

**GRIESINGER, WILHELM** (b. Stuttgart, Germany, 29 July 1817; d. Berlin, Germany, 26 October 1869), *neurology, psychiatry, internal medicine*.

Born in Stuttgart, Griesinger was a leading figure of nineteenth-century neurology and psychiatry. Together with close friends of his youth, Carl Reinhold August Wunderlich und Wilhelm Roser, he shared many programmatic concepts for modern medical practice, based on the approaches of the natural sciences. Griesinger attended his first medical courses at the Eberhard-Karls-University of Tübingen (1834–37), where he was actively engaged in a students' fraternity. After some fraternity pranks, he was hauled before the university's rector and expelled from his 'alma mater'. He then registered at the University of Zurich (1837–38), where he studied with Johann Lukas Schönlein, whose clinical demonstrations Griesinger admired. He was later allowed to return to Tübingen, graduating MD in 1838.

Having completed his medical examination, Griesinger practiced medicine in Friedrichshafen, Lake Constance, and began an internship at the mental asylum of Winnenthal, where he wrote his famous handbook *Pathologie und Therapie der psychischen Krankheiten* (1845). After a journey to Vienna and Paris, Griesinger served as university assistant to Wunderlich. When he was made 'Privatdozent' at Tübingen, he collaborated with Wunderlich on the editorial board of *Archiv für physiologische Heilkunde* (1847–49). With this organ he could propagate his revolutionary ideas on modern psychiatry, based on pathological anatomy, experimental physiology, and 'rational' critique of clinical practice. In 1847 Griesinger was made 'Extraordinarius' for general pathology, material medica, and history of medicine. Although he was stimulated by the political ideals of the revolution of 1848 in his home country Württemberg, he left Tübingen on receiving a call for the chair in medical pathology and therapy at the Christian-Albrechts-University of Kiel.

Shortly after, the Vice-King of Egypt invited Griesinger to be his personal physician as well as director of the Cairo School of Medicine, where he stayed until 1852. On his return from Egypt, he was made director of the medical clinic at Tübingen (1854), before accepting the directorship of the Canton Hospital and mental asylum at Zurich (1860–64). Already in the second edition of his *Handbook* (1861),

Griesinger sided with the 'non-restraint-movement'. His overall achievements made him the choice for the 'Ordinar-ius' in psychiatry at Berlin Charité, when Karl August von Solbrig declined it. When Griesinger accepted the call, his patients were housed either in the wards of the medical clinic or, together with the syphilitics and sick prisoners, in a closed asylum. However, the board of directors offered Griesinger a neurological ward with the outpatients department at his disposal. During his stay in the Prussian capital (1865–68), Griesinger changed Berlin's psychiatric landscape. Following on from his dictum that mental illness is caused by pathological processes of the brain, he founded two major scientific platforms in Berlin, a society (the 'Berliner medicinisch-psychologische Gesellschaft', 1867) and a journal (the *Archiv für Psychiatrie und Nervenkrankheiten*, 1868). When Griesinger conceptualized his approach for psychiatric care, he focused on separated wards for neurological and psychiatric pathologies. This was an insult to traditional Charité politics, which had placed the neurology patients in the medical clinic—under the directorship of Friedrich Theodor Frerichs. A long struggle over the 'nerve material' ended in Griesinger's favor, mainly because of ministerial interference. He was also successful in implementing hospital care, in the middle of the capital, for acute patients in the Charité wards, while he established an 'agrarian colony' for chronic patients in the city's outskirts. Thus, Griesinger was a major driving force with regard to the institutionalization of distinct neurological and psychiatric clinics and the distribution of new concepts for home-based and community-oriented psychiatric care.

### Bibliography

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