

## Hippocrates Betrayed? Attributing Classifications to Patients Instead of Investigating their Histories (Anamnesis)

Vitor Pordeus<sup>1,2\*</sup>

<sup>1</sup>*Théâtre DyoNises, Montréal, Québec, Canada*

<sup>2</sup>*Universidade Popular de Arte e Ciência, Rio de Janeiro, Brazil*

**\*Corresponding Author:** Vitor Pordeus, Théâtre DyoNises, Montréal, Québec, Canada and Universidade Popular de Arte e Ciência, Rio de Janeiro, Brazil.

**Received:** February 06, 2018; **Published:** March 26, 2018

### Abstract

Something is rotten in the kingdom of healthcare. Due to the ‘dreams of reason’ in our current scientific and technological phase of development, we have finally confused the ‘machine’ for the ‘mechanism’. The immense theoretical and technical advances celebrated by science are being followed by a pandemic increase in mental diseases, overdoses, violence, wars, genocides, excessive economic exploitation and destruction of communities, destruction of animals and plants in an unnecessary and pathological way. The pharmaceutical system is appointed as the main solution, however its exorbitant profits plus a ‘drug culture’ seems to be implicated in the causation of a good part of contemporary public and community health challenges, the so-called socio-economic determinants of health. This “Promethean” or “Faustian” mental/cultural syndrome/behavior is known to our traditions for generations, as described by Goethe in the 19<sup>th</sup> century, but never at such a planetary scale. Here, I bring into light some proposals and concepts constructed first in my own medical and scientific practice in the last 20 years, influenced by and in reference to different authors in contemporary and historical science, showing that this problem has been identified and overcome before by Pille Bunnell and Humberto Maturana, passing through Spinoza, Freud and back to Hippocrates. We hope this may bring some reflection on the social mission and ethical compromises of the medical profession in responding to the community mental health crisis we have gotten into.

**Keywords:** Hippocrates; Diagnosis; Classification; History; Nosology; Biology; Sigmund Freud; Carl Jung; Baruch Spinoza; Evolution; Development; Cognition; René Dubos; Faust; Johann Wolfgang Von Goethe; Ethics

The phenomenon is not detached from the observer, but intertwined and involved with him—Goethe [1].

### Introduction

In an exceptional article entitled “Attributing nature with justifications” published in 2000, the Canadian scientist Pille Bunnell has provided inspirational insight regarding the actual state of affairs in international medicine and public health policies:

“I claim that concepts such as competition, evolution of the fittest, and regulation through hierarchical constructs are all attributions we make to nature based on our culture. I think these concepts, and others of the ilk, are the results of a particular manner of emotioning, sensing and acting that is now common to most modern cultures. Once attributed to nature, we use these concepts as grounding premises, or as justification, to continue the manner of emotioning, sensing and acting which gave rise to them. I see this as a disquieting circularity, a blindness, that results in a way of being that we do not want, feel compelled to. However, since we have the ability to reflect on our beliefs and to consider whether we want the consequences of maintaining them, I also see the possibility of living in a manner that we find more ethical and more pleasurable” [2].

This observation that we as human beings have the power to ascribe names and qualities to nature inside and outside ourselves may be of capital importance to understand better medical and scientific professions and the unconscious dangers of exerting the “power of naming” inadequately. That’s exactly the same insight advanced by visionary authors as early as 1677, when Benedict de Spinoza published his famous book ‘Ethics’: “Many errors, in truth, can be traced to this head, namely, that we do not apply names to things rightly”. Spinoza B, Ethics, 1677, part 2, Prop. 47 [3].

It has been noted that Spinoza, in the beginnings of modern science, has warned us of the dangers of attributing justifications to nature, objectives, functions, that are actually psychic projections, constructs of our imagination, used to justify lower impulses of the psyche such as desire for power and control. So we must observe who we are as observers in the task of describing nature inside and outside us, and provide the important care of not imposing tags, disease classifications, nosology upon nature, upon other people and specially upon our patients who are already in a vulnerable and regressive psychological position imposed by the pathological situation.

“We have now perceived, that all the explanations commonly given to nature are mere modes of imagining, and do not indicate the true nature of anything but only the constitution of imagination”. Spinoza, 1677, Ética, Part 1, appendix. Amsterdam, Holland [3].

### Medical diagnosis and nosological classification

Another important aspect in this subject is the confusion between diagnosis and nosology. Current medicine uses classifications of diseases (nosology) as if they were the diagnosis of the patient, giving him a tag and therapeutic procedures that all too often are drugs [4]. If we want to avoid prejudices and ill-conceived ideas in dealing with human beings, what are we effectively talking about when we want to understand what is “mental illness”? For instance, we may observe that the expression “mental illness” arises historically in the course of conversations about our human relational living, in an attempt to visualize some regularities that occurred in it, thinking that if we could grasp them we would be able to solve some difficulties that we encounter in our living together, thinking that we could do so through formalizing them with some adequate theory that we would invent [5]. In other words, when we ask about “mental diseases” - neurotic syndromes, psychotic syndromes - we are in fact asking about the difficulties we face in our relationships, in our living together.

And how often we fail to observe this living together, how often we are absent from our own presence, not feeling, not learning, not interested in the present reality, in the other, in ourselves and how are we behaving in relation to each other? Sometimes, too often, we are being brutes, arrogant, irrational, invasive, dominating by pure unconscious patriarchal impulses [6].

We must take a pause, and observe ourselves as observers [7], seeing that the way we understand/act on nature may be of radical importance on how medicine is being practiced as public health policies are being proposed and constructed, and how the life and death of whole communities are being managed by public and private institutions worldwide.

### Naming power

However, to do that, we have to abstract those regularities in our living together first: What are our basic living processes? Our health? Our physiology? Our group led by the Brazilian genius Nelson Vaz has been engaging in exactly the same debate in immunological theories with great success [8]. These questions have been advanced also by another leading contemporary immunologist, Irun Cohen have also been criticizing the inadequacies of current biological nomenclature and proposing new synthesis [9]. First of all, we must respect ourselves and accept that naming is not a trivial aspect of what we do in our living: names have arisen in our history of living together as operational elements of coordination of our doings, and reveal regularities in that living [10]. We must accept the immense power of naming, constructing theories, scientific theories, that generate practical advances and changes in life of people and communities. We must point towards the origins of origins, of how human beings evolved as languaging beings, in the last 3 million years along with the hominid mode of living [4].

### Freud and Jung, in general perspective, agree

In psychiatry and psychology this observation that we may be creating false categories regarding clinical manifestations, exaggerating in prejudices and ideological charges of racism, classism, white supremacy, even scientific nazism, that have occurred in exactly this context, seems to be the first steps of the founding fathers of the study of the unconscious like Sigmund Freud and Carl Jung:

“Psychiatry gives names to various conditions, but besides that, she does not say anything about them. On the other hand, she emphasizes that those carrying such symptoms are “degenerates”. It is not satisfactory, it is actually a judgment of value, a condemnation, instead of an explanation (Symptoms of symptoms)”. Sigmund Freud, 1916-17 [11].

After researching through an experience of 9 years of work in community and asylum psychiatry in Rio de Janeiro, Brazil and three years in Montreal-Canada, a key repetitive motif emerges as an answer to this situation we are all facing in the challenges of contemporary effective medical assistance and health promotion: the earlier history of the patient, anamnesis of his family, community and ecosystem. Or as published by Jung in 1908:

“The ancient clinicians concentrated their attention in the psychological motive of mental disease, just like lay people still do due to a true instinct. We tried through this way, most carefully, the earlier history of the patient. This is a rewarding work, for we frequently found, to our surprise, that mental disease erupts in a moment of great emotion aroused by, let’s say, normal reasons. Furthermore, in the origin of mental disease several symptoms appeared that could by any means be comprehended from an anatomical point of view. Nevertheless, these very same symptoms became immediately comprehensible when considered regarding the earlier individual history. In this sense, the fundamental investigations of Freud about the psychology of hysteria and of dreams gave us the greatest stimulus and support for our own work”. (Carl Jung, 1908) [12].

### Community histories, traumatic histories, subjective histories

This approach proved to be of most valuable impact when considering strategies of community mental health promotion, when deep unconscious subjective manifestations impose themselves in collective auto-destructive behaviors and must be considered side-by-side with ecological, community and family relationships which abundant scientific literature points to as important determinants of health and disease [13,14]. It will be at the community level, at the collective cultural level, that we may act in promoting community-related images of the unconscious [15], constructed collectively, inspiring more consciousness, self-care, care of the other, of the environment, and developing modes of living of cooperation and solidarity [14,15].

### Evolution by Natural Drift

This perspective belongs to wider movements in philosophy and biomedical sciences searching for more comprehensive views on the organisms and the ecosystems, this synthesis is known as “Origin of the Species by Means of Natural Drift” [16]. Where the first step is to recognize the “linguaging nature” of our existence, the power of naming, the role of the observer formulating theories and scientific systems that help us to glimpse, to dance with, and intervene with forces of nature inside and outside us [17].

“There’s no need to show at length, that nature has no particular goal in view, and that final causes are mere human figments”. Spinoza, 1677, *Ethica*, part 1, On God, Appendix [3].

### “There’s no health without mental health”

No field makes this contradiction so clear than social determinants of mental health. WHO published recently “there’s no health without mental health” [18], and no one anymore can pretend not to notice that something was left out in the model of the organism, which is precisely the human mind, its subjectivity, symbols, ideology and culture. There can be no mind without body as well as no body without mind, they are both expressions of the same general substance, as put by Spinoza [3].

Given the severity of public mental health emergencies we face in the poorest classes of virtually all big city and communities in the world, we believe that Hippocrates saying that “a severe disease demands a severe remedy” is the case. We here intend to exemplify concepts that point towards more ecological and historical approaches to biology and medicine and human health. Professor Michael Marmot named his last book “The Health Gap” showing that the lower in socio-economic position is located the individual, the worse morbidity rates of disease and death, and he has been devoting his life on research efforts to shed light onto this mystery of the relation of poverty and a genocide of preventable causes [19,20].

Robert Aldridge and colleagues found that socially excluded populations have a mortality rate that is nearly eight times higher than the average for men, and nearly 12 times higher for women published in *The Lancet* in November 2017 [21]. Still, in a highly cited paper published in 1997, we find a disturbing gradient between social exclusion and morbidity, including social violence and disorder usually treated by police and repression in our sick societies [22]. Dr. Susan Prescott published recently a review, based on the ecological visions and human biology of wise men no less than Jonas Salk, the discoverer of the polio vaccine, and René Dubos, microbiome early pioneer. She describes our historical period as the ‘anthropocene’ when unprecedented damages were committed against earth and to the community in a wider notion, community as ecosystem and biosphere. Upon a better understanding of our own nature, those authors see the beginning of another historical period, the sybiocene, when the so urgent biological sustainability will become a reality [14].

### Dr. Faustus against Hippocrates

“It is a distressing fact the Faustus legend is the only important one created by western civilization. The activities of the learned and dynamic Dr. Faustus symbolize our own restlessness and our eagerness to achieve mastery over men and the external world, irrespective of long-range consequences. Faustus was willing to sell his soul to the devil for the sake of worldly pleasures and his own selfish ambitions, just as modern Faustian man does not hesitate to jeopardize the future of mankind in the pursuit of his goal”. René Dubos, 1972 [23].

The Pulitzer-prize writer, human biology and microbiome pioneer researcher René Dubos gave us his diagnosis of a faustian society [23] that I believe to be the precise characteristic to exemplify the dangerous madness of our time, actually, this ambitious and greedy behaviour that has been generating systematic violence since the emergence of the patriarchal period in the last 5 thousand years [7]. Dr. Faustus is around the corner, inside us, with an exaggerated scientific reason and objectivity, believing he can control and dominate nature, the other, himself [24].

### “Greed is the cause”

Hippocrates wrote in his famous *Treatise on Laugh and Madness* that greed was the cause of human madness:

“Those whose ambition guides to the clouds, soon fall into the abyss and because of bad actions end up destroyed. After being ruined they restore themselves becoming agreeable people, but thereafter they change their thinking again, go ways from fair friendships and perform bad actions, until they are hated again, creating conflict with the community. And the cause of all this is greed”.

Johann Wolfgang von Goethe, the greatest poet and scientist of modernity, in a key scene (Part II, Act 1, scene 1) in his *Faust* published in 1815, Mephistopheles, after having invented it, explains how money should be used as a new tool to conquer “the full delights of love and wine”:

“Mephistopheles: These notes, when used in lieu of gold and pearls,  
are handy too; you know right off how much you own  
And can, without first bargaining or haggling,  
Enjoy the full delights of love and wine.  
If metal is wanted, there are money-changers,

And if they are short, you go and dig awhile;  
The golden cups and chains can then be sold at auction,  
And prompt redemption of these shares  
Confounds all sceptics who might mock us.  
Once used to this, no one will want another system,  
And from now on all your imperial states  
Will thus be well supplied with jewels, gold and paper” [25].

### Conclusion: Hippocrates’ Oath betrayed?

I believe I have enumerated some strong arguments towards a more comprehensive, historical approach to human health, connected to real contemporary biology and its main themes, namely cognition, development and evolution [26]. This has a double value because it reconnects biology in an ecological perspective and reminds physicians and health professionals that people are much more than diagnostic labels, justifications attributed to nature, impositions of thinking, and that we must pay attention to human beings as complex, ecological and cultural beings.

Finally, in restoring the medical art as proposed by its main founder in the west, Hippocrates of Cos, to whom all physicians in the western world swear fidelity. Upon the reading of his books and treatises, we have a clear picture that he saw man as part of nature, and nature as an extremely interconnected chain of causes, as an ecosystem, and he knew that the best way to approach it is through “anamnesis”, history-taking, collection of memories, without prejudice, without judgement but paying attention to the biggest and smallest details, as himself makes clear:

“The factors which enable us to distinguish between diseases are as follows: first we must consider the nature of man in general and of each individual and the characteristics of each disease. We must consider the patient, what food is given to him and who gives it - for this may make it easier to take or more difficult - the conditions of climate and locality, both in general and in particular, the patients’ customs, mode of life, pursuits and age. Then we must consider his speech, his mannerisms, his silences, his thoughts, his habits of sleep or wakefulness and his dreams, their nature and time. Next, we must note whether he plucks his hair, scratches or weeps. We must observe his paroxysms, his stools, urine, sputum and vomit. We look for any change in their nature, and the particular changes that induce death or a crisis. Observe, too, sweating, shivering, chill, cough, sneezing, hiccough, the kind of breathing, belching, wind, whether silent or noisy, haemorrhages and hemorrhoids. We must determine the significance of all these signs”. Hippocrates of Cos, Epidemics - book 1 - prop 23, written between 430 and 330 B.C [27].

### CODA

“For there’s nothing either good or bad but thinking makes it so...

...I could be bounded in a nutshell and count myself as a King of Infinite Space; were it not that I have bad dreams”. Hamlet, Act II, scene 2, v.260 by William Shakespeare, 1601, London, UK [28].

### Acknowledgement

Thanks to my Masters and Friends with whom I have the privilege to learn so much, Nelson M. Vaz from Brazil for dialoguing with me on the phone on the genesis of this paper, to Louise Rosenberg from Canada for reviewing and correcting the English, and Irun R. Cohen from Israel for reviewing, correcting and contributing with his own reference to the paper.

### Bibliography

1. Goethe Johann. "Maxims and reflections". Penguin UK (1998).
2. Bunnell Pille. "Attributing nature with justifications". *Systems Research and Behavioral Science* 17.5 (2000): 469.
3. Spinoza Benedict de. "Ethics. Translated by Edwin Curley". The Collected Works of Spinoza 1 (1996).
4. Pordeus Vitor. "Can Biology Help Us to Understand Psychopathology?" *EC Psychology and Psychiatry* 2.3 (2017): 93-105.
5. Maturana Humberto R. "Understanding social systems". *Constructivist Foundations* 9.2 (2014): 187-188.
6. Pordeus V and Rosenberg L. "Disease as Oracle: Anamnesis, Diagnosis and Prognosis Past, Present and Future". *EC Psychology and Psychiatry* 5 (2017): 81-86.
7. Maturana Humberto R. "Everything said is said by an observer". In *Gaia: A way of knowing* (1987): 65-82. Lindisfarne Press.
8. Vaz Nelson M., et al. "The conservative physiology of the immune system. A non-metaphoric approach to immunological activity". *Clinical and Developmental Immunology* 13.2-4 (2006): 133-142.
9. Cohen Irun R. "Updating Darwin: Information and entropy drive the evolution of life". *F1000Research* 5 (2016): 2808.
10. Romesin Humberto Maturana and Gerda Verden-Zöller. "The origin of humanness in the biology of love". Andrews UK Limited (2012).
11. Freud Sigmund. "Complete works". *Psychanalyse. flight. XIV 1915-1917*. University Presses of France (2000).
12. Jung Carl Gustav. "The psychogenesis of mental disease". Routledge 3 (2014): 182-183, 333.
13. Marmot Michael. "The Health Gap: The Challenge of an Unequal World: the argument". *International Journal of Epidemiology* 46.4 (2017): 1312-1318.
14. Prescott Susan L and Alan C Logan. "Down to earth: Planetary health and biophilosophy in the symbiocene epoch". *Challenges* 8.2 (2017): 19.
15. Silveira Nise da. "Imagens do Inconsciente com 271 Ilustrações". Editora Vozes Limitada (2017).
16. Maturana-Romesin Humberto and Jorge Mpodozis. "The origin of species by means of natural drift". *Revista Chilena de Historia Natural* 73.2 (2000): 261-310.
17. Bunnell Pille. "ASC: Dancing with Ambiguity". *Cybernetics and Human Knowing* 22.4 (2015): 101-112.
18. Allen Jessica., et al. "Social determinants of mental health". *International Review of Psychiatry* 26.4 (2014): 392-407.
19. Marmot Michael. "The health gap: the challenge of an unequal world". Bloomsbury Publishing (2015).
20. Marmot Michael and Richard Wilkinson. "Social determinants of health". OUP Oxford (2005).
21. Aldridge Robert W., et al. "Morbidity and mortality in homeless individuals, prisoners, sex workers, and individuals with substance use disorders in high-income countries: a systematic review and meta-analysis". *The Lancet* 391.10117 (2017): 241-250.
22. Wallace Rodrick and Deborah Wallace. "Socioeconomic determinants of health: community marginalisation and the diffusion of disease and disorder in the United States". *BMJ: British Medical Journal* 314.7090 (1997): 1341-1345.

23. Dubos, René Jules. "A God within". Scribner Book Company (1972).
24. Pordeus V. "God and Devil in Faust's Land". Play by DyoNises Theater, Brazil (2016).
25. Goethe JW von. Faust - part II, act 1, scene 1, 1815 "Faust, Parts I and II". Trans. Albert G. Latham. London: Dent (1948).
26. Gilbert Scott F. "Developmental biology, the stem cell of biological disciplines". *PLoS Biology* 15.12 (2017): e2003691.
27. Cos, Hippocrates of. Epidemics - book 1 - prop 23, written between 430 and 330 B.C. source: Hippocratic Writings, Penguin Books, London, UK (1983).
28. Shakespeare W Hamlet. Act II, scene 2, v.260 by William Shakespeare, 1601, London, UK. (Shakespeare, William. The Riverside Shakespeare. Volume 2. Houghton Mifflin, (1974).

**Volume 7 Issue 4 April 2018**

**©All rights reserved by Vitor Pordeus.**