BOOK REVIEWS

ESSAYS ON SIMEON E. BALDWIN. By Charles C. Goetsch. Storrs, CT.: The University of Connecticut School of Law Press. 1981.

Reviewed by Jacques M. Quen, MD

Simeon E. Baldwin was a founder and president of the American Bar Association, Professor of Law at Yale Law School, Chief Justice of the Connecticut Supreme Court of Errors and twice Governor of Connecticut. Lawyer-historian Charles C. Goetsch has written these three essays based on the contents of the recently available journals and personal papers of Baldwin. It is the last of these essays, *Is there any greater woe?: the institutionalization of Susan W. Baldwin for insanity during the late 19th Century*, that is of particular interest to the readers of this Bulletin.

Baldwin married Susan Winchester in 1865. During the course of the marriage, they had three children. The last was born in January, 1872. By June, 1869, after several journal entries referring to her suspiciousness and disturbing air of remarkable preoccupation, Baldwin recorded her first obvious delusion, as well as his fear that she might be insane. At this time, he was a young middle-to-upper-middle-class lawyer struggling to establish himself in a solo law practice. Hopeful that her behavior was merely "the result of nervous excitement in a nervous person," Baldwin encouraged Susan to visit country inns and small private sanatoriums designed for those with nervous temperaments, in contrast to those who were insane and institutionalized.

Baldwin often complained of her irritability, faultfinding, temper outbursts, mishandling of the children, rudeness and mercurial mood changes. Finally, in 1873, he had her admitted to the Pennsylvania Hospital for the Insane (now the Institute of the Pennsylvania Hospital). Goetsch makes no reference to any legal process in this admission. Four years later, with no improvement in her condition and against the advice of T.S. Kirkbride, the Superintendent and a founder of the Association of Medical Superintendents of American Institutions for the Insane (AMSAII), now the American Psychiatric Association as well as Susan's wishes, Baldwin, in a kind of desperation, authorized a pelvic examination under ether anesthesia, in the hopes that her condition was secondary to one amenable to surgery. As Kirkbride had predicted, the findings confirmed that she had a disease of the brain and not of the female organs. (Lest any reader complacently misinterpret these events as an indication of lay ignorance about medical matters, Baldwin was prompted to do this by a relative who was a New York physician. Hysterectomies as a treatment for insane women were in vogue then in the medical profession.) Five years after her admission, Baldwin had her transferred to the Hartford Retreat (now the Institute of Living). Susan remained there until her death in 1927. She survived her husband by a few months.

That is the skeleton of the narrative which is sensitively presented by Charles C. Goetsch. I have not included the agony endured by the husband, children and close relatives of Susan Baldwin while she lived at home and while they waited, hopefully, for her nervous problems to be relieved. They knew that a diagnosis of insanity would doom Susan to a lifetime of hopelessness, or, at best, a semi-invalid state, ever fearful and expectant of a recurrence of her condition. Furthermore, the stigma associated with familial insanity would weigh heaviest on her children and to a large extent on her sisters and their children. Relatives of the insane were suspect and unacceptable as marriage partners because insanity was "in their blood." It was well known that even if they did not become insane, they would pass the vulnerability on to their children.

As I was reading the descriptions of Susan's home behavior, I kept thinking of the phrase that one so often hears in cases of contested commitment, "for the convenience of the family." How accurate and yet how misleading. "Convenience" covers everything from relief from mild annoyances to relief from emotional uncertainty and serious environmental instability for the children to the question of survival for the family, collectively and individually.

There are few cases available with such a rich detail of clinical description from that period of American history. Baldwin includes in his diaries a fine capsule description of a transient Capgras syndrome in Susan, as well as the suggestion of a concurrent erotomania. Because of Baldwin's naive eye, and Goetsch's willingness to allow him to speak for himself, we get a far more human and vivid depiction of Susan during her deterioration than we are accustomed to have in our professional literature. We see schizophrenic deterioration as something far more complex than the development of a disease entity in a clinical case.

Unfortunately, some historical errors have crept in and while they do not do violence to the main thrust of the essay, they should be noted. Goetsch speculates that Kirkbride would have diagnosed Susan as suffering from Dementia Praecox, long before the term was introduced in American psychiatry. Kirkbride would have diagnosed her as suffering from Mania. Goetsch also refers to "Kirkbride's reputation as a superintendent who discouraged caring for chronic patients in favor of curing the recently ill" (p. 261). Kirkbride saw both groups of the insane as requiring and entitled to asylum (hospital) care under the supervision of a medical superintendent. His comments at the annual meetings of the AMSAII, especially in 1866 and 1867, left no room for doubt that he was outspokenly in favor of caring for the chronic and acute insane in the same institituions, of no more than 250 patients, and strongly opposed to separate facilities for them. Finally, Goetsch sees the views of David Rothman and Gerald N. Grob regarding the 19th century care of the insane as essentially similar. No knowledgable historian of American psychiatry would make such a mistake. Goetsch does not pretend to expertise in that area, nor do the errors do basic damage to his thesis.

It would have been interesting to have read Baldwin's thoughts and reactions to the legal process of committing his wife, especially since she objected to hospitalization. One also wonders what legal process, if any, was involved in her transfer to the Hartford Retreat. Goetsch makes no reference to these matters and it is possible that Susan Baldwin's hospitalization may have been accomplished informally. Her first hospitalization took place six years after Illinois passed a "personal liberty" bill mandating jury trials for all involuntary commitments and during the aftermath of Elizabeth Packard's attempts to have similar laws passed in other states.

One of the values of this essay is that it does provoke the reader to consider such questions, and others relating to the forensic psychiatry of the family as it applies to the not yet psychotic (or "dangerous" [whatever that means]) parent, spouse or child. This essay is worth reading. If you discuss it with spouse, friends or colleagues, you will, I predict, find it an unusually worthwhile experience. You will get a glimpse of the other side of the problem of the legal protection of the insane.