

### ■ Gelebte Hysterie

*Karen Nolte, Gelebte Hysterie. Erfahrung, Eigensinn und psychiatrische Diskurse im Anstaltsalltag um 1900, Frankfurt a.M./New York (Campus) 2003, 351 S., 39,90 Euro.*

This dissertation on hysteria is a social history that places the experiences of ordinary female »hysterics« and asylum patients at the center of its analysis. Using a sampling of the patient files from the Landesheilanstalt Marburg between 1876 and 1918, it examines the discourse and practices of psychiatrists and the asylum, as well as patients' subjective perceptions of illness. The Alltag of the asylum, it argues, is best understood not in terms of a simple repression model, but as an ongoing dialogue between patient and psychiatrist. Using Alf Lüdtke's notion of »Eigensinn,« Nolte shows the way female patients and their relatives assimilated, reinterpreted, and resisted medical discourse on nervous illnesses. Thus,

she concludes, while the concept of hysteria was used to control deviant women and reinforce the patriarchal order, hysterics also appropriated it for their own ends.

At Marburg, »nervous illness« reinforced gender inequalities and stereotypes. This can be seen, for example, in the tendency of doctors to diagnose selbstbewusste and eigensinnige women with hysteria, irrespective of whether these patients displayed hysteria's classic physical symptoms. The widespread notion of an innate female nervousness and physical weakness could also be used against women workers seeking sickness compensation. The public discussion about workers' compensation and »Rentenneurose« associated certain jobs in new, technologically advanced areas of the economy (e.g., telegraph, telephone, and Eisenbahn) with high levels of nervous illness. Yet, emotionally injured Telegraphengehilfinnen could be denied pensions on the basis of medical reports that labeled them hysterics and argued for the in-born (hence, not job-induced) nervousness of women, especially the (klein)bürgerliche women who predominated in the jobs of Telegraphengehilfinnen.

At the same time, Nolte is careful to emphasize the fluidity and complexity of contemporary medical discourse among both doctors and patients. That fluidity involved doctors and patients in a kind of dialogue of mutual influences, a phenomenon that challenges an older historiography that had treated as separate and dichotomous patients and popular culture, on the one hand, and elite academic medicine, on the other. Nolte found cases, for example, where Marburg psychiatrists rejected the hysteria diagnosis of Telegraphengehilfinnen, supporting instead their patients' assertions about the occupational origins of their nervous complaints. The daily practice of psychiatrists, in general, often diverged from medical theory, incorporating the views of patients and their relatives, as well as an eclectic mixture of ideas that included older notions of hysteria as an illness of the uterus.

Female »hysterics,« in turn, held complex attitudes toward medical doctors, theories, and institutions. Some consciously appropriated and manipulated the discourse of hysteria for their own ends. Such was the case, for example, with women facing criminal theft charges, who utilized a medical discourse on hysteria and kleptomania to argue their way out of prison sentences. Other patients internalized medical discourse, e.g., the idea that reading popular novels can cause hysteria, a notion that was part of the broader late 19th-century crusade against »Schund und Schmutz« literature. Similarly, women patients shared with their doctors a language that, dating back to antiquity, associated hysteria with sexuality. But, while Marburg's doctors focused on the problem of women's »frigidity,« their patients placed the blame on their husbands' sexual inadequacies.

*Gelebte Hysterie* covers extensive thematic ground. A first chapter on historiography and methods discusses the literature on the history of hysteria, the body, gender, and a range of theories, from Foucault to Lüdtke, on institutions and power relations. Chapter two surveys the history and administrative organization of the Marburg asylum. Around the themes of privacy and its invasion by the asylum, chapter 3 probes the daily experiences and reactions of patients, showing how they both assimilated into and resisted the asylum order. Chapter 4 examines the effects on patient-doctor relationships of the »antipsychiatry movement« at the turn of the century, a phenomenon generated by a series of high-profile asylum abuse scandals. Chapters 5 and 6 concentrate on the ways in which a broader medical discourse on hysteria and neurasthenia was implemented and modified by Marburg's doctors as they (differentially) observed and treated their female and male patients. Chapter 7 centers on a case study of the writer and »neurasthenic« Marburg patient Sophie Jung-hans. Nolte analyzes her published literary writings, which allow an indirect window onto nervous illness from the patient's point of view. Chapters 7 to 9 deal, respectively,

with the themes of nervous illness and reading; sexuality and hysteria; and »Schwindel, Lüge, Tabu,« meaning the widespread turn-of-the-century idea that hysterics are liars, intriguers, and manipulators. A short concluding chapter summarizes Nolte's approach and findings.

The book's broad conclusions will not be new to readers familiar with the hysteria literature. Its methodology, which follows the lines of a burgeoning scholarship on the daily practices of asylums and the history of illness from the patient's point of view, is also not new. Yet, the book's close attention to the lived experiences of illness, as well as its nuanced discussions of patient-doctor-relative relationships, makes it a valuable and welcome contribution to the history of psychiatry and gender. It offers sensitive discussions of patient case histories and the social complexities of medical praxis. The book is less strong, however, on historical contextualization. Conspicuously absent is any discussion of the Marburg and surrounding Hessian communities from which the patients came. Yet this context is crucial for making historical sense of the reactions and modes of thought of individual patients and their families to illness and the asylum. Moreover, while *Gelebte Hysterie* abundantly addresses the theoretical literature – Foucault, Goffman, Butler, etc. –, it does not engage the empirical scholarship on the history of asylum practices and patient experiences in Germany and elsewhere (although most of this literature is cited in the bibliography). Nolte thus misses an important opportunity for analyzing her findings in comparative perspective and for offering new historiographical interpretations.

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