

WILHELMINA R. age 60, Ht. 5 ft. 8 in., Wt. 150 lbs.; nativity, Sweden; in U. S. since 1885; church affiliation, Lutheran; education, common school; civil condition, married; physical findings, negative.

REASON FOR COMMITMENT

Admitted to the Northampton State Hospital, July 10, 1922 after being picked up by a police officer on the streets of Springfield late one night. She was distressed and confused, thought her husband was dying and was afraid of dying herself. She remained two years in the Northampton State Hospital and was then transferred to this hospital with a diagnosis of "Dementia Praecox, catatonic type, much demented".

PERSONAL HISTORY

Heredity and Early Influences:

Not much information. Born in Sweden and raised on a farm. She comes apparently of good middle-class stock and has had good training. She came to this country at the age of 16 at the invitation of an aunt in Springfield.

Vocational Adjustments:

After her arrival in this country she worked as a domestic until her marriage at the age of twenty six. After her marriage she showed herself a very good house-keeper. She was also very thrifty. According to the record she and her husband have saved four or five thousand dollars.

Sex Adjustments

She married her husband against the advice of her friends, who warned her that he was queer and of extremely jealous disposition. After her marriage she discovered that her friends were right. Her husband was seclusive and jealous and soon developed ideas of persecution so marked that he had to be taken to the Northampton State Hospital. He stayed there four months. She then took him out against the advice of the physicians and for twenty one years she kept him out of the hospital, putting up with his queer ways and his paranoid ideas, protecting him from his neighbors and them from him. He was, she says, an extremely hard worker but her life with him was very unhappy.

The record of the Northampton State Hospital shows that the husband was committed in 1906. He had for six years previously been bothered by "noises in his head and by the influence of other persons who desired to hurt him. During his hospital residence he was emotional and uneasy, asking for treatment but refusing the medicine offered him. It was thought that chronic alcoholism was responsible for his condition. He was admitted again in 1928. According to his own account, he had been hearing voices ever since he had left the hospital 22 years before. These voices bothered him at night and he felt that somebody had been trying to do him physical harm. He had finally become so disturbed that he acted in a threatening manner and brandished a knife. He stated that the voices were continually annoying him and changing his features and that sometimes he would wake up and find that he was another man.

The pt. when asked why she had lived with her husband so long stated that it was due to her training in the old country where she had been taught to stick to her husband for better or worse. Besides she was perhaps too proud to give up.

There are no children. She had two pregnancies but one resulted in a still-birth and the other in a miscarriage.

Social Adjustments:

According to the medical record she and her husband were both very penurious and allowed themselves no luxuries or pleasures. According to her own

account she has always been vivacious (as she is at present) has had many friends and has been very active in her little church. It is to be noted that she has now several friends who are much interested in her.

HISTORY OF PRESENT ILLNESS

According to the physician's certificate issued at the time of commitment and probably derived from her own statements, the disorder was of 14 years' standing. At that time she began to hear the motormen and the conductors on the street railway talking about her and laughing at her. The policemen also made remarks about her and her neighbors began to insinuate that her moral character was not good.

According to her statement now after putting up with her husband for twenty years or more, keeping him out of the hospital during that time, she got word of her mother's death. She was much upset over this and going over this and going over on the boat she had visions of an unhappy sort and was quite nervous. In Sweden she improved and when she returned she was in fairly good shape. She enjoyed the trip back. She was very vivacious and she found on the boat an admirer who proposed marriage. She would not listen to him, saying that she was married. When she arrived home her husband greeted her very coolly, appeared not in the least glad to see her and immediately went up to his room and to bed. She was much upset over this. Her unhappiness increased until finally she gave up the struggle and let the house go dirty. One day she went down to the lake contemplating suicide. Instead however she stopped an automobile and asked to be taken to the state hospital, saying that she was mad. She was placed in the care of a policeman who took her home. She tried to convince the policeman that she was not right and asked him to look at the dirty house, how impossible things were. He took her at her word and committed her.

CHARACTERISTICS OF THE PSYCHOSIS

at the Northampton State Hospital

Field of Attention :

No interest in surroundings, absorbed in her inner difficulties.

General Behavior

For several weeks after admission she remained in bed, saying that she was very tired and did not feel like dressing. She then became active and negativistic. She tried to pull the other patients out of bed. Then she refused all food, regurgitated everything that was given her, became untidy, mute, impulsive, would collect large quantities of saliva in the mouth and retain urine for long periods. She then gradually improved somewhat but remained retarded and confused and required a great deal of care.

Mood.

Depressed and apprehensive; for several months stuporous.

Intellectual functions

Retarded and confused; part of the time apparently disoriented and for a considerable period mute.

Social Attitude:

Negativistic and resistive, requiring a great deal of care; apprehensive, self-accusatory and at times suicidal.

Content of Thought

Philosophy of Life and Eschatology: Ideas unsystematized. Thought world was coming to an end, thought she was dead; had ideas of meeting the devil and even of shaking hands with him. She spoke of having stuffed the cathedral full of hay and then setting fire to it.

Self*importance: Talked of herself as an outcast and as a "stone woman" and as the only woman living in the world. She would repeat over and over again, striking herself on the chest, "I am made of stone - no good - no good." This idea of being made of stone and of being no good persisted during her residence in Northampton.

Symbolism and Hidden Meanings: The record states that she saw hidden meanings in things said and done on the street or by people that were going by the house.

Anxiety: Distinctly apprehensive. Thought something was to be done to her.

Guilt: She talked of herself as an outcast and as being no good.

Incapacitation: Not much in evidence.

Persecutory trends: She thought her food was being poisoned, that ~~xxxxxxx~~ people were talking about her, that reflections were being made upon her moral character and that she was being controlled.

Erotic Trends: Not much in evidence.

Religious Concern The ideas of death, of the end of the world, of guilt and of demonic influence indicate that she was absorbed in a problem that was definitely religious.

Integration:

Definitely hallucinated; regression ~~ka~~ of the profoundest type indicated by the ideas of cosmic catastrophe, of death and by the long period of mutism and untidiness.

Reaction Pattern

We have here a woman of strong vitality, ambitious, sociably inclined, loyal who for many years has from a sense of duty put up with a very badly psychotic husband. Her desires for self-realization have been blocked in every direction. Vocational and social success have been denied and there are no children. She has arrived at the period of life where she is facing the on-coming of old age without anything to make life worth living. She is probably a woman with a strong and unsatisfied sex urge which she may have had difficulty in bringing under control. The statements in regard to her ideas of persecution are to be accepted with caution as probably distorted by retrospective falsification, but they may well have been projections of that difficulty. In any case the acute disturbance seems to have meant here a definite deliquescence of the old sets and attitudes and an attempt at re-organization which has been to some degree successful.

CLINICAL LABEL

The ideas of death and cosmic catastrophe and the prolonged period of mutism and untidiness are quite in accord with the diagnosis of "cattonic dementia praecox". It is however to be pointed out that it is precisely this type of case which seems to correspond most closely to the "benign stupor" as described by MacGardv.

At the Summer Street Hospital
August 1924 - January '27

In August 1924 she was transferred from the Northampton State Hospital to the Worcester State Hospital and sent to the Summer Street Department. Here for two and a half years she remained on the back wards. From the record it appears that during this time she was confused, depressed and apprehensive and part of the time untidy. She was definitely hallucinated and seems to have done no work on the wards or in the institution. I can myself remember her distinctly in this period as a tall gaunt female who whenever I came on the ward would repeat over and over again, "I ban Swede. I ban Swede."

January 1927 - March 1928

Early in 1928 she showed marked improvement. I recall distinctly the day when I noticed in the congregation at Summer Street a tall fine-looking woman with rosy cheeks and animated expression. I can recall also my surprise when I discovered that this woman was no other than the same woman whom I had so often seen on the back wards. In appearance she was a woman of 35. Her actual age proved however to be fifty six. I made it a point thereafter to see her whenever I went to Summer Street and found her very responsive and interesting.

Things did not go so well with her as I had hoped. She was given a parole and allowed the freedom of the grounds, but after several weeks this was ~~taken~~ taken away. There were complaints from some neighbors about attempts on her part to gain the attention of passing school children by singing and dancing. She also took a pride in her personal appearance which was excessive. She once appeared at a dance in the chapel wearing an open-work sweater with nothing on underneath. She worked rosettes into her stockings and adorned herself in other somewhat fantastic ways. When reprovved she would become very emotional. For my own part however, I found her always responsive and open to reason. With reference to the children she said that she had always been fond of children and she loved to talk to them and to interest them. As to the finery, she explained that she had been so long a time cooped up that now she wanted to enjoy herself, At my suggestion she toned down the over-ornamentation very considerably. Thruout this entire period however she proved herself a rapid and efficient worker.

At the Belmont Street Hospital
March 1928 - June 1928

In March 1928 she was transferred to the Belmont Street Hospital to work in Dr. Ackerly's cottage. Dr. O'Mara was very sceptical as to the wisdom of this move. And she did show herself excitable and unstable. She was however an efficient worker. Most of the time she was cheerful and animated and was given to singing and writing poetry. But she was easily upset over trifles. She was however responsive to the interest shown in her and tried hard to get her emotions under better control. While at one time she showed very childish reactions and gave up her work at the cottage she came around quickly and on June 16 she was allowed to go out in care of her friends in Springfield.