Chapter 1 Introduction



Ivana S. Marková and Eric Chen

Contents

References.	5
ttoronoos.	_

At the heart of psychiatry lies psychopathology, the language that was created over the course of the nineteenth century to systematically describe and capture anomalies in mental states and behaviours of those deemed to be mentally disordered (Berrios 1996). Constructed at a time when the natural sciences were facing challenges from the newly arising human/social sciences in the search for explanation of human beings, psychopathology became imbued with the same tensions. As such, its foundations sit somewhat uneasily between both the natural sciences and the social/human sciences. This has had lasting and important consequences. Foremost among these has been the result that understanding and research into psychopathology has tended to polarize and oscillate between approaches that are either firmly neurobiological on the one hand or social constructionist on the other. Currently, the neurobiological drive is particularly strong and leads to a narrow and mechanistic conception of the nature of mental phenomena and underlying psychological processes.

Eschewing such divisions and taking an original and epistemologically justified approach, Germán Berrios and his school of psychopathology argue that the foundations of psychopathology need to be understood as hybrid in nature. And, hybrid has to be understood in the literal sense, that is, in the sense that deeply incongruous elements are jointly involved in the constitution and structure of psychopathology. This is the central and crucial thesis. So, what then are these incongruous elements?

Hull York Medical School, Allam Medical Building, University of Hull, Hull, UK

E. Chen

Department of Psychiatry, University of Hong Kong, Hong Kong, Hong Kong

I. S. Marková (⊠)

Firstly, there is *neurobiology*, the material element that forms a medium through which we can exist and function. There is no disputing that our brains and nervous systems are necessary for the functioning of our mental processes. Secondly there is *meaning*, a fluid-like, non-material element that carries both personal and collective (family, peer, social, cultural) components. The incongruity is obvious. We have one element composed of matter, present in time and space and fixed within one person. We have another element, non-material, non-tangible, present in time but not the same kind of space and extending beyond the one person. Yet both these elements are necessary and are woven together to form the clinical phenomena that are described and captured by the language of psychopathology. Our understanding of both psychopathology and our research needs to be based on this epistemological foundation.

This epistemological position does raise certain challenges. Firstly, how such incongruous elements, the material and the non-material, can be bound to form a complex remains a question, one, moreover, whose answers must be sought in what seems like a no man's land at the interface of science and philosophy. Acknowledgement of this problem, however, does not obviate the significance of this fundamental position and its consequences. Indeed, it serves to highlight the need to recognize that mental states and behaviours are inherently complex. We would stand to lose a lot in terms of our future understanding and knowledge should these be reduced to either the neurobiological or the sociocultural. The biopsychosocial model, so often used in relation to our understanding of mental states and behaviours, is a pragmatic approach where neurobiological, psychological, and social factors are all viewed as important influences in the presentation of clinical phenomena. However, it is not a justified epistemological position. On this model, the neurobiological, psychological, and social factors work in an additive way rather than in any real interactive sense.

Secondly, there is the challenge of determining the extent to which each element might contribute to the structure of individual psychopathological phenomena and hence give them their structural and clinical salience. Given that psychopathological structures, whether mental symptoms or disorders, are heterogeneous, it is likely that there is considerable variation in the degree to which *neurobiology* and *meaning* carry the weight or 'sense' of the symptom. This is important also because of the possible therapeutic implications but is a question that may be more amenable to empirical research.

Thirdly, there is the challenge of addressing, in a serious way, the nature of *meaning*, the nebulous, non-material component of psychopathological phenomena. Exploring the *meaning* underlying mental phenomena and how this may be configured is a particularly complicated endeavour. It entails an approach that draws on history, psychology, culture, linguistics, anthropology, and hermeneutics among others. In addition, however, it involves a twofold interrelated exploration in which simultaneously the content or sense of the meaning is sought along with how it becomes configured in the first place. Understanding the nature and role of such configurators becomes particularly relevant when making sense of psychopathological phenomena and their development.

1 Introduction 3

Building on this hybrid epistemology and its challenges underlying psychopathology, Germán Berrios has been the central figure and creative pioneer. Through his teaching and collaborations with students and colleagues from all over the world, he has developed a rich and original framework on which this field continues to grow and evolve. An inspirational scholar and teacher, whose thinking cuts across subject domains and professional disciplines and whose imaginative ideas forge new paths in the exploration of reality, Berrios makes us question assumptions, helps us examine concepts and phenomena in novel ways, and stimulates in all of us new questions and new directions of enquiries. His contribution to psychopathology is immense, seen through not only his substantive and significant outputs such as his acclaimed History of Mental Symptoms (1996) but in the publication of an extensive body of original articles. There, among other things, he provides conceptual analyses on mental symptoms, showing how historical, cultural, and psychological factors contribute to their construction and how and why this is made possible within specific historical epistemes (e.g. Berrios 1981, 1988, 1990, 1995, 1998, 1999). His journal, History of Psychiatry, started with Roy Porter is renowned for its epistemological focus as well as historical depth. His wealth and breadth of knowledge in history, philosophy, psychology, statistics, and psychiatry has attracted students and colleagues from all over the world. Much of the resultant collaborative work has become known as the Cambridge school of psychopathology.

This volume is a small homage from some of his students and colleagues. We are all too aware that we have not been able to include everybody who would have wanted to contribute. We have had to rely on the contacts we knew about or found out about from others, and this task was complicated by the fact that his collaborators spanned not only geographical distances but also generations. We apologize to those we have been unable to contact. As such, the contributors here come from all continents of the world, and the chapters focus on different aspects of the broad transdisciplinary approach to the exploration of psychopathology as developed by Germán Berrios and the Cambridge school of psychopathology.

Despite not being fully representative from the perspective of contributor inclusion, in other ways the chapters that follow reflect very much the multifaceted and variegated approaches to the study of psychopathology and related areas that characterize and/or are inspired by the work and ideas of Germán Berrios. The contributions are diverse. There is no particular underlying theme around which the chapters are focused. Instead, each chapter brings its own particular interest and emphasis. Each addresses its own specific issues. We thus have a mosaic of articles whose common link is that they have each been influenced in one way or another by the work and ideas of Berrios.

We have divided the volume into parts for ease of reference. However, reflecting the consequences of a root hybrid epistemology, many of the chapters do overlap these divisions both in content and in approach. The first part is a personal one. It begins with an account of some of the early background factors important in the work and development of ideas of Berrios (Huarcaya-Victoria). This is followed by three separate recollections of working with Berrios, each giving a different slant on their experiences (Castagnini; García Caballero & García Lado; Kirkby).

The second part deals with epistemological enquiries. Here we begin with a detailed analysis of some of the main threads underlying the psychopathological work of Berrios (Fuentenebro & Chiva). After this, there are chapters that address specific epistemological problems relating to psychopathology. Here we first delve into the question of how can we define or understand psychiatry (Marková). Then, we discuss the nature and importance of contextual factors in descriptive psychopathology (Chen). This is followed by consideration of the role of conceptual analysis in psychiatric nosology, illustrating this specifically with the concepts of stress and distress (Starkstein). The meaning and role of cultural configurators in the construction of mental symptoms are then examined (Luque & Villagrán), followed by an analysis of the problem of psychogenesis (Villagrán & Luque). Finally, in this part, Ihara explores the concept of supervenience and the mind-body problem in depression.

The third part addresses psychopathology and related medical areas from a historical perspective. Again these represent diverse areas of study. Aragona offers an examination of hermeneutic psychopathology, emphasizing its relevance and ubiquity and exploring its historical roots in order that we can develop better ways of making sense of patients' experiences. Other chapters are more narrowly focused on specific historical studies. Thus we have an account of the development of epidemiological studies into psychopathological syndromes over a 15-year period in particular regions of Santiago, Chile (Alvarado & Valdivia), a description of how psychiatry and psychopathology evolved in Portugal between 1915 and 1940 (Pereira), and there is a historical reassessment of the contribution to medicine of Valverde, a sixteenth-century Spanish anatomist (Rodríguez). Taking a different approach, Dudas focuses on the relevance of historical understanding for the practising clinician. And Schioldann completes this part with a detailed analysis of Wimmer's concept of psychogenic psychoses.

The fourth part is more specifically focused on psychopathology, and the chapters here again explore various and distinct aspects of this. Thus one chapter examines the concept of formal thought disorder and argues for the need to explore possible meaning hidden in or symbolized through this psychopathological phenomenon in order to enhance communication with patients (Barrera). Then there is a critical exploration of the concept of post-traumatic stress disorder and the debates this syndrome generates (Shalev). This is followed by a chapter focusing specifically on the notion of time in psychopathology, exploring the contribution of time distortions to psychopathological phenomena (Holguin Lew). In a completely different vein, we have an analysis of the symbology in Frida Kahlo's art and its possible associations with psychopathology (Quintanilla-Madero). Lastly, the chapter by Avila seeks to apply the Cambridge school of psychopathology model of symptom formation to the development of medically unexplained symptoms.

The final part contains two chapters focusing on neuropsychiatric aspects of psychopathology. Here, some of the issues concerning the disentangling of *neurobiology* and *meaning* alluded to earlier can be more concretely raised in relation to

1 Introduction 5

specific neuropsychiatric conditions. Thus, Dening explores the nature of psychopathological phenomena in patients with Wilson's disease, and Quemada examines the structure of psychopathological phenomena in patients with acquired brain injury.

As already mentioned, the contributions in this volume tend to take approaches that cross the divisions marked by the parts. Thus, there are, for example, epistemological considerations in most of the chapters. Similarly, explorations of psychopathology are present in all parts, and historical approaches are deliberated in both the epistemological and psychopathological parts. While not pretending to match the scholarship of Germán Berrios, these methods, seeking to explore concepts in depth and from a multitude of perspectives, are a tribute to his work and teaching. More importantly, however, they form the basis to a legacy of thinking and approaches to the study of human behaviour and mental states that is vital for ongoing meaningful research into psychopathology and for the ensuing benefits to patients.

Acknowledgement We would like to thank Jaan Valsiner for his encouragement and support in the production of this volume.

References

Berrios, G. E. (1981). Stupor: A conceptual history. Psychological Medicine, 11, 677–688.

Berrios, G. E. (1988). Melancholia and depression during the 19th century: A conceptual history. *British Journal of Psychiatry*, *153*, 298–304.

Berrios, G. E. (1990). Feelings of fatigue and psychopathology: A conceptual history. *Comprehensive Psychiatry*, *31*, 140–151.

Berrios, G. E. (1995). Déjà vu in France during the 19th century: A conceptual history. *Comprehensive Psychiatry*, 36, 123–129.

Berrios, G. E. (1996). *The history of mental symptoms*. Cambridge: Cambridge University Press. Berrios, G. E. (1998). Confabulations: A conceptual history. *Journal of the History of Neurosciences*, 7, 225–241.

Berrios, G. E. (1999). Anxiety disorders: A conceptual history. *Journal of Affective Disorders*, 56, 83–94.