

10 Bizarre Beliefs about (So-Called) Insanity in the 19th Century

By Zena Ryder

The 19th century saw plenty of improvement in the understanding and treatment of mental illness, compared to earlier centuries.¹ No longer satisfied with supernatural explanations, doctors and scientists now tried to find and understand *physical* causes of mental illness. Despite huge advances, 19th century doctors and scientists still got a lot of things very wrong — and their bizarre beliefs range from the amusing to the tragic.

1. Poor tea party manners were a sign of insanity

A sane person could successfully perform and enjoy social rituals such as tea drinking. And they could also maintain self-control and not succumb to pathological over-indulgence. To test an asylum patient's ability in this arena, they might be invited to take tea with the asylum superintendent and his family.

In the brilliant book, *The Woman They Could Not Silence*,² Kate Moore tells the story of Elizabeth Packard. On the say-so of her domineering husband, Packard was committed to the Jacksonville Asylum in Illinois in 1860. She was an educated, middle-class woman, who was the daughter and the wife of ministers. Initially, she was given various perks — including invitations to dine with the superintendent. But she was not refined enough to keep her criticisms of the grim institution to herself. So her tea party privileges were revoked and she was sent back to eat on the ward surrounded by violent patients.

2. Insane asylum tourism was a good thing

During the 19th century there was a gradual shift from the belief that the mentally ill were incurable 'monsters' to believing they were curable. They just had to be given the right treatment in pleasant surroundings.³ Asylum patients had always attracted gawkers. (It cost a shilling to see the 'lunatics' in the Bethlem Royal Hospital in London, England — commonly known as Bedlam.)⁴ Later in the century, the buildings and grounds of some 'new and improved' asylums attracted genteel tourists.

The 1880 *Englishman's illustrated guide book to the United States and Canada*, recommended a trip to the New York Lunatic Asylum at Bloomingdale.⁵ “It is conveniently reached by the Hudson River Railroad. A visit to this Institution will well repay the tourist or philanthropist. The scenery in the vicinity is very beautiful.” Kate Moore reports that “one New York hospital attracted up to ten thousand visitors a year.”⁶

3. Bumps on the skull could show madness

19th century phrenologists believed bumps on the skull revealed information about mental faculties in the brain.⁷ For example, a bump in the middle of the forehead might indicate highly developed intuition.

Andrew Combe published a book in 1834 called *Observations on mental derangement; being an application of the principles of phrenology to the elucidation of the causes, symptoms, nature, and treatment of insanity*.⁸ He believed the cerebellum was the organ of “Amativeness” — the propensity to experience sexual love and desire. (Scientists are still figuring out everything the cerebellum does. But some of its main functions are balance, and coordinating sensory input with muscular output.)⁹

In women, “irritation of the cerebellum” was a cause of Nymphomania. Combe related a case of a “very intelligent lady” who had strong sexual urges. The poor woman said, “I am an object of disgust to myself, and feel that I can no longer escape either madness or death.”

Her doctor was a phrenologist. He felt her skull and “drew her attention to the enormous development of the organ [i.e. the cerebellum].” His advice was “to return to the country, avoid all excitement, and apply leeches to the back of the head.” Unfortunately, Combe did not relate what happened to this very intelligent lady.

4. Intense study risked madness

Benjamin Rush published *Medical inquiries and observations, upon the diseases of the mind* in 1812.¹⁰ He believed that engaging in “intense study” and “protracted application to books” put people at risk of becoming insane.¹¹ Especially if they were “persons of weak intellects who were unable to comprehend the subjects of their studies.” Particular areas of study more frequently induced madness than others. These included “the means of discovering perpetual motion; of converting the base metals into gold; of prolonging life to antediluvian age; of

producing perfect order and happiness in morals and government, by the operations of human reason; and, lastly, researches into the meaning of certain prophesies in the Old and New Testaments.”

Lastly, if one is inclined to intellectual pursuits, it was important not to be a perfectionist about typos. Learn the lesson from “a clergyman in Maryland [who] became insane in consequence of having permitted some typographical errors to escape in a sermon which he published.”

5. Being rich was risky, as was living in England

Rush also believed that rich people were more predisposed to madness than poor people. This was partly because rich people were more sensitive, and partly because poor people were too busy with day-to-day drudgery. “Even when mental sensibility is the same in both those classes of people, the disease is prevented in the [poor], by the constant pressure of bodily suffering, from labour, cold, and hunger.”

Rush also reported that insanity “is a rare disease among savages” with not “a single instance among the uncivilized Indians in South America.” In fact, Rush heard that England had a higher incidence of insanity than many other countries. This was in part because “its inhabitants [preferred] tragedy to comedy, in their stage entertainments.”

It was not only watching tragic plays that increased the risk of madness. Other forms of art were also thought to be risky. Amariah Brigham published *Remarks on the influence of mental cultivation and mental excitement upon health* in 1833.¹² He wrote that although “mental excitement may not often produce insanity during childhood, it may predispose a person to this disease.” He gave the example of “a child of ten years of age, whom the assiduous reading of romances rendered insane.”

6. Spinning patients around cured their diseased minds

In his 1806 book, *Practical observations on insanity*,¹³ Joseph Mason Cox described a treatment for insane patients: Suspend a chair from a hook in the ceiling, strap a strait-jacketed patient into the chair, and spin the chair. “As vomiting has been long esteemed among the most successful remedies in madness, if the swing produced only this effect, its properties would be valuable.” But he noted that it did more than just cause vomiting. Because patients hated the treatment so

much, “the physician will often only have to threaten its employment to secure compliance with his wishes.”

For one 25 year old woman, he prescribed the “circulating swing” every other day for ten minutes. But, alas, at first she liked the motion and “no effect was produced.” So he had to ramp it up, repeating the spinning daily for fifteen minutes “with gradually increased velocity” so she experienced “considerable nausea, pallor, and exhaustion.” By this point, “she dreaded its repetition.” But the hardworking doctor nevertheless persisted with the treatment, and after a few minutes, she threw up every time. Success!

7. Insanity due to over-excitement was best treated by cooling the brain

Sir William Charles Ellis published *A treatise on the nature, symptoms, causes, and treatment of insanity* in 1838.¹⁴ He explained that, sometimes, insanity is due to over-excitement of the brain. (Things like poverty, grief, “mortified pride, disappointed love, jealousy” cause over-excitement.) The cure for insanity due to over-excitement was to “diminish the circulation” of blood in the brain. How, pray tell? First, “the head should be shaved, and the parts of the scalp, under which it is probable the excess of circulation is taking place, should be repeatedly bled with leeches.”

Once the bleeding had “relieved the vessels of the brain, the head ought to be kept cool by ice... Every public institution for the cure of the insane ought to be provided with an ice-house. The ice is most conveniently applied by powdering it tolerably small, and then putting it into a cap made of water-proof cotton.” When no ice was available, “cold water, or weak vinegar and water, may be substituted for it; but cold applications of some kind on the shaven scalp ought to be most strenuously persevered in, until the head becomes cool.”

8. Mania in menopausal women was prevented by leeches on the cervix

Dr. W. Tyler Smith in the *London Journal of Medicine* in 1849¹⁵ explained how to treat menopause “cerebral symptoms” (headaches, depression etc.): Bloodletting. The goal was to prevent “mania” — a type of insanity — in menopausal women. The blood could be drawn from the cervix and the doctor helpfully recommended the use of a gum-lancet for this purpose. But if more blood is required, “three or four leeches should be applied, by the aid of the speculum” to the cervix. In addition, it was important to apply cold. Ways to do this included cold baths or

showers, “cold water injections into the rectum, the injection of cold water, or iced water, or the introduction of small pieces of ice into the vagina.”

If a female asylum patient objected to her treatment, there was a good chance she’d be restrained. In *The Woman They Could Not Silence*, Kate Moore reports that chloroform and ether were considered particularly effective to quieten “boisterous” women, “not only temporarily but permanently.” And, although many asylum superintendents thought restraints — such as straitjackets — were rarely necessary to use on men, it was “standard for disobedient women to be constrained.”¹⁶

9. Masturbation turned women insane and the cure was clitorectomy

Dr. Isaac Baker Brown was an English gynecologist and obstetrical surgeon. He was puzzled by certain cases of hysteria in women, until he realized they were caused by “peripheral excitement of the pudic nerve.” That is, masturbation by stimulation of the clitoris. The cure: “removing the cause of excitement.” That is, he cut off the clitoris.

In his 1866 book, *On the curability of certain forms of insanity, epilepsy, catalepsy, and hysteria in females*,¹⁷ he proudly announced that he had “repeated the operation again and again” with great success. He also dabbled with removal of the ovaries to cure women’s insanity. His 1873 obituary in the *British Medical Journal*¹⁸ states that after his first three patients had died from his attempts at ovariectomy, he “had the courage” to perform his fourth procedure on his own sister. (She survived.)

10. And lastly...

Benjamin Rush reported that “Infidelity and atheism are frequent causes of [madness] in christian countries.” And he also mentioned a case of embarrassment causing insanity “in a school-master, who was accidentally discovered upon a close-stool by one of his scholars.” In case you haven’t guessed, a close-stool was a toilet.¹⁹

¹ For example, Roberts, Albert R. and Kurtz, Linda Farms (1987) “Historical Perspectives on the Care and Treatment of the Mentally Ill,” *The Journal of Sociology & Social Welfare*: Vol. 14: Iss. 4, Article 5. <https://doi.org/10.15453/0191-5096.1832>

² Kate Moore's book at her website: <https://www.kate-moore.com/the-woman-they-could-not-silence>

³ Roberts, Albert R. and Kurtz, Linda Farms (1987) "Historical Perspectives on the Care and Treatment of the Mentally Ill," *The Journal of Sociology & Social Welfare*: Vol. 14: Iss. 4, Article 5. <https://doi.org/10.15453/0191-5096.1832>

⁴ "Asylum tourism" by Jennifer L. Bazar and Jeremy T. Burnam on the American Psychological Association's website: <https://www.apa.org/monitor/2014/02/asylum-tourism>

⁵ *Englishman's illustrated guide book to the United States and Canada* at the Internet Archive: <https://archive.org/details/englishmansillu00englgoog>

⁶ Kate Moore's book at her website:

<https://www.kate-moore.com/the-woman-they-could-not-silence>

⁷ For example, Greenblatt, Samuel H. M.D.. Phrenology in the Science and Culture of the 19th Century. *Neurosurgery* 37(4):p 790-805, October 1995.
https://journals.lww.com/neurosurgery/abstract/1995/10000/phrenology_in_the_science_and_culture_of_the_19th.25.aspx

⁸ *Observations on mental derangement; being an application of the principles of phrenology to the elucidation of the causes, symptoms, nature, and treatment of insanity* at the Internet Archive: <https://archive.org/details/observationsonme00comb>

⁹ For example, Cognitive-Affective Functions of the Cerebellum, Stephanie Rudolph et. al. *Journal of Neuroscience* 8 November 2023, 43 (45) 7554-7564.
<https://doi.org/10.1523/JNEUROSCI.1451-23.2023>

¹⁰ *Medical inquiries and observations, upon the diseases of the mind* at the Internet Archive: <https://archive.org/details/medicalinquiries1812rush>

¹¹ *Medical inquiries and observations, upon the diseases of the mind* at the Internet Archive: <https://archive.org/details/medicalinquiries1812rush>

¹² *Remarks on the influence of mental cultivation and mental excitement upon health* at the Internet Archive: <https://archive.org/details/remarksoninflue00briggooog>

¹³ *Practical observations on insanity* at the Internet Archive:
https://archive.org/details/BIUSante_36593

¹⁴ *A treatise on the nature, symptoms, causes, and treatment of insanity* at the Internet Archive: <https://archive.org/details/b21445047>

¹⁵ W. Tyler Moore's article, "The Climacteric Disease in Women; A Paroxysmal Affection Occurring at the Decline of the Catamenia" in the *London Journal of Medicine*:
<https://www.jstor.org/stable/25493754>

¹⁶ Kate Moore's book at her website:

<https://www.kate-moore.com/the-woman-they-could-not-silence>

¹⁷ *On the curability of certain forms of insanity, epilepsy, catalepsy, and hysteria in females* at the Internet Archive: <https://archive.org/details/b21783160>

¹⁸ Isaac Baker Brown's obituary in the *British Medical Journal*:
<https://www.bmj.com/content/1/632/158.2>

¹⁹ *Medical inquiries and observations, upon the diseases of the mind* at the Internet Archive: <https://archive.org/details/medicalinquiries1812rush>