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AN HYPOTHESIS CONCERNING THE RELATIONSHIP BETWEEN BODY AND MIND.

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PART II.

The most important aspect of the hypothesis is perhaps its application to the diagnosis and treatment of mental disease. Unless there emerges the pragmatic importance which attaches to a theory which works, it has little value for those of us who are seeking to give affirmative answer to the question: "Physician, canst thou not minister to a mind diseased?"

In the approach to the subject of mental disease, it is of cardinal importance that we should be clear whether or not there is such a thing as mental disease of purely mental origin. Even this subject is still in debate among practising specialists in mental disease. It is almost axiomatic in the thought of many medical men that where mental disease is, there necessarily abnormality of brain cells must be, and be in a causal relation to the disease. This opinion is confirmed by an argument which (on critical examination) is found to run thus: Serious disease of the brain causes mental disease; mental disease previously thought to be without organic basis has been shown, with refinements in methods of examination of the brain, to have organic basis; therefore all mental disease must have causal organic basis. The inference is clearly unwarranted in logic and is also, I believe, not in accordance with the facts.

The readiness with which physical malady is assumed to be the cause of mental aberration is well illustrated by an amusing incident in my personal experience. One of the major hardships which I have suffered from my life in Korea has been that, for a while, I had the responsibility for keeping the hospital books; and I cannot do arithmetic. I am enough of a Freudian to entertain the suggestion that the reason why I cannot do arithmetic is that I don't want to do arithmetic and don't want to keep hospital books. Be that as it may, I have suffered much, for each addition of a column of figures provides the novelty of a new result. I was struggling one evening with my task, when a friendly visitor in the home came forward with a generous offer of assistance. The offer

was promptly accepted. We worked for a while; then came a kind and solicitous enquiry: "Have you a headache to-night?" But I had no headache nor other brain or bodily disease.

No, we cannot argue from mental confusion to brain poisoning or even brain cell deficiency as a cause of the confusion. Psychic results often have psychic causes, and psychic causes only. Mental abnormality may arise from abnormality of psychism, and a strong confirmation of this fact is the other fact that grave disease of mental function is constantly being cured by direct appeal to the psyche.

If there be such a thing as disease of psychic origin, it is, next, of enormous importance to differentiate between physical and psychic factors, as a cause of symptoms; also to recognize how far and in what manner either has contributed in a particular case. Unless these elementary necessities are regarded in diagnosis, we shall inevitably fall into grievous errors in treatment.

I offer a simple classification of mental abnormality, on the basis of causation. I divide the assaults to which the human spirit is exposed into (a) the indirect and (b) the direct. The indirect class is due to injury to, or poisoning of, the brain; the direct class is psychical, and affects the mind, usually through the emotions and the will.

It is a fact that has seemed to some so incongruous as almost to be incredible that the mind of man ("in apprehension how like a god") is not merely dependent upon, but actually may be changed by, physical injury to the brain. Yet it is not too much to say that the physics and chemistry of the body—more particularly of the brain—are part and parcel of the personality. The man who is dealing solely with ideas and philosophies may almost overlook this fact, but we medical men are constantly being reminded that injury to the brain, or abnormality of the chemistry of the blood, brings about the subtlest and the gravest changes in the mind. The suggestion has been advanced—and it merits investigation—that a considerable proportion of the divorce suits in America involve women whose temper and disposition have become abnormal as the result of thyroid gland dysfunction and the deficiency of iodine which is part of such thyroid disease. Iodine is not a specific against divorce, but the connection between physical and mental ill is far closer than is sometimes recognized, even by those of us who are medically trained. Nor is there essential incongruity in the connection.

In an important article in *The British Medical Journal*, June, 1927, Professor Haldane re-emphasizes his contention

that, in considering the nature of disease, we must commence with a conception which transcends mere physics and chemistry. A new category is necessary—Life. For the living organism there exists that which we characterize as health, or the normal. This normal the organism, by its self-determining activity, continuously seeks to maintain; to this normal it seeks to return when injury or poisoning has caused a departure therefrom. The environment must be such that the organism may selectively take to itself out of the whole environment the due proportions in mass and volume of those elements which shall make up the normal constitution of the organism and shall maintain its normal function. Organism and environment are then related, related as the Greek philosophers might say, in accordance with "reason." But there occur circumstances in which, on account of violence or poisoning, the environment becomes inimical to the organism. Structure is damaged and function disturbed. No longer can the organism establish harmony for itself out of the chaos of its environment. At such times, the relation of environment and organism is no longer according to reason. The world has become, for that organism, as we anthropomorphically, but I think properly, say, a senseless world.

What is true of the health and function of the lower organism is true also of the physiology of man. A man sustains a brain injury from a bursting enemy shell; intellect is clouded, personality is warped. Why? Because human personality is compacted of mind and body and as such requires a "reasonable" physical environment. A bursting enemy shell, contrived of human hate, is not a reasonable environment. Such facts exist; they are irrational facts. They are not irrational facts, if viewed as part of a merely physical order; for exploding shells continue to obey the laws of physics and chemistry however precious those persons may be whom the explosion injures. They are not irrational facts either, perchance, in the perspective of "that far off divine event to which the whole creation moves." Yet in a very real and practical sense they are irrational.

While the evidence for an indirect attack upon the human personality is overwhelming, there is a great deal of loose thinking and inadequate statement about the nature of symptoms which supervene as a result of poisoning and injury to the brain. One quasi-scientific statement, often made, is that after injury and poisoning the latest acquired characteristics are the first to disappear. Further, under the influence of uncritical evolutionary thought, credence is given to the

dictum that with deterioration of brain cells there emerge from the subconscious depths of human nature the ape, the tiger (or perhaps the donkey), of man's family tree. We are told, further, that the mentality of the child bears witness to the truth of such ideas; and the followers of Freud have advanced theories meriting the designation, "fantastic," in support of their views. An able English neurologist writing on the subject, "The Nervous Child," has said that such Freudian writers would demonstrate more of the scientific spirit if, instead of reconstructing the child mind from theories based upon abnormal adult mentality, they repaired to the nursery and the kindergarten and acquainted themselves there with children.

Medical literature has failed to furnish discriminating description of what follows after deterioration of brain cells. For instance, the classical description of the irritability appearing after concussion of the brain is that the patient lies curled up in bed, resents being disturbed and resists attention, perhaps with profanity. I have already referred to the striking psychological study, by Sir Frederick Mott, of early changes in general paralysis of the insane. But one factor of first class importance seems to have been overlooked. No reference is made to the previous character and training of the individual affected. How far do identical injuries manifest themselves by widely different symptoms, such difference depending on differences in previous character and training? My experience leads me to believe that such differences are profound.

I contrast, for instance, the horrors of the *delirium tremens*, which often complicates pneumonia in the type of case one sees in the refractory ward of a metropolitan hospital, with the delirium of another pneumonia case which I was called upon to treat. The patient had spent the first half of his adult life as a builder of church and state in a cannibal island in the South Seas, and the latter half of it in ministering to the outcast lepers in Korea. The pneumonia toxin in the two types of cases was similar. The resultant delirium was profoundly different. In the second case the delirium was a pæan of triumph and gratitude and praise.

I knew a man who had devoted a life of strenuous service to the Christian ministry in an industrial suburb. He was smitten with a chronic degenerative disease of the nervous system. Gradually he was deprived of his faculties. I was with him the night he died. The mutterings of his last hours bore testimony to a spirit moving in realms of idealism loftier than those to which most men ever attain.

Although this subject has received too scant attention, from medical observers, it has been dealt with by some of the masters of literature, among them John Bunyan. His treatment of it serves to give point to the old medical adage: "Experience is difficult, judgment is fallacious." For instance, when Christian is passing through the valley of the shadow of death, "one of the wicked ones got behind him and whisperingly suggested many grievous blasphemies to him which he verily believed proceeded from his own mind." Again, when he passes through the river, "he had horror of mind and was troubled with apparitions of hobgoblins and evil spirits." At the same time Christian's companion, Hopeful, was little distressed; moreover, such feeble pilgrims as Mr. Despondency and Mr. Ready-to-Halt pass over the river triumphantly. Nor is this all, for one, Mr. Ignorance, who is no pilgrim at all, passes over "and that without half the difficulty of Christian and Hopeful."

As a partial explanation of these apparent inconsistencies in the production of symptoms, I advance this suggestion: Physical injury acts in the production of symptoms in two ways: it serves either (i) as an amplifier, or (ii) as a muffler of qualities already in the personality. By this twofold process of exaggerating some attributes and diminishing others, there is brought about a distortion from the normal, but there is not imported anything new into the personality. From two of the cases I have quoted, there appears evidence that it may be possible to build a personality so firmly and rightly integrated that no assault or poisoning of brain cell can mar its highest and most essential quality, that which is central in the personality. With degeneration of the brain tissue consciousness at length disappears, but its passing from our vision may be likened to the triumph of the gallant admiral whose vessel sinks but with flag flying.

The second division of mental disease I have characterized as arising from a direct attack upon the human spirit. Life and literature both attest such causation of mental disease. The wisdom of Shakespeare puts into the mouth of the physician attending Lady Macbeth these words:

Un-natural deeds do breed un-natural troubles:
Infected minds to their deaf pillows will discharge their secrets.
More she needs the divine than the physician.

Many of the important causes of this direct attack are enumerated by the English Church litany when it says:

From all blindness of heart, from vainglory and hypocrisy; from envy, hatred and malice and all uncharitableness; from fornication and all other deadly sin and from all the deceits of the world, the flesh and the devil, Good Lord, deliver us.

These things in the environment in which we live, and especially when taken into the life, are capable of producing devastating effects on the susceptible mentality. It deserves, I think, to be noted that an unsuitable environment may have a determining influence in bringing about mental disease. An eminent authority in proposing a definition of insanity suggests the formula: "A person is insane when he *cannot* think the thoughts, feel the feelings, and do the deeds of the society to which he belongs." I have a fundamental criticism to offer of the definition. It accepts, as the norm, existing standards of society, and tacitly demands conformity thereto on pain of ostracism from reason. It may well be that the individual is sane, and that it is the society about him which is deluded and perverted from right conduct. The case of Socrates and others suggest themselves. Further, the responsibility for the insanity of the individual lies very often at the door of society. For instance, a certain savage African tribe is said to be so held by its superstitions that it is demanded that the first girl baby of a family be put to death. It is not difficult to imagine a young mother torn to mental derangement between a mother's tender regard for her offspring and her fears concerning the tribal superstitions. Nor does one need to go to savage Africa to discover all the elements of disintegrating dilemmas. Neither money nor power satisfies the human soul, yet these are the molochs to which society and the nations have time and time again paid homage, demanding meanwhile that every individual should so worship.

In the Prayer Book list one notes the phrase "from fornication and all other deadly sin." In view of the emphasis that Freud has put on sex as producing mental disease this phrase is interesting. Freud is right in attaching importance to sex, but it would seem to me the Prayer Book is more right in that it recognizes sex and sex perversion in a perspective which includes other, and perhaps subtler, assaults on the human spirit.

The question arises: If such factors as these are causative in mental disease, how comes it that good people become mentally deranged? To that question I would answer first, and in the words of Christ: "There is none good but one." I would hasten to add, again in His words: "They on whom the tower of Siloam fell were not sinners above others in Jerusalem."

There is another aspect of the problem which deserves to be noted; and I write here **from experience** and from an intimate knowledge of the stresses through which some have passed. Our minds are finite; weak vessels of flesh and blood

contain them; but a "spark disturbs the clod." The demands of the moral imperative and the infinite requirements of holiness pursue men. Little wonder that the human personality, wrestling with issues such as these—for there are those who face these issues—is shaken to its depths, and that sometimes mental derangement results.

The distinction which I have drawn between the physical and the psychic origin of mental disease calls for a like differentiation in the treatment to be adopted. Inasmuch as cause and effect, physical and psychic, are so intimately inter-related, the problem of treatment in a particular case becomes a nice one. It is therefore all the more important that our distinctions be definite, and especially that there be recognition of what are legitimate expectations in treatment. What may we look for from physical treatment, and what from psychic? There is much confusion of thought, nor is the confusion confined to Christian Scientists and militant materialists.

The goal of physical treatment is, I believe, a healthy body, all that, and nothing more. For my part, I discern only one boundary to mark the confines of man's control over the organic world. Some day, and through advance of medical and allied science, we have the right to expect that man will have the power regularly to restore an organ—be it brain or other organ—to physiological structure and function. Through science, so much and no more. We do not attain through science, nor ever shall, to an integrated personality. The only method which holds out any legitimate promise of a healthy mind and integrated character is the old method which concerns itself with the impact of true ideas and high ideals upon the personality, and with the free will which accepts these dynamic forces into the life.

There are certain diseases for which, even in the present stage of medical knowledge, specific treatment is available. For instance, the specific treatment of a broken leg is rest of the damaged limb with the fragments in apposition. The specific treatment for diphtheria is antitoxin. The specific treatment for the psychoses is, I believe, psychic treatment. In conjunction with specific treatment it may be advisable, in some cases necessary, to use adjuvant treatment. For instance, chronic ill-health from poisoning might delay the union of a fracture, and the removal of the cause of poison might expedite recovery. Septic foci at the roots of the teeth are a common cause of poisoning, but no man in his senses would propose to treat broken legs solely by a routine pulling of teeth. Some forms of treatment advocated and applied in the psychoses and

the psycho-neuroses have about as much warrant in reason, or justification in experience, as such dental extractions would have.

In mental disease, as in other disease, the patient must be given the best possible environment, and all proper means taken to promote general health and well-being. But most important of all, specific treatment for the disease should be given, and the specific treatment is psychic, or, as I prefer to call it, spiritual.

My point here is well illustrated by the remark once made to me by an asylum medical officer. We were in the refractory ward. "When Nurse X is on duty," he said, "this ward is like a Sunday school." Now, assuredly, it was no corporeal force or influence from Nurse X which made the ward "like a Sunday school."

Under the term spiritual treatment, I would include an elucidation and interpretation of the psychic history of the patient, a sympathetic understanding of his difficulties, and encouragement and direction in facing and overcoming these difficulties. Often this will involve a reorientation of the patient to his fears and scruples and to his present total environment, both the actual environment and that projected by the patient's imagination. More, a reorientation with the present is often impossible till the patient is delivered from the past. Sometimes that deliverance can come only in terms of forgiveness. We are neglecting the wisdom of proverbial knowledge if we do not recognize that "conscience makes cowards of us all," and we neglect one of the experimentally ascertained results of physiology if we do not bear in mind that fear actually breaks down nerve cell tissue (Nissl's granules). Conscience and fear must be treated.

Recently I saw a middle-aged man suffering from an obvious neurosis. There were physical symptoms, but the whole aspect of the case proclaimed its psychic origin. The man had already had psychic treatment, and something, I judged, of the nature of psycho-analysis. As a matter of fact, the methods of Freud were as unnecessary in diagnosis as they would have been useless in treatment. As soon as the man's confidence had been gained, his story came out. He was a widower; in his loneliness and depression he had been suddenly tempted and had fallen into adultery. He added that thereafter he had "cried all night" and that "his conscience had been troubling him ever since." It appears to me obvious that a satisfactory reorientation for such a man can come only in terms of forgiveness and new hope. At the same time, it must be carefully borne in mind that self-accusation

is by no means necessarily true accusation. The treatment for false self-accusation is not assurance of forgiveness, but deliverance from morbid self-depreciation and condemnation and reinstatement in merited self-respect.

In my practice in Korea, I find that the factors of major importance in the ætiology of the psycho-neuroses have reference to sex, to marriage, and the family, and to money and means of livelihood. In that civilization, as in our own, there exist, and are prevalent, gravest errors in judgment and failures in conduct relating to these subjects. In offering to my patients solutions for these and other difficulties inherent in the art of living, I make constant use of the words of Jesus. His teachings about sex, money, the family, fear, economics and the other problems which constantly appear and reappear in a psycho-neurological clinic, are strangely apposite, constructive and vital.

In the cases of definite psychosis, the patient is, of course, far less accessible to counsel and encouragement than in the psycho-neuroses, though even in the psychoses there is far more possibility of helpfulness through these methods than is commonly recognized. Even in cases where the patient is not accessible to what one might term the "psychological" method of approach, our therapeutic resources are not, I surmise, exhausted.

The New Testament contains a number of narratives of persons there described as "possessed of evil spirits," and describes their cure. The symptoms which these patients exhibit are not dissimilar from those of patients suffering from mania and other present-day types of insanity. The New Testament description of the symptoms is convincing, but the language raises difficulties. The term "spirit possession" suggests, to the mind of the civilization in which I live, the gross superstitions of the Orient about devils; or, to the mind of Western countries, associated perhaps with the strongly materialistic trend of our thought, it suggests half-defined ideas of some corporeal personality invading the body of the victim. These ideas are properly rejected, and they are not the ideas of the New Testament. It is instructive to note that the modern alienist, with his terms such as "compulsion" and "obsessions," describes the phenomena of his experience in language very similar to that of the New Testament. Indeed, what other terms can be used to describe, for instance, the case of a decorous person who became alienated from his proper habit and driven to obscene word and perverted action.

More especially in latter years I have been influenced in my treatment of the psychosis by the following consideration: The writers of the Gospel narrative had evidently come to believe that the One of whom they wrote, exercised an almost easy mastery over disease and even over the forces of Nature. Whether or not they had good evidence for that belief, I am not here concerned to discuss. My concern is this. Those same writers represent Christ as teaching that the cure of some forms of "those possessed with spirits" presents special difficulties. After the disciples had failed to cure the "boy possessed with an evil spirit" (a case, I take it, from the detailed description of the symptoms and their course, of long-standing epileptic dementia), Christ is reported to have said: "This sort cometh not forth but by prayer and fasting."

As Professor Hogg, of Madras, has pointed out, the inference is that while other sorts of disease may be controlled by other methods (including physical and chemical agents), this sort is to be cast out only by prayer and by prayer which costs. Obviously, there is no moral value associated with a prayer unless already the whole of the material and psychological resources of the physician praying for his patient have been offered in the treatment of a case. If these and the other spiritual requirements of prayer are complied with, there is, my experience leads me to think, evidence that prayer is a constructive and creative force. Telepathy may offer an analogy and a partial explanation to those who, without such analogy, find it an idea incredible that prayer should effect results and results not otherwise attainable in this difficult field of medical endeavour.

The hypothesis, then, which I advance concerning the relation between body and mind may be summed up thus:

The hypothesis takes cognizance of the facts of physiology and neurology. It accepts and reckons with these facts; at the same time, it resists the mechanistic inferences of a materialistic philosophy. The hypothesis relates itself to the arresting conclusions which the insight of modern mathematical physics has attained; at the same time, it is illumined by the genius and inspiration alike of Hebrew and Hellenic thought. It is a form of dualism, but is not content to leave matter and mind in two unrelated universes. It sees inorganic matter as thought that has taken form; the organic world it envisages as thought taking living form. In the human being, crown of a biological process in which the *élan vital* of creative evolution has given birth at last to man, it perceives an organism fashioned by the same forces that have

brought into being the animal world; it sees in him, also, a person, in whom in a way unique in Nature, conscious and self-conscious thought is enshrining itself in living form. The body is the instrument by, through and in which we, who are spirit, perceive meaning, hold memory, and achieve purpose. It may be pointed out that the analogy sometimes used concerning the relation between body and mind—that of a player and his instrument—fails to give proper recognition to the intimacy of the relationship which does in fact exist. Rather it may be said that *we* are the music of our personality, body and mind. The Greeks were not wrong when they listened for the “music of the spheres.” Of that greater music we also are a part. In that music, body and mind are related. We are living thoughts thinking thought. The *logos* has become flesh. The cosmos is intelligible.
