

Chapter 5

Medical School and World War I

UPON COMPLETING GYMNASIUM, I entered the University of Vienna. Medical training at that time took 8 to 9 years of study. The first 3 pre-medical years were a combination of science and arts courses. After passing a series of examinations, the *rigorosa*, I matriculated and was admitted to the school of medicine. Medical education revolved around lectures, demonstrations, and laboratory work. Freud, for instance, never treated a patient in medical school. Each specialty was covered by a series of examinations, again called *rigorosa*, which had to be passed before receiving the MD degree. One could postpone the *rigorosa* until the end of medical school, as Freud did, or take each examination as one completed a course of study, as I did.

My medical education was different from that of most of my fellow students in that I was permitted to spend about half of my time in practical clinical work. I did tours of duty on each of the clinical services. This enabled me to go into practice as soon as I received my degree, unlike the majority of students.

One of my first clinical tours was in the Wagner von Jauregg clinic in the Lazarettgasse, the psychiatric service. Wagner von Jauregg was a distinguished physician, a researcher. He won a Nobel prize for his malaria therapy of cerebral paresis. He was not really a psychiatrist, but a neurologist, interested only in the physical side of psychiatry. This was in line with most psychiatric thought in those days.

The Kraepelinian system of psychiatric classification was ascendent. Kraepelin had collected and edited thousands of case histories, which enabled him to develop an excellent general picture of the patterns of mental illness. Kraepelin was not interested in *what* a mentally ill patient thought, but only *how* he thought. He was uninterested in the patient's character, but only concerned with the clinical phenomena. It was not considered necessary to understand mental illness, just to be able to classify it. Certain disease entities were held to be curable, others incurable. Mental disease was a separate entity; mental health, a self-evident state, not worthy of study. The course and outcome of mental illness was predetermined. . . .

Von Jauregg was an independent soul who tended to go his own way, but his attitude was, essentially, Kraepelinian. He was an aristocrat whose aloof, superior manner placed him in a realm far removed from anyone who worked with him. Moreover, he was a boring lecturer who put his students to sleep. His patients were terrified of him. Big and strong, he grabbed patients by the arm in a wrestler's grip. He was, secretly, a wrestling champion. Once, wearing a mask, he went to a bout where the current Russian wrestling champion was fighting and challenged him to a match. Von Jauregg won the bout, chose to remain anonymous, and had Viennese wrestling fans mystified for years over the incident.

Von Jauregg's chief clinician, Dr. Otto Pötzl, told me the tale. Only Pötzl and I knew about it. Pötzl was almost Von Jauregg's opposite. Warm and outgoing, he was full of jokes. Students flocked to his lectures, almost as much for his great fund of Jewish jokes (he was a Gentile) as for his learning, which was great and profound, and for his thinking, which was systematic and sharp. His specialty was neuropathology, particularly brain pathology. His rise in the academic world was unusually rapid. He was only about 13 years older than myself and already second in command at the Von Jauregg clinic. He really ran the place. Von Jauregg, immersed in his research, was a figurehead administrator. Pötzl had been chief of a university clinic in Prague before coming to Vienna. He later succeeded Von Jauregg.

The son of a great newspaperman, the editor of Vienna's *Freie Presse*, Pötzl had a fine appreciation of poetry and literature, which may be the reason he was interested in me. We developed a wonderfully close relationship, and he was always helpful to me. He was interested in the *Daimon* circle and followed the development of the magazine, which began in 1918. However, he never fully understood its scope, and we were not so close that I was able to discuss my ideas about the Godhead and the cosmos. In those days, students did not have such relationships with their professors. The professor taught his students. A student or an assistant was not thought of as one who could "teach" anything to his professors. Pötzl had the ability, which only a great teacher has, to share his unusually keen and logical mind with us; Pötzl taught his students to think.

Pötzl was a great admirer of Freud and had a remarkable, profound insight into Freud's ideas. How he was able to hold on to his beliefs about Freud and still work with Von Jauregg was a mystery to me. Von Jauregg hated Freud so passionately that he forbade any known Freudians from even visiting the clinic. Alfred Adler, for instance, was not permitted entry. Von Jauregg never missed an opportunity to discredit and bedevil Freud or his followers, no matter how insignificant.

One of my early clinical experiences was with an extraordinarily beauti-

ful young woman patient at the Von Jauregg clinic who had come in for a diagnostic workup. It was not clear whether she was suffering from hysteria or multiple sclerosis. Her physician, Dr. Redlich, was one of the greatest diagnosticians I have ever met. He was able to differentiate between hysteria and multiple sclerosis by merely taking the patient's pulse, or so it seemed to me. The young lady was staying in a private room. Medication was prescribed for her, to be administered intramuscularly. I was to give her the injection. There I was, in her private room, all alone with her, the girl's beautiful white buttocks glistening in the sunlight. I was left to my own devices. No one realized that I had never given an injection before. I plunged the needle into her delightful flesh. I think it was the right buttock. Unfortunately, the needle broke and was embedded in her. I had to go and report that I had lost the needle. She was X-rayed, a surgeon operated on her to retrieve the needle, and we put it into our museum of curiosities at the clinic.

The next day I apologized profusely to the girl. Oddly enough, she developed very warm feelings towards me. She said that it had been rather a wonderful experience for her anyway. That was as far as we went in our relationship, although she had to be among the loveliest women I ever met. Eventually she made a good recovery, left the clinic, and got married.

I certainly wasn't a hero there, just an unskilled medical student.

In the second year of medical school, I was asked to become a research assistant at the clinic, responsible to Pöttl. I helped him in his study of the dreams of alcoholics. Pöttl thought that he could diagnose various neurological conditions common to alcoholics by studying the structure of their dreams. And so it was. When the results of the study were published, Pöttl included my name as a coauthor. This was the first time my name appeared in connection with a piece of scientific research. He subsequently mentioned my name frequently in his other publications. This was very generous of Pöttl, not common practice in scientific circles at all. Quite the contrary, it was not unusual for research chiefs to take credit for work done on their services, even though they might not have had a hand in it. . . .

In 1912, I attended one of Freud's lectures. He had just finished an analysis of a telepathic dream. As the students filed out, he singled me out from the crowd and asked me what I was doing. I responded, "Well, Dr. Freud, I start where you leave off. You meet people in the artificial setting of your office. I meet them on the street and in their homes, in their natural surroundings. You analyze their dreams. I give them the courage to dream again. You analyze and tear them apart. I let them act out their conflicting roles and help them to put the parts together again."

As I look back at this encounter, what strikes me first is the difference in our ages. I was little over 20, my productivity just beginning. Freud was

56, at the height of his productivity. We both had a beard. My beard was reddish blonde and grew spontaneously, never shaven or trimmed, a natural appendage, a natural organ of my body. It was rather like my tonsils or my appendix. I had not yet found any reason to dispose of them either. Freud was, on the other hand, carefully barbered. His beard was grayish and small, a "social" beard.

There was an amazing element in our meeting, although it was unspoken. It was natural for Freud, I guess, to be looking for new disciples. His singling me out was not so unusual since I had quite a reputation in the university community by that time and was an easily recognizable figure in my mantle. It was also characteristic for an impetuous youth to think that he could win an older man over to his views, even if the older man was famous, well established, with a highly organized mind, and a total investment in his own system. But, underneath it all, there was a factor of which both Freud and I were unconscious. Except for my biological "sonhood," I was never able to be a "son" to anyone. In my early life, I tried and succeeded in becoming a "father" very early. Although youthful, I was just as unyielding as Freud. We were both "fathers," rulers—in my case, in expectancy. It was as if the unknown chieftain of an African tribe met the king of England. Just the same, it was one father against another. At the time, Freud's kingdom was larger than mine, but we were both on the same planet.

My interest in psychiatry never ceased, but psychoanalysis and Kraepelinian psychiatry left me cold. I realized later that my quarrel was not so much with Wagner Von Jauregg's malaria therapy, nor with Freud's psychoanalytic system. My quarrel was with their behavior as therapeutic "actors." I did not think that a great healer or therapist would look and act the way Von Jauregg or Freud did. I visualized the healer as a spontaneous, creative protagonist in the midst of the group. My concept of the physician as a healer and the concepts that Freud and Von Jauregg put forth were very far apart. To my mind, persons like Jesus, Buddha, Socrates, and Ghandi were the real doctors and healers. Freud would probably have classified them as patients. It should be remembered that psychoanalysis grew out of the neuropsychiatric world of Charcot and Breuer, whereas the origins of my work go back to the primitive religions and my objective was the promulgation of a new cultural and social order. . . .

I had another significant encounter during my medical school career when Albert Einstein briefly visited Vienna to clear up his status with the Austro-Hungarian Ministry of Education so he could take up a position in Prague. While in Vienna, he gave a few lectures at the Physics Institute. I signed up for them. In 1911, Einstein was well known and respected in the

scientific community, but still an unknown in the world at large. He was about 32 years old then. I was 21.

I was particularly impressed by Einstein's capacity for envisioning the entire cosmos. Looking at the universe, he was intoxicated by the idea of God. He was not only a physicist, he was also a theologian. He said to us, "You know, God does not play dice with the universe." Einstein was convinced that by looking at the cosmos as an entity composed of active forces he could discover the general laws which direct them. By penetrating the cosmos with his mere intuition, he was able to make tremendous discoveries which no man before him had ever touched upon. I never forgot my brief encounter with him, or the statement he made to our class.

Before I finished medical school World War I broke out. The war brought many changes in my life. When the war started I was a prophet, a religious leader. When the war ended I was a published author (albeit anonymously), the author of religious poetry, the leader of a literary existentialist group. The first part of my *Invitation to an Encounter* was written in the spring of 1914. It was loosely based upon "Homo Juvenis," a speech I had made at a youth assembly in 1912. My immediate inspiration for writing it was, however, the war's advent in the spring of 1914. . . .

The war thinned out the movement that was the Religion of the Encounter. Fedá returned to Prague, Andreas Petö to Budapest, where he began to work with handicapped, brain-injured children. In later years, he was called the "miracle doctor" because of the way he was able to rehabilitate so many patients, even some who were thought to be hopelessly crippled. There is a clinic in Budapest named after him and his work is being carried on by his students.

The war had a reductive effect on my religious ecstasies. Whether it was the disbanding of an intimate circle of enthusiasts or the death of my friend, Chaim, there was a gradual transformation towards more normal conduct on my part during the war years.

I volunteered for military service in 1914, but I was not permitted to serve because of my unclear citizenship status. However, as an advanced medical student with considerable clinical experience, I was hired by the government as a medical officer. The wages were high, nearly 1,000 gulden a month. For the first time in my life I had abundant cash. I took a leave of absence from school and placed myself at the disposal of the government.

My first assignment was at Mittendorf, a refugee camp about 15 minutes away from Vienna by train. The population of the camp consisted mostly of Italian-speaking Austrian subjects from a wine-growing area in the Southern Tyrol who had been moved there by the government. The rationale for the camp was twofold. First, the Tyroleans were in Mittendorf for their own protection against the Italian army, which was advancing

through the mountains. Second, the government did not completely trust the Italian-speaking subjects to withstand the invaders. The *Italia Irredenta* movement was active at that time, agitating for the annexation of Trento and Trieste to Italy. The most closely analogous situation I can think of was the internment of thousands of Japanese-Americans living on the Pacific Coast during World War II.

Thus, an entire population was interned near Vienna for the duration of the war. The people were not free to leave the camp; it was really a prison camp. When I arrived in 1915, more than 10,000 persons lived there, mostly old people, women, and children. Actually, I never met one individual in the early days of the war who was not a loyal subject of the emperor. They were, however, very proud of their Italian heritage. The community consisted of cottage dwellings, each holding several families. At the head of each cottage was a *capo di baracca*, a man responsible for the welfare of the group under him. Overall, the camp was governed by German police officers, strict men, sometimes rough or heavy-handed in their dealings with the gentler Tyroleans, who had a Latin temperament. The Germans were not shy about expressing their “Aryan” contempt for the Italians.

On the surface, the camp appeared well organized. It was really a topsyturvy community, but highly stratified. The government furnished cottages and other structures, a church, a school, a hospital, a commissary, to insure that the minimum needs of the community would be met. The camp was set up in 1914. Six months later, a shoe factory with 2,000 workers was moved into the camp to provide employment opportunities. This caused a revolution. The shoe factory people considered themselves on a higher plane than the peasant refugees, keeping themselves apart from the camp people. They had a separate commissary, separate housing facilities—everything separate. Later some peasant refugees were hired to work in the factory. But the coming of the factory created more crowded conditions in the camp and placed another stratum over the original refugees, who were on the bottom of the social heap and had the lowest priority when it came to getting scarce goods like food and clothing.

A whole community life developed. Step by step, community institutions came into being. The government spent a great deal of money to provide the camp with whatever was needed to make life possible. Luckily, the bishop of Trento came along with his people. He brought priests and nuns with him. The priests acted as parish priests, conducted church business; some taught school. The nuns also taught and nursed the sick. The bishop was a giant of a man who had the complete trust and faith of his flock. I was able to work closely with him in Mittendorf and even now, almost 60 years later, I am still impressed by his devotion, his unceasing efforts to make life better for his people. He was a true saint.

Another outstanding personality who influenced the development of the camp was Feruccio Bannizoni, a clinical psychologist. He was, so to speak, an incomplete student, a man who had finished only half of university. Due to conditions in Italy, he was able to set up as a psychologist with no more education than that. He was always studying on his own, an autodidact. . . . Feruccio was an employee of the camp administration, a member of a special circle. He had been there since the beginning in 1914 and functioned as a mediator between the administration and the refugees, between the factory personnel and the refugees, the factory workers and the directors. People came to him with their troubles and he did his best to straighten things out. Today we would call him an ombudsman. He was able to give me a good deal of information about the various factions in the camp, which was a real help when I started my first sociometric experiments there.

He had some connection with Pirandello through a friend and was interested in the *Daimon* circle, which was just beginning to form. He came with me to the Vienna cafés a few times. He made my work known to Pirandello, and in later years he was to credit me with having a strong influence on Pirandello's plays.

The government was concerned about three problems in setting up the camp, and these were reflected in the planning: safety from enemy attack, sanitation, and subsistence. Social or psychological planning was never considered, not even conceived of at the time, although there have always been great administrators who did "sociometric" planning intuitively. I was appointed to a committee which was to supervise the problem of sanitation in the camp. In this position, and later, as superintendent of the children's hospital, I had the opportunity to study the community from its early days to its dissolution at the end of the war. . . .

The structure of the camp gave rise to the most tremendous corruption I have ever witnessed. It was a regular Sodom and Gomorrah. There was an enormous black market, of course. The women were particularly abused—so many abortions and illicit pregnancies! The German police were the worst in this respect. They were harsh and vulgar men. Italian girls are very proud. They despised the gendarmerie who kept order in the camp in such a repressive fashion on one hand, abused them in the most debauched way on the other hand. It is amazing that I wasn't carried away by the wave of Italian nationalism that was provoked by the policemen's behavior for, as doctor to the refugees, I was privy to the sufferings of the women and I began to identify myself more and more with the Tyroleans, learning their language like a native and otherwise immersing myself in their lives. . . .

I studied the psychological currents that developed around various elements of community life: nationality, politics, sex, staff versus refugees,

and so on. I considered that the disjunction of these elements was the chief source of the most flagrant symptoms of maladjustment I witnessed in the camp. It was through this experience that the idea of a sociometrically planned community came to me. In February of 1916, I wrote the following letter to the Austro-Hungarian Minister of the Interior, Herr Regierungsrat Winter:

The positive and negative feelings that emerge from every house, between houses, from every factory, and from every national and political group in the community can be explored by means of sociometric analysis. A new order, by means of sociometric methods is herewith recommended.

(Translated from the German by the author from the frontispiece of *Who Shall Survive?*)

Herr Winter, who later became a good friend of mine, received the idea warmly and promised to allow me to put my theory into practice.

Using the methods of sociometry, albeit in a very primitive form, I moved families around on the basis of their mutual affinities for one another. Thus, the groundwork by which the community was organized was changed for the better. My theory was borne out by the fact that when people were able to live with those to whom they were positively attracted, the families tended to be helpful to one another and the signs of maladjustment diminished both in number and in intensity. We also rearranged work groups in the factories whenever possible to create greater harmony and productivity among the workers.

The German police continued to hinder our work. They relished their godlike power to run the camp. I always had a great number of complaints about police abuses. I wrote many letters to the Ministry of the Interior trying to get the government to discipline the police. Fortunately, the ministry removed or transferred some of the worst, which had a chastening effect on the others, at least for a while.

Although my efforts ameliorated some of the worst problems in the camp, Mittendorf never became a utopia. There was still hunger, illness, corruption, abuse of innocent people. There were so many fine, wonderful people there who had to suffer and who *had no alternative*. Maybe that was the worst part of all. At least, whenever things got too difficult for me, I could get into Vienna in the evening and relax at one of the cafés, but for them there was no way out. . . .

At the end of the war, the Tyrolians went home, their loyalty to Austro-Hungary shattered. Much of the Tyrol was ceded to Italy at the end of the war. The bishop tried to get everyone to return to the Tyrol, but many of his people worked their way down into Italy. Feruccio, for instance, went to Rome and became director of the Psychological Institute. I continued to

receive letters from all over Italy where the refugees were then settled after the war.

I'll never forget the day they left for home, newly created Italian citizens. The women and children dressed in festive garb that had been lovingly preserved despite the shortages of the war years. They marched out of the camp, four abreast, full of joy, singing their beautiful Italian songs. Part of me wanted to go with them. . . .

After almost 2 years at Mittendorf, I was transferred to Sillein, Zsolna, a camp in Hungary. I assisted Dr. Wragasy, a "brain" surgeon from Budapest. Dr. Wragasy's designation of brain surgeon was self-styled and emerged because he had developed a standard treatment for many different ailments that consisted of trepanning the skull and tossing iodine on the exposed brain tissue. Dr. Wragasy really believed that this treatment was indicated, and he believed that it helped the patients. But of course the consequences of opening up the skull were to cause brain sepsis in many, if not most, cases. Thus, many men died in agony because of Dr. Wragasy. My immediate reaction to his technique was to consider it barbaric and sadistic.

The ways of Dr. Wragasy opened my eyes to the nature of power, for he was the chief medical officer of the camp and everyone had to defer to him. It was impossible for any of us to have the doctor removed or to have him modify his methods of treatment. . . .

Later, I discovered that the power Dr. Wragasy wielded was a typical feature of most institutions, not just hospitals or military installations. But since the hospital is a place where people either recover or die, the politics and the power structure of hospitals are a much more dramatic and urgent affair than in a school, church, or factory.

I could never really understand how Dr. Wragasy arrived at his peculiar panacea. He was, in most respects, a rational man. I could not see how he was able to cling to his poisonous technique in the face of such overwhelming mortality among his patients. His brother was a highly respected, skillful internist in Budapest, and that made it even more difficult for me to understand.

A few years later Dr. Baranyi, a Nobel laureate, stated unequivocally that trepanning the skull was a dangerous surgical procedure that should be used only when absolutely necessary, to remove a brain tumor, for instance. So the practice must have been fairly common if such a famous doctor turned his attention to it. . . .

Sillein had its share of refugees. It was the custom to put newly arrived refugees in rigid quarantine for several days after their arrival to prevent the spread of infectious diseases. One particular group I had to oversee was a whole village of Orthodox Jews who had fled the enemy. They ar-

rived at the camp full of dirt and vermin. I gave strict orders that their heads and beards be shaved. There was, in those days, no other safe and expedient way of getting rid of body lice. In World War I, more men died of typhus and other insect-borne diseases than died of wounds. It was urgent to get rid of the beards.

The supervisor of the detention area came to me shaking with anger. The people were being obstinate and would not follow my orders. I was irritated and told him to bring me some of these senseless people who were endangering the health of the whole camp. Finally there was a knock at the door. In came three old men who were the village elders, delegated to present their case to me.

“Why won’t you have your beards shaved?” I addressed them sharply.

The oldest of the three, the head rabbi, answered, “Our religion forbids it. But, sir, permit me the question, why do you still have a beard? Or is your beard more just before God than our beards are?”

“Well,” I said as I stroked the blonde growth on my chin, my prophet’s beard, “you are mistaken. I have no beard. There is no hair on my chin. Open your eyes.”

They did not know what to say to me and answered with embarrassment. “Yes sir, we only see it now. You have no beard.” Before they left my office, they promised to do what I had demanded of them.

The next morning, the supervisor came to me again, this time in a state of despair. “I can’t do anything with those people. None of them has been shaved.”

I called the three elders back to my office and spoke to them angrily. “What sense of honor do you have? Yesterday you promised to follow my orders, but you still have your beards.”

“Dear doctor,” said the eldest, “we don’t have beards anymore. You are mistaken. Open your eyes!”

And with great pleasure, their eyes shining with suppressed laughter, they stroked the beards that reached down their chests. I dismissed them without comment. The same day I called the barber. He took off my beard. The next morning I called the three elders in again. When they saw me they exclaimed with amazement. “Sir, you had your beard shorn! Why?”

“Quiet,” I told them sternly. “I told you I had no beard. Now you can convince yourselves.”

That night none of the men in the quarantine barracks still wore a beard.

Shortly after that incident, I returned to Vienna, clean-shaven, with money in my pocket. I had saved most of my earnings and I was really determined to finish school and get my MD degree in the shortest possible time. For the first time in my life I had plenty of money. Also, as the result

of having worked as a doctor in the war, my status in the world was much higher. Ironically, now that I was an exemplar of what my family most admired, I became more and more estranged from them, more than I had ever been. I did my work at school, went home, and stayed in my room, scarcely talking to anyone for days, even weeks at a time. . . .

In February of 1917, I received my Doctor of Medicine degree from the University of Vienna. My mother came for the simple ceremony at which the degrees were awarded. My medical diploma was among the last to be signed by Emperor Franz Joseph.

The dean of the medical faculty, Professor Hans Horst Meyer, Nobel laureate in chemistry, greeted my mother warmly. He said to her, "*Ihr Sohn ist ein grosses Genie. Er hat eine grosse Zukunft*" (Your son is a great genius. He has a great future.). My mother was flustered and joyful. She went back to the apartment in Vienna feeling somewhat rewarded for all the years of work and sacrifice she had given me. . . .