hands together while charging up their shock collars. These weren't the dentists from Little Shop of Horrors. At least, most of them weren't. There were a few sadists thrown in the mix, and we'll talk about those—obviously we'll get into the grim details—but it would be far too easy to lean on sensationalism and get lost in the torture-porn aspects of Gothic, Arkham-style asylums, and dismiss the human element from these stories. For the most part these were well-meaning doctors grappling with conditions that they were poorly equipped both technologically and medically to handle. And we *still* don't have any CURES for mental illness, we've found chemicals that can help, but modern treatments for even the most common mental ailments can be hit and miss. It can take numerous tries to get the dosage and prescription right for even a mild case of depression or anxiety. We still do not understand the brain, and these are nuanced disorders, they're very complicated. Even today there are no easy solutions, and hundreds of years ago the situation was even worse. What do you do with someone who might be a danger to themselves or

others through no fault of their own, just because of misfiring in their skulls? It might not be fault of the mentally ill person that they have a sociopathic disorder, but that isn't much of a comfort to the people who have been eaten. One of the least appealing yet apt metaphors is that of a rabid dog... It's not the dog's fault it's foaming at the mouth and feeling extra bitey, but you can't just release it back into the wild. I know that's a harsh and maybe even cruel-seeming metaphor, but I grew up in San Francisco and I've had encounters with people who had no business being on the streets. Dealing with people who are mentally ill to the point that they are dangerous has been a conundrum throughout history, and we still struggle with it today. There's no easy answer.

And in the spirit of harsh metaphors, we're also going to be using some problematic language in this episode, because the language used to describe people with mental illnesses has always been problematic. Many of the earliest institutions for mentally ill people were referred to as lunatic asylums. The word lunatic, as you might've guessed, is derived from Luna, and directly evolved from the Latin word *lunaticus*, i.e. "of the moon" or "moonstruck." Back in antiquity, as far back as Aristotle, the moon was

believed to play a role in bipolar disorder and madness and especially epilepsy because it illuminated the nighttime when people were trying to sleep and thus caused sleep deprivation. I guess this was before ceilings and curtains, or the modern technique known as "closing your eyes." How was this a problem? Also, I feel like the benefits of moonlight far outweigh the drawbacks. Why were they vilifying the moon? There are easy ways to block out the light when you don't want it, and providing illumination at night when you *do* want it doesn't seem like a bad thing. "Dammit, why can't it be pitch black every night? I sure hate being able see obstacles in my path, thanks a lot, moon. Making people crazy and saving my ankles." I'm also fascinated by the theory that epilepsy is caused by just being super tired. I feel like that's not a connection I would've made. "This man's violent seizure is obviously the result of a night of subpar sleep. He is clearly so exhausted that his body has decided to spasm uncontrollably. Obviously when you're tired your body just wants to relax, but when you're really *really* tired your body decides to activate every muscle and nerve simultaneously and expends all its remaining energy, presumably as some type of protest." Did doctors think epilepsy

was a tiredness temper-tantrum?  
"This man is flopping on the floor, quick, get him some warm milk and a Snuggie and block out the moon." Obviously the term lunatic has fallen out of favor in the modern era, and the moon has been mostly forgiven and exonerated for its supposed role in lunaticism, but it would take until December 2012 for legislation to catch up with culture. That was the year that Barack Obama signed "The 21st-century language act of 2012" banning the word lunatic from all federal mental health laws in the United States. Note that the law only applies to *Federal* legislation. Individual states are still free to insult the mentally ill. I'm looking at you, Texas. you think I'm kidding, but the only no vote against that legislation in the congress came from Louie Gohmert of Texas. "Damn political correctness police trying to stop the American government from using outdated, barbaric and abusive language to describe its most vulnerable citizens. Last I checked this is 'merica, and abusing the vulnerable is tradition. Cancel culture strikes again. Takin away all the funnest words." The legislation did not, however, remove the word *idiot*. Nice. Score one for the good guys. The law was specifically intended to address legal language from 1947, U.S. Code, Title 1, Chapter 1, which

specified that the term lunatic would be used as a catchall for mental illness: "The words insane and insane person and lunatic shall include every idiot, lunatic, insane person, and person non compos mentis" ("compos mentis refers to having control of your mind)." That's amazing. They created a legal document to clarify that idiots are also lunatics. "Look, we want to make it 100% clear that when this legislative body refers to you as a lunatic, the fact that you are also an idiot is implied. We don't want any confusion. You are all of the things under the lunatic umbrella. And we further reserve the right to also call you a fucknugget and a bastard if it is warranted in the future." Wow. When the government officially brands you an idiot, that's rough. And also, if every idiot in America is also insane, this country is in serious trouble. This is a plague of insanity. I want to go on the record stating that I don't think anyone should use the word idiot or lunatic except in reference to Louie Gohmert. He is both a lunatic and an idiot. The word lunatic, incidentally, outlasted the dreaded R word. The term "Mental retardation" had been removed from federal legislation two years earlier in 2010. And it was removed from our "memes" episode in 2020. I referred to grumpy cat by the R word and was called out, justifiably.

I have apologized to the memory of tardar sauce. RIP.

But to delve into the history of mental institutions we have to talk about what came before. Which was nothing. Before lunatic asylums, there were very few options for coping with a mentally ill family member: you could turn them out to fend for themselves, turn them over to a monastery—there were a few monastic orders that cared for the mentally ill—or lock them in some version of the attic or the basement. Mental illness was often a dirty family secret. And of course as we learned in our exorcism episode, number 74, madness was often attributed to satanic influence or demonic possession. In *Shrinks, the untold history of psychiatry*, Jeffrey A Lieberman writes, "The mentally ill were considered social deviants or moral misfits suffering divine punishment for some inexcusable transgression."

And of course ignorance is one of the central obstacles when it comes to any type of medical condition: if you don't understand the underlying physiological problem, it's extremely hard to find effective ways to treat it. You're basically stuck with the trial and error method: "Welp, splashing him with holy water didn't work. Any other ideas? Icepick to the frontal lobe? Worth a shot."

Of course none of the methods used to cast out demons are going to be effective for treating a mental health condition, in fact most are going to make the situation significantly worse, which will in turn contribute to the perception that there is no cure for insanity. That perception would take centuries to change, and as has been true in every era up to today, only the power of social influencers would have the ability to change the mainstream narrative. Honestly, who has done more good for the world than influencers? In ancient times, those influencers were royalty. As it turns out, crazy royals didn't appreciate being called crazy. Weird. As we've covered in past episodes like number 57 "Unhinged Tyrants and Sadistic Monarchs, one of the drawbacks of inbreeding: genetic abnormalities that can contribute to mental illness, but on the plus side, if you're screaming nonsense in a castle you're going to be treated a lot better than someone who is screaming nonsense on the sidewalk. Castle privilege. As more and more inbred Royals lost their minds via spectacularly public meltdowns, the stigma surrounding mental illness began to erode, a bit, and there were a few seminal events that had particular impact— if you remember, we covered King Henry the sixth when we talked about the war of the

roses; he had inherited a mental condition from his grandfather, Charles the sixth of France, who likewise experienced intermittent bouts of insanity. If you recall, Henry endured over a year of a catatonic state, but emerged from it just long enough to participate in the war of the roses, be captured, and lose his mind yet again.

Similarly, in 1789 King George III, who throughout his reign would suffer from bouts of mania and derangement, experienced a prolonged remission during which his symptoms receded. These very public fluctuations of sanity made it clear that "lunacy" wasn't necessarily a permanent or incurable condition. The demons could be potentially be expelled, with the right combination of toxic poisons and bloodletting.

## **The Bethlehem Royal Hospital**

The first iconic insane asylum was the infamous Bethlehem Royal Hospital, also known by the unfortunate nickname "Bedlam," which is actually where we get the modern definition of the word bedlam meaning a state of uproar, pandemonium and confusion. That's how bad this place was. It's like when you say "If you look up the word jackass in the dictionary there's a picture of you." In this case it's actually true. If you

look up Bedlam in the dictionary there's a picture of this place. Or at least a reference to it. There was a Boris Karloff horror film produced about the Asylum in the 1940s titled Bedlam.

Bedlam was founded in London under king Henry the third, in 1247. It wasn't initially a mental hospital, it was a center for the collection of alms to support the crusades and crusader churches, which we covered in episode 20, secret societies, and more specifically when we discussed the Knights Templar. Bethlehem/Bedlam was subsequently used to house the poor, and also visiting church administrators. The first recorded evidence of Bethlehem being used to house the mentally ill was in 1403, when a visitation of the charity commissioners recorded the presence of six mentally ill inmates and also "four pairs of manacles, 11 chains, six locks and two pairs of stocks..." Foreshadowing. The accommodations at Bedlam, not super cozy. At first I was like, hey, only four pairs of manacles for six patients, that means two of them were free. But there were two pairs of stocks so, yeah. That's worse. Cake or death...manacles or stocks. Manacles, please.

Funding for the hospital was initially provided by charitable donations, in

addition to patrons, and family and friends of the inmates. The early management of bedlam was famous for lining their pockets at the expense of the patients.

Skimming off the top was the norm throughout the history of bedlam.

The position of "master" of the asylum was obtained via nepotism and as a reward for loyalty or fealty.

The role was variously held by a grocer, a draper, and also a couple of bartenders and innkeepers. "We employ only the most qualified of food service employees and manual laborers to care for our mental patients. Because we have standards. This man may not have "experience" or "a relevant skillset" but he can serve a hell of a martini. That's a form of therapy."

Surprisingly, bartenders and grocers don't have the best track record of running a busy mental-healthcare facility. By the time an inspection was conducted in 1579, the building featured caved-in roofs and blocked sinks and was found to be "not fit for any man to dwell in." Additionally, the building had been constructed on top of a sewer which regularly backed up, "resulting in overflows of waste at the entrance of the hospital." First impressions: very important. Not a great sign when visitors are greeted by a river of shit. Patients often slept in their cells on beds of straw, next to overflowing piss pots and

mounds of their own excrement, which they frequently lobbed at visitors and staff alike. So if you made it through the river of shit, you still weren't safe. Excrement could come at you from any elevation.

Up until 1751, Bedlam had a monopoly on insanity; it was the only facility "treating" the mentally ill, and perhaps the most publicized era in the facility's history would be during the reign of the Munro dynasty. Beginning in 1728, a single family would control Bedlam: four successive generations of Munro men (James, John, Thomas, and Edward) would serve as the "mad doctors" of Bedlam (that is a technical term...for years it was used in England to refer to a doctor for people who are mad, and was also very confusing during my research. I was not aware that you could be an official, well-respected mad doctor. The other antiquated term was "alienist." This all sounds like something out of American Horror Story: Asylum. I do not want to be treated by alienists. Sounds like there'd be probing involved. The Monros were not, however, members of the well-respected variety of mad doctors, at least in retrospect. History has not been kind, for instance, to the practice of purging mental illness by evacuating the contents of the stomach. A quote from John Monro,

second of the mad-doctor-Monros of Bedlam: "I will venture to say, that the most adequate and constant cure of [madness] is by evacuation; which can alone be determined by the constitution of the patient and the judgment of the physician. The evacuation by vomiting is infinitely preferable to any other, if repeated experience is to be depended on." It's good to know that my college years were therapeutic. Many evacuations. Another common treatment at asylums was hydrotherapy, which isn't nearly as spa-like and relaxing as it sounds. Usually this consisted of being hosed down with ice-cold water or being submerged in frigid baths to supposedly calm the nerves during manic episodes. Nothing more relaxing to the nerves than frostbite. These techniques weren't confined to Bedlam, but the Bethlehem hospital would become notorious as one of the most brutal of all asylums. "All mental illness, it was thought, could be cured by inducing recurring bouts of vomiting and diarrhea, and by bleeding from the veins." **Bleeding was usually the initial treatment. It consisted of venesection (opening up a vein), scarification (using a spring-loaded instrument to produce a series of small cuts), or cupping (placing a warmed glass cup over a cut which filled with blood as the pressure inside**

dropped). Blistering involved placing hot plasters onto the skin to raise blisters, which were then drained. The most common purgative was Calomel, a form of mercuric chloride which worked as a laxative in small doses, but usually was prescribed in large doses to purge the system." I guess we know why that sewer was backing up. Nothing says quality medical institution like a torrent of shit and vomit. Another popular therapeutic technique: rotational therapy. Rotational therapy was developed by the grandfather of Charles Darwin, Erasmus Darwin, who observed that children enjoyed spinning around and would often collapse, delighted and laughing from the dizziness. So he designed a device to recreate the sensation. Children also enjoy eating crayons and dirt, but ok. So in rotational therapy, a chair would be hung from the ceiling and spun at up to 100 revolutions per second, until the patient begged convincingly enough to stop or projectile vomited, which was obviously considered a great success. The Monros would also vigorously defend the practice of putting their patients on display; they charged the public a fee to view the mentally ill. Nothing screams "compassionate medicine" like exploiting mental illness for profit and exhibiting patients like

sideshow carnies. "Step right up and view the blistered vomiting man, his affliction is a mystery, or maybe it's because we scald him and feed him nothing but dirt. One of those. Also, witness the incredibly pungent excrement-man, squatting in his own feces because we don't clean his cell. I recommend you be prepared to duck and dodge as we pass by. And to your right you'll find James Norris, who has been chained to an iron bar for more than a decade." If that last one seems oddly specific, that's by design: patient James Norris was indeed shackled for over ten years, until his plight was publicized by philanthropist Edward Wakefield. A description of Norris's confinement: "A stout iron ring was riveted round his neck, from which a short chain passed through a ring made to slide upwards and downwards on an upright massive iron bar, more than six feet high, inserted into the wall. Round his body a strong iron bar about 12 inches wide was riveted; on each side of the bar was a ring; which was fashioned to and enclosed each of his arms, pinioned them close to his sides." I love that thousands of people visited Bedlam over the years and only one of them was like, hmm. This all seems mildly problematic." Or I guess at least a couple did. Based on the discoveries of concerned citizens

like Wakefield, Parliament appointed a select committee in 1814 to investigate so-called "mad houses." Bedlam was shut down as a result, and immediately reopened in a new location. But on the plus side, major changes were implemented—for instance, instead of being administered by the disgraced mad doctor Thomas Monroe, the new institution would be run by both Thomas Monro AND his son, Edward Monro. Twice the Monros, what could go wrong. But a *few* positive changes would be mandated, including a required annual report and the appointing of a superintendent. However, it wouldn't be until Edward finally resigned in 1855 that the reign of the Monros would come to an end and real change would come to Bedlam.

So it's easy to focus on the worst of the worst, like bedlam and the Monros, but even as we explore some of these gruesome specifics I think it's important to once again keep in mind that after the dawn of the Age of Enlightenment in the 1600s, almost every insane asylum was at least *founded* with good intentions. The word "asylum" means refuge, shelter. I'm going to return to this theme a few times in this episode just to provide a reality check: it's incredibly hard to take care of people who are severely

mentally ill without the benefit of mood stabilizers and modern medicine. Hell, it's incredibly hard to take care of mentally ill people even WITH those things. Our supposedly modern American mental healthcare system is a complete mess, so I'm just saying: glass houses, stones. Which doesn't justify all of the hideous abuse that occurred in the past, but I do think it's important to provide some context—to remember that these so-called tortures were accepted medical practices of the era—and as misguided as the mad doctors might have been, the truth is that the history of medicine generally involves frustrated, overworked people trying to do the right thing.

For instance, let's talk about the Quakers, the Protestant sect of sober pacifists who were instrumental in pioneering less-punitive forms of mental healthcare. In 1791 Quaker William Tuke was appalled to learn of the death of Hannah Mills, a quaker who had been admitted to the York asylum suffering from "melancholy," which we now would describe as depression. Her family was denied permission to visit, and she later passed away under suspicious and to this day unexplained circumstances. Her death inspired Tuke's daughter to suggest that the

Quakers open their own asylum, and Tuke was further motivated by his visit to St. Luke's hospital in London where he witnessed a female patient chained naked to a wall. In 1795 he founded the York Retreat, which would pioneer the concept of "Moral treatment," deemphasizing extreme therapies and instead focusing on mental rehabilitation. The Retreat, as it became known, featured long corridors for patients to stroll, warm baths, and exercise. The Retreat also implemented a minimal-restraint policy, and attempted to use a basic system of reward and punishment to modify behavior. It was definitely an improvement over the lock-everyone-in-with-their-own-feces method, but it wasn't a perfect system. It turns out people with extreme mental illness are not exactly the same as dogs, you can't Pavlov them into being not crazy. "Listen, if you quit hallucinating right now, I will give you a Scooby snack." But Tuke's real innovation was to generally treat patients with a modicum of dignity. Patients were assigned household chores, and expected to dine together. William and his son Henry also pioneered the concept of grouping patients by their maladies and symptoms, rather than lumping all of them together. This strategy seems obvious today, but it took literally hundreds of

years to figure out that people with anxiety and nervous disorders do not benefit from being housed next to violent schizophrenics. Not that *anyone* benefits from being housed next to violent schizophrenics. Maybe narcoleptics. Nothing like piercing screams to jolt you awake. I'm not making fun of schizophrenics and psychotics... again, we just have to be able to laugh at tragedy. It's the only way to cope. But I AM sticking to my conviction that psychotics should have their own area. Probably not be housed with people who just get sad around Christmas time or whatever.

Up until the early 1800s, lunatic asylums were generally private institutions, supported by fees paid by family members plus charitable contributions and admission prices for gawkers. But in 1808 England established the first public institutions, funded by the government, with the County Asylums Act. Three years later the first public asylum was officially opened, in Nottinghamshire. The institution would be presided over for the following four decades by the infamous sheriff of Nottinghamshire, who, in addition to rotational therapies and blistering would also subject the inmates to unreasonable taxes, eventually inspiring a rebellion led by a patient

known only by his initials R.H. No. But the rest of that is true. First public asylum, Nottinghamshire. Hot on the heels of the James Norris decade-of-chains debacle, parliament passed the Lunacy Act of 1845, which required hospitals to create and follow written regulations with an eye toward patient rights. It also created the Lunacy Commission, charged with overseeing public institutions and enforcing newly created regulations. Not sure if I would want to be nominated for the lunacy commission. I know it's not PC, but I really wish we'd named one of our upcoming Patreon tiers the Lunacy Commission. The Lunacy Act of 1845 also contained a bit of a step backward...it decreed that mental patients be denied access to the court system, and thus be unable to challenge their detention. Cool. Very progressive. "So you say you're not crazy? That's exactly what a crazy person would say."

The first public *American* mental institution would be the Utica State Hospital, founded in New York in 1850. With the proliferation of public institutions, the 19th century would prove to be a time of massive upheaval in the field of mental healthcare, and the three biggest names behind the mental health revolution would be Kirkbride, Bly and Dix. Do any of those ring a bell?

We'll talk about each separately. If you're not familiar with Kirkbride Hospitals, you actually are. Every horror movie that features an imposing, gothic mental asylum is showcasing the work of Thomas Story Kirkbride, who created a structural template that would define the iconic lunatic asylum for generations.

Thomas Kirkbride, like William Tuke, was a Quaker. We owe the Quakers an immense debt of gratitude for their contributions to reforming the asylum system, and also for delicious oats. Those are not actually related to Quakers. The company decided to brand their oats as Quaker oats because Quakers were associated with honesty and good value. Midnight fact. Anyway, a trained doctor who had worked in a number of mental institutions, Kirkbride would develop his theories of asylum construction while employed in Philadelphia at the **The Asylum for the Relief of Persons Deprived of the Use of Their Reason**, a Quaker institution which would later be renamed Friends Hospital. Good call. The original title was very descriptive but a little wordy. Friends Hospital is kind of weird but warmer. A hospital full of friends is actually really tragic, like everyone you know is on their deathbed. I prefer a hospital of strangers. That's a horror movie: Friends

Hospital. But either name honestly sounds a lot better than bedlam.

Kirkbride's approach would be truly revolutionary, and he would lay out his theories regarding asylum design in a treatise called "On the Construction, Organization, and General Arrangements of Hospitals for the Insane With Some Remarks on Insanity and Its Treatment."

Thoroughness and specificity, clearly very popular when it comes to naming things in the 1800s. His original treatise was followed by a sequel in 1898 titled, "Yet another book written by me, Thomas Kirkbride, containing many words and phrases which describe even more of my thoughts about hospitals as well other such musings as may occur to me during my nightly strolls, for I suffer from rampant insomnia and only wish that I could be privy to a bi-weekly conversation about interesting facts delivered by two dapper gentlemen which might keep me entertained through the long and lonely Philadelphia nights." I'm paraphrasing, it was much longer.

Asylums built according to the Kirkbride Plan tended to be large, imposing institutional buildings, with the defining feature being their "narrow, stepped, linear building footprint" featuring staggered wings extending outward from the

center, resembling the wingspan of a bat." Not remotely terrifying. The idea was sound, or at least it seems that way. By employing long narrow corridors, patients had room to roam, and the windows lining the wings provided ample light, which was considered necessary for health. And it makes sense...the idea was to move away from those dungeon-like predecessors. The surrounding property was likewise important: the hospital grounds were to be expansive and rural, often grassy fields, providing room to roam as well as opportunities for exercise and work: the patients were intended to maintain the grounds themselves, which would keep them physically and mentally occupied. These are solid ideas; the guy was on to something here, or at least he can't be faulted for trying. His 1854 "Kirkbride Plan Design" even included suggestions for minimum staffing levels for the hospitals and advocated a living wage, pointing out that "although in a few institutions a liberal compensation is given, in many, the salaries are quite too low, and entirely inadequate to be depended on, to secure and retain the best kind of talent for the different positions. The services required about the insane, when faithfully performed, are peculiarly trying to the mental and physical powers of any individual, and ought to be

liberally paid for." So you're saying slave wages are not the greatest motivator to work a thankless, traumatizing job. Who would've guessed.

"The duties of attendants, when faithfully performed, are often harassing, and in many wards, among excited patients, are peculiarly so. On this account pains should always be taken to give them a reasonable amount of relaxation and their position should, in every respect, be made as comfortable as possible." He added, "Which is why I have suggested giant Gothic mansions cut from unyielding stone. What can be more comfortable than a fortress?"

At least 73 kirkbride hospitals were constructed in the United States in the six decades between 1845 and 1910, and you can find about 33 still standing, in various states of preservation.

The biggest problem with Kirkbride hospitals, obviously, is that they were intimidating. They're built like fortified castles; "giant stone citadel" as previously noted, does not foster an intimate and welcoming aesthetic. I guess the idea is that they were built to last, although many of them didn't.

## **Dorothea Dix**

While Thomas Kirkbride

revolutionized the form and to some degree the function of mental hospitals in the 1800s, an argument could be made that one of the most influential figures in the history of mental health care is Dorothea Dix. She is almost single-handedly responsible for the proliferation of asylums in America in the 1800s. After experiencing her own struggles with mental illness and also obtaining a sizable inheritance from her grandmother, Dorothea traveled from state to state, lobbying legislatures to establish lunatic asylums. She had good intentions, but wasn't free from controversy. First off, Dorothea was a giant racist. Which was kind of par for the course at the time, but it's a little bit weird because generally support for healthcare reform went hand-in-hand with support for other causes like women's suffrage and abolition of slavery. But not for Dix. She just wanted to make white people less crazy. Which, now that I say it out loud isn't a terrible goal. But I think we should extend the reduction of craziness to ALL races. Another controversial stance was her "ugly nurse" policy. That wasn't the official policy name, but during the civil war in 1861 Dix was appointed superintendent of nurses for the Union Army, and she did attempt to require all of the women who worked in her hospitals to be between age 35 and 50 and "plain

looking." They were forbidden from wearing any color other than drab browns and tans, plus she banned jewelry and cosmetics. Supposedly this would protect them from lecherous doctors and patients alike. I feel like crazy people aren't super picky when it comes to who they harass, but what do I know. Probably doctors too. It was the 1800s, if there was a woman in a workplace she was going to be made uncomfortable regardless of age or the color of her shirt. I think that was a law or something. Dix was also rabidly anti-Catholic. She distrusted Catholic nuns and resisted working with them as nurses. I wonder how she felt about black Catholics. It's always funny to me when bigoted people meet someone who combines all of their prejudices at once; it's like a perfect storm of bigotry. I'm a half-black half-Asian non-binary Socialist who refuses to say Merry Christmas. Their head explodes.

Further complicating her legacy, many of the institutions Dix helped found would become examples of the iconic horror-house, Arkham-style type facilities. These were the types of institutions that would be exposed by investigative journalist Nellie Bly, who in 1887 would feign insanity in order to have herself committed to Blackwell mental institution for ten days. We discussed Bly in detail in episode

28, "unique historical humans" so we won't repeat ourselves, but suffice to say that Bly's expose, titled "ten days in a madhouse," exposed a system that was inadequately funded, overcrowded, and host to inhumane treatments like beatings, intentional humiliation and enforced nudity, frigid baths and tremendously unsanitary conditions. And while her work would bring attention to mental health issue and result in *some* reforms, the 1900s would nevertheless introduce fresh horrors pioneered by a brand new generation of scientists who would commit to the tried-and-true technique of winging it with so-called cures like shock therapy and lobotomies.

Let's talk about some of those new torments. I mean treatments. We've covered the type of so-called cures that were relics from the Middle Ages, like bloodletting and blister therapy, but the 1900s would amount to a step backward, introducing in a plethora of brutal and experimental techniques.

**Some examples:**

"Henry Cotton — superintendent at New Jersey's Trenton State Hospital from 1907 to 1930 — thought infected parts of the body led to mental illness. He focused on pulling rotting teeth, which he

thought caused madness-inducing infections. When that didn't work, presumably because contaminated saliva still made its way into the body, Cotton began removing tonsils as well.

And then he took it a step further, removing parts of stomachs, small intestines, appendixes, gallbladders, thyroid glands, and particularly parts of the colon — any place where it was thought infection could linger. Unsurprisingly, this did not prove to be a reliable cure and it carried a high mortality rate.

Inspired by the discovery that high fevers helped stop the symptoms of advanced syphilis, Julius Wagner-Jauregg experimented with inducing fevers in people with schizophrenia by injecting them with malaria-infected blood. This popular method even earned Wagner-Jauregg the [1927 Nobel Prize](#) in Physiology or Medicine, the first ever awarded for the field of psychiatry.

Like Cotton's body-part-removal technique before it, malaria-induced fevers had a high mortality rate: "About 15 percent of patients treated with Wagner-Juaregg's fever cure died from the procedure,"

Another common treatment: insulin coma therapy, in which the patient was injected with insulin to induce a temporary coma. Once again it all comes down to priority number one:

shut the patient up. Priority number two: determine if the patient has been shut up; if not, see priority one. Oops, looks like the patient died. Well, mission accomplished.

## **LOBOTOMIES**

Beginning in the 1940s, another popular "therapy" for people suffering from mental illness was the lobotomy, which we covered in detail in our medical quackery episode, way back in episode 15. We won't go into depth, but the strategy behind a lobotomy was to delicately drive an icepick through the patient's eyesocket directly into the front of the brain, and then wiggle the icepick around to sever some connections and let's be honest there was no real strategy, but it sometimes did a really good job of making people seem less crazy by calming them down. Priority number one. Very few conditions are more calm and serene than the condition of being braindead.

Electroconvulsive therapy, ECT, commonly known as Shock therapy was also extremely popular. This was another delicate operation in which up to 120 volts of raw electricity was pumped directly into a patient's skull for a duration of up to six whole seconds. That may not sound like a long time, but we've discussed how time is relative... I've

never been electrocuted for more than a split second, but every incident has been excruciating. I honestly can't imagine. One 1000, two 1000, three 1000...

Electric shock therapy was developed in the 1930s, when Italian doctor Ugo Cerletti stopped by a butcher shop on his way home one day and was directed around back to the slaughterhouse to obtain a specific cut of meat. It was there that he witnessed an incident of pig slaughter, in which the pig was first sedated and anesthetized by electricity. And he thought, hey if it's good enough for pigs, it's good enough for patients. I feel like this was the prevailing sentiment in all of medicine at the time. "At [the] slaughter house, the technique used for butchering cattle involved an electric shock to their heads. This would cause the cattle to go into seizures and fall down, making it easy to slit their throats. In that time period, people believed that seizures were essential in preventing schizophrenia, since many believed that those diagnosed with epilepsy were immune to the disorder. Cerletti reasoned that electric shock might be useful in humans as a treatment for schizophrenia." Another thing I've noticed about pigs in slaughter houses, they become extremely calm when you sever their heads. Food for thought. It turned out that

not only did the electro shock therapy have a calming effect, it also had the beneficial side effect of erasing short-term memory, which meant that patients didn't realize or remember how traumatic the experience had been.

Convenient.

Interesting note: electroshock therapy is still used today, and considered an accepted and potentially beneficial medical procedure. Of course, modern implementations utilize anesthesia and extremely short and targeted bursts of electricity. So maybe Ugo was on to something, or maybe we are still in the dark ages of medicine.

### **Straight jackets**

Straight Jackets began to be widely used around the turn of the 19th century. You've all seen these, they are typically white jackets with long sleeves that could be pulled taut and tied around the patient's back. They were considered an improvement over shackles, and, I guess, but I'm claustrophobic and so having metal clasp around my wrist might be preferable to being low key mummified.

### **The Trans-Allegheny Lunatic Asylum**

Before we wrap this up, we have to discuss another case study, one of

the most famous Kirkbride hospitals: the iconic and supposedly haunted Trans-Allegheny Lunatic Asylum in West Virginia. You'll learn all about this place on pretty much every paranormal podcast or tv show, although of course many of them will play fast and loose with the facts. But the asylum was undeniably fucking terrible. You wouldn't have wanted to end up there. Designed to be completely self-sufficient, the hospital featured water works, a gas well, a dairy farm, and its own cemetery. It was like its own little world, which IS pretty creepy to me. It could continue to function even if cut off from society. Like the world could have ended and the patients would have no idea, they'd just continue being raped and tormented and raping and tormenting each other until the end of time. Initially built to house 250 patients, the number of inmates spiked in the 20th century even as the conditions of the hospital declined. By 1949, approximately 1800 patients would be packed into what had now been rechristened Weston State Hospital. In the 1960s, the hospital became the headquarters of the West Virginia lobotomy project. Not a project you want to be associated with. Like you're going to be involved with quite a few projects your life: school projects, work

projects, but I recommend not volunteering for the lobotomy project.

Among the many tragic elements of this hospital—putting aside the treatment of the patients—were the innocuous and sketchy justifications for sending people there. The first ever patient admitted was a housewife whose malady consisted of “domestic trouble.” There’s no further explanation but it was probably like she undercooked the chicken or something. Based on hospital logbooks, some of the various justifications for being admitted could include: “grief, congestion of the brain, feebleness of intellect, seduction, and novel reading.” Don’t be a sad, sexy, novel reading dummy. Other common “ailments” that could get you committed: “laziness, religious enthusiasm, menopause, superstition, masturbation, and tuberculosis.” With such a plethora of possible diagnoses, the population of patients spiked in the 19th century, jumping over 90% in the United States alone and leading to massive overcrowding. Which naturally led to new, horrific forms of abuse and torment. first, sterilization was practiced at **Trans-Allegheny and other similar facilities. Can’t have the crazies multiplying.** But the abuse in overcrowded asylums wasn’t just a matter of the patients enduring

abuse at the hands of the staff. Another form of abuse can take the form of neglect. Patients were often ignored and left to their own devices, which often led to patients victimizing other patients. At **Trans-Allegheny** there were horrific murders committed by patients, rapes, all kinds of sketchy mischief.

The hospital wouldn't be closed until 1994. It now houses tours and has become a favorite destination for ghost hunters and other paranormally-obsessed weirdos. Like my wife, probably, she would totally go on that tour. But if you want to learn how ghosts aren't actually a thing, Duncan will tell you in our host swap episode number 81: ghosts. I want to point out that I personally was very open minded to the idea of ghosts and apparitions until you threw cold water on my dreams of one day experiencing a paranormal encounter. You hydrotherapied my dreams.

The decline of asylums worldwide coincided with the discovery and development of medicines capable of managing many of the conditions that previously required hospitalization. Antidepressant, antipsychotics. We now have pills that can treat even horrible the most horrible symptoms of insanity like novel reading, domestic

troubles and masturbation. But as mentioned, mental healthcare, still a work in progress...that's the most charitable way to put it. I have a friend who recently required hospitalization for severe depression and this person spent over 30 hours confined to a waiting room, like not allowed to leave, before being discharged because there wasn't anywhere to send them, and their insurance didn't cover private institutions. So fuck you, American healthcare system, and anyone who votes against universal healthcare. I'm not a socialist by any stretch, but we are the only industrialized modern nation without a national healthcare system and it's inhumane.

Hey, before we read this week's review, if you are listening to this podcast on Spotify you can finally leave a rating. Not a review, but a really quick easy five star rating in the very app that you're listening to. It's super easy, I hope you all do it.

## Q&A

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<https://www.sciencemuseum.org.uk/objects-and-stories/medicine/victorian-mental-asylum>

[Lunatic asylum - Wikipedia](#)

[Bethlem Royal Hospital - Wikipedia](#)

[The History of the Asylum – TheTimeChamber](#)

[The American Mental Asylum: A Remnant of History | Psychology Today](#)

<https://amp.theatlantic.com/amp/article/320769/>

<https://en.m.wikipedia.org/wiki/Lunatic>

<https://www.businessinsider.com/congress-removes-the-word-lunatic-2012-12?amp>

[An Insane American - Graphic Arts \(princeton.edu\)](#)

<http://old.rcplondon.ac.uk/history->

[heritage/exhibitions/Past-exhibitions/inside-bedlam/Pages/monros.aspx](#)

[John Monro \(physician\) - Wikipedia](#)

[The History of Inhumane Mental Health Treatments - Talkspace](#)

<https://www.utoledo.edu/library/canaday/exhibits/quackery/quack2.html>

<https://www.talkspace.com/blog/history-inhumane-mental-health-treatments/>

<https://www.legendsofamerica.com/trans-allegheny-lunatic-asylum/>

[https://en.m.wikipedia.org/wiki/Ugo\\_Cerletti](https://en.m.wikipedia.org/wiki/Ugo_Cerletti)

<http://numberonelondon.net/2017/05/treating-mental-illness-during-the-regency-rotation-therapy/>

<https://allthatsinteresting.com/insane-asylums/5>

