Development of psychotherapy as a method of mental disorders treatment at the Jagiellonian University and in Kraków before World War I

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Summary

This article presents the origins of Polish psychotherapy with a special focus on psychotherapy development in Krakow and at the Jagiellonian University. The history of Krakow psychotherapy starts with the foundation of the Psychiatry and Neuropathology Clinic of the Jagiellonian University in 1905. Doctors working in the Department of psychotherapy developed their skills through contacts with the Zurich University Psychiatric Clinic Burghölzli. At the same time psychotherapy, and psychoanalysis in particular, were raising more and more interest in Poland. The most dynamic development of psychoanalysis, reflected in the number of scientific publications, occurs in the years leading to the outbreak of World War I. This article presents brief portraits of the first Polish psychoanalysts (Ludwik Jekels, Herman Nunberg, Ludwika Karpińska, Stefan Borowiecki, Jan Nelken, Kraol de Beuarain). Many of them worked in Psychiatry and Neuropathology Clinic of the Jagiellonian University. Their scientific achievements and contribution to the development of the international psychoanalytic movement are described, as well as relationships with leading psychoanalysts of this period (Freud, Jung).

With the outbreak of World War I the research on and treatment of war neurosis was initiated in the Psychiatry and Neuropathology Clinic. Professor Piltz, the director of the clinic, together with his assistants (Borowiecki, de Beuarain, Artwiński) devised a unique in European psychiatry and highly efficient method of post-traumatic disorders treatment, in which psychotherapy was of key importance.

Key words: history of Polish psychotherapy, psychoanalysis
The term “psychotherapy” was introduced into the Polish language in the nineties of the twentieth century, which was the case in Western Europe as well. At that time it was defined as “a therapeutic method which utilises mental means to fight diseases” [1]. A commonly practised psychotherapeutic method then was a suggestion applied both during hypnosis and a conscious state [2]. It was recommended in the treatment of hysteria, neurasthenia and as a supplementary method in organic diseases. As far as the treatment of other mental disorders was concerned, the recommendations were not particularly clear as a considerable number of patients were not receptive to hypnotic suggestion. For that reason and because the symptoms frequently recurred after the hypnosis was applied, there were attempts to seek other methods that could help patients. As a result of these searches, a psychoanalysis understood as the first psychotherapy technique in its contemporary sense was born. At the beginning of the twentieth century the research centres in Vienna and Zurich were the most vibrant in the development of psychotherapy and psychoanalysis as a treatment method of mental disorders. The intensive development of psychotherapy was triggered in Krakow as well mainly due to the contact with a psychiatric clinic in Zurich.

Professor Jan Piltz, who was the first director of the Psychiatry and Neuropathology Clinic at the Jagiellonian University, is known to have used the term psychotherapy for the first time in Krakow and at the Jagiellonian University in the context of mental disorders treatment. It took place on 16th May 1905 during the lecture entitled “Psychiatry Position in a Row of Other Medical Sciences. Its Contemporary Tasks and Objectives” which was delivered at the opening of the Psychiatry and Neuropathology Clinic of the Jagiellonian University in Krakow [3]. While presenting the thesis, which is still up-to-date at present, he said: “The significance of psyche in the origin of numerous illnesses is indeed generally recognised and psychotherapy plays a key role in the treatment of very many illnesses,” adding that “psychotherapy in the broadest meaning of the word itself” is one of “the main contemporary means of therapy in psychiatry” [3]. It can be concluded that it was the time when the conditions for further development of psychotherapy were established in Krakow. That was also the moment when academic psychiatry in Krakow was born as no separate psychiatry department existed before and psychiatry classes were taught only as part of students’ internal medicine curriculum.

Professor Piltz was very well prepared for the task that was awaiting him. The task of establishing a contemporary university clinic, teaching psychiatry and neurology and educating future psychiatrists and neurologists. He completed medical studies in Zurich in 1895 and as early as during his studies he became a professor Forel’s assistant at the university psychiatry clinic Burghölzli. Having completed his studies, he spent ten years gaining professional and organisational experience in various European psychiatric and neurological centres (with professor Bechterew in Petersburg, professor Dejerine at Salpêtrière in Paris, professor E. Olivet and professor A. Martin in Geneva). Between 1898 and 1899 he re-organised the Burghölzli clinic at the request of Bleuler. Then he became the deputy of professor Mahaim, the director of the psychiatry clinic in Lausanne. In 1901 he settled down in Warsaw and established in the Praga hospital, nervous diseases ward which he became the head of.
Shortly after the appointment, professor Piltz became very active and started lecturing at the medical faculty of the Jagiellonian University. In November 1905 he opened a free Royal-Imperial Outpatient Department of Nervous and Mental Diseases Clinic at the Jagiellonian University in Krakow. The department was extremely modest having only three rooms at its disposal and was located in the basement of the Ophthalmology Clinic building at Kopernika Street 38. The patients were seen by prof. Piltz and his first assistant, dr Adam Rydel (1872–1914). At the same time prof. Piltz constantly was trying to secure funding for a new clinic, the construction of which commenced as late as in 1908. The patients suffering from psychiatric and neurological problems were seen at the outpatient department, which is certified by case studies presented at the meetings of Krakow Medical Association [3]. At the outset the most commonly practised psychotherapeutic method at the outpatient department was hypnosis and non-hypnotic suggestion conducted mainly by prof. Piltz [4, 5]. As Europe witnessed the development of psychotherapy, its application at the outpatient department was developing as well. In 1909 psychoanalysis was used to understand the origins of patient’s symptoms [6] and in 1912 the outpatient doctors commonly applied the psychoanalytical method in treatment as mentioned by Herman Nunberg in his autobiography (e.g. “The girl whom I had in psychotherapy on a psychoanalytic basis (…)”) [7].

It was owing to prof. Piltz’s conviction about psychotherapy usability in treatment that the psychotherapeutic method at the outpatient department could experience such dynamic development. That conviction was established at the Swiss clinics and mainly through the teachings of August Forel and Eugen Bleuler. Prof. Piltz strove hard to enable his assistants to gain clinical experience similar to his and therefore as he puts it: “desirous of rendering possible to his co-workers of that period the acquisition of clinical experience and facilitating their acquaintance with the latest achievements of science, [I] succeeded in obtaining for some of them the position of salaried, permanent doctors in neurologic and psychiatric institutions in Switzerland” [8]. Prof. Piltz’s assistants “got infected” with psychoanalysis after the Burghölzli clinic experience and then they would go back to their home institutions and apply it in treatment. At that time Vienna and Zurich (Burghölzli) were the centres where the development of psychoanalytic theory and methods was the most intense but only in Zurich it was applied in the treatment of patients with more severe disorders and in inpatient psychiatric treatment.

The first assistant who went from Krakow to Burghölzli was Stefan Borowiecki (1881–1937). Having worked earlier in Kochanowka, he applied for work in Krakow to have possibility of gaining professional experience in Switzerland. He completed a traineeship in Reinau and then spent two years in Burghölzli where he conducted research on nervous system anatomy under the supervision of Monakow. That was the time when he met Bleuler and Jung and “got hooked up” on psychoanalysis [9]. He was very enthusiastic about a psychoanalytic examination of patients. He believed that “no previous method encompasses the wholeness of a mental life reaching its most secretive mysteries as the psychoanalytic method does” [10]. After completing his traineeships in Switzerland, Borowiecki returned to Krakow where he became an assistant at the Psychiatry Clinic at the Jagiellonian University from 21st October 1910 to 4th March
1919. In his later post-war research work his interests included psychoanalysis, the heredity of mental disorders and the genesis of neuroses including traumatic neuroses for which he drew experience from his work with patients during World War I [11]. He established the Psychiatry Clinic at Poznań University as well. In his works he referred frequently to Jung [11]. He applied psychoanalysis in his work with patients until the end of his life and utilised patients’ drawings in a dream analysis [11, 12].

Another assistant posted to Burghölzli was Jan Nelken (1878–1940) who was employed at Piltz’s outpatient department since June 1908. Before going to Switzerland, his patients’ presentations and the scientific work he carried out demonstrate hardly any interest in psychotherapy [4, 13]. He was appointed as an assistant at Burghölzli on 10th April 1909. During his stay in Switzerland he engaged in the work of the psychoanalytic movement which was being developed at that time. He was one of the founders of the Zurich group of the International Psychoanalytical Association and the first Pole who was a member of the International Psychoanalytical Association [14]. In September 1911 along with Ludwik Jekels and Mira Gincburg he was one of the three Polish participants of the Psychoanalytic Congress in Weimer during which he was the only Polish speaker who made a presentation entitled “On Fantasies in Dementia Praecox” [15]. Freud mentions him in “The History of the Psychoanalytical Movement”: “A deep impression was made on all hearers at one of the psycho-analytical Congresses when a follower of Jung demonstrated the correspondence between schizophrenic fantasies and the cosmogonies of primitive times and races” [16].

The above mentioned research on the correlation between mythology and fantasy in schizophrenia was originated by Jung in winter 1909. The assistants employed at Burghölzli: Nelken, Honegger and Spielrein assisted in the research. The outcome of Nelken’s work was tree presentations at the gatherings of the Zurich group of the International Psychoanalytical Association, the above mentioned presentation in Weimer together with three scientific publications “Psychological Study of Patients with Dementia praecox” [17], “Analytical Observations on Schizophrenic’s Fantasies” [18] and “Word Distortions in Schizophrenia” [19]. We know that Jung valued greatly the research results of “his pupil” as it can be concluded from the correspondence he engaged into with Spielrein (“a very nice paper by Dr Nelken will be published” [20]) and with Freud (“There are two or three Dementia praecox analyses still to come, one of which (Nelken’s) is extremely important” [21]). The publication was met with a very lively reaction of the psychoanalytical circles. It was criticised by Tausk in Internationale Zeitschrift fur Arzliche Psychoanalyse [22] and then defended by Jung in the same journal [23]. These works allowed for Nelken to be called the first Polish Jungian.

It seems that the storm that was caused by the articles and the growing misunderstanding between Jung and Freud did not affect Nelken directly. In October 1911 Nelken was already in Paris completing his last traineeship before returning to his homeland. He never returned to the Royal-Imperial Outpatient Department and in 1912 he started working in Kulparkow near Lviv. During World War I he worked in a garrison hospital in Lviv and after the war he worked in Warsaw. He was active in psychoanalytical research until the outbreak of World War I, his last article was “Psychicoanalytical Study of Neurotic Diseases” [24]. In this publication he presented the
analytical understanding of the schizophrenia symptom origination with reference to Jung’s theories of collective unconsciousness. He wrote: “Psychoanalytic examination of patients with Dementia praecox conducted by Honegger, Spielrein, Itten and me confirm Jung’s assumptions. Those works include numerous examples of analogies between the patients’ fantasies and mythological and folklore creations” [24]. After World War I he got absorbed into different subject areas (forensic psychiatry, pacifistic publications). However, in his clinical practice he always remained a follower of psychoanalysis and at the 11th Congress of Polish Psychiatrists “he emphasised the significance of psychoanalysis in neurotic sciences, which was observed especially during war experience demonstrating ad oculos mental mechanisms” [25].

Herman Nunberg (1884–1970), who was discussed before, completed medical studies in Zurich and worked at Burghölzli while still being a student. He did his doctoral degree and participated in associative experiments under the supervision of Jung in the same institution. He researched somatic phenomena that accompanied associations [26]. Not only was Nunberg familiar with the Jungian theory of complexes, but he also knew Freud’s publications. In 1911 he became a member of the Zurich group of the International Psychoanalytical Association [27]. At the turn of 1911/1912 he decided to move back to Krakow and take up the position in Piltz’s Clinic [7]. He became interested in psychoanalysis during his time at Burghölzli and while working on his doctoral thesis. When he worked at the Psychiatric-Neurological Clinic of the Jagiellonian University, he also was employed in summer months at dr Jekels’ health resort in Bystra which was the first health centre in Poland implementing psychoanalytical method in the treatment of its patients [7]. He worked at the Jagiellonian University until the outbreak of World War I when he needed to leave Krakow due to political reasons. He moved to Vienna where he became one of the most prominent figures of the psychoanalytical movement.

The interest in psychotherapy was widespread not only in Krakow but also in the whole of the country. Despite the fact that Poland was partitioned among three countries (Austria, Germany and Russia), the circles of Polish neurologists, psychiatrists and psychologists strove for integration and the exchange of views. At the 1st Congress of Polish Neurologists, Psychiatrists and Psychologists, which took place on 11th–13th October 1909 in Warsaw, the two lectures on psychotherapy were delivered during one psychiatrist session: Jaroszyński’s “A Few Remarks on Psychotherapy Case” and Jekels’ “Psychoneurosis Treatment with Freudian Psychoanalytic Method and Casuistry” [28]. Jekels’ presentation instigated a stormy discussion during which the participants divided into two groups: the critics and staunch supporters of Freud’s and Jung’s theories [29]. After the session the discussion participants who declared themselves to be “Polish Freudsians” (Jekels, Karpińska, Łuniewski, Sycianko, Rychliński, Kępiński, Chodźko) sent out telegrams to Freud and Jung to express their respect. That fact can be traced in the correspondence between Freud and Jung as on 17th October 1909 Freud wrote: “A few days ago I received from the first Congress of Polish Neurologists a telegram of homage signed, ‘after violent debate,’ by seven illegible and unpronounceable Poles. The only one of them known to me is Dr Jekels; Frau Dr Karpińska, I hear, has studied with you. I have never heard of the five others (…)” [21]. On 12th October Jung also
received, from the same Poles, a telegram in which he read that: “Polish Freudians 
send from the Congress now in session assurances of their highest consideration” [30].

Ludwik Jekels (1867–1954), who was mentioned before on two occasions, can 
be unhesitatingly called the first Polish Freudian. He graduated with a medical degree 
from the University of Vienna. He wanted to practise his profession in Polish language 
so between 1897 and 1912 he ran a health resort in Bystra near Bielsko [31] where 
from approximately 1905 started to practise psychoanalysis. All that suggests that it 
was the earliest recorded application of psychoanalysis in Poland. He sparked interest 
in psychoanalysis while attending Freud’s lectures at the University of Vienna from 
1905. The impression he got about the method he said was as follows: “Although I had 
studied with the leading medical authorities of the time, the world that was opened to 
me in Freud’s lectures was totally unknown to me. An enthusiasm I had never expe-
rienced before made me go to Vienna year after year” [32]. At that point he got into 
direct contact with Freud. From his presentation at the aforesaid convention in Warsaw, 
it can be concluded that Jekels had a good knowledge of psychoanalytic methods that 
were utilised at that time together with his clinical experience [29]. The contacts with 
Freud gradually became so friendly that Freud was supposed to spend the summer of 
1910 with his family at Jekels’ villa. He made a note of it in the letters to Jung and 
Ferenczi (e.g. “From 14th July to 1st August we shall very probably be in Bistrai near 
Bielitz, staying with our colleague Jekels” [21]) Eventually only the two daughters of 
Freud, Zofia and Anna, and his sister-in-law Minna Bernays spent the holidays with 
Jekels and his family. Minna discouraged Freud from coming as she complained about 
the health resort conditions and its guests [33]. At that time Jekels also stayed in close 
contact with Jung who recommended to him a few Poles interested in psychoanalysis 
and he would tell him about his dreams [21].

Jekels became the greatest propagator of psychoanalytic ideas in Poland and 
a Polish translator of Freud’s books (“On Psychoanalysis” [34], “Psychopathology 
of Everyday Life” [35], “Three Dissertations from Sexual Theory” [36]). In Freud’s 
view: “the introduction of psychoanalysis into the science and literature of Poland is 
chiefly due to the endeavours of L. Jekels” [16]. In 1911 Freud sent Jekels to Krakow 
with the mission to propagate psychoanalysis in the form of delivering a series of 
lectures that would make medical professionals more familiar with the psychoana-
lytical concept (e.g. “On Decisive Factor in Patient-Doctor Relation” delivered at 11th 
Convention of Polish Doctors and Naturalists in Krakow, July 1911 [37]; “On Freud’s 
Psychoanalysis” at the gathering of Krakow Medical Association in February 1912 
[38]). On 5th October 1911 Freud wrote to Jekels: “Thank you for all your efforts. 
We owe any success in Poland to your work. I am very curious how your clinicians 
would see psychoanalysis. The only drawback related to the pleasure of your apostle 
work in Krakow is the fact you are not able to attend our meetings” [33]. The part of 
this “apostle work” was “Sketch on Freud’s Psychoanalysis” published in 1912 [39]. 
In the publication Jekels attempted to present key foundations of psychoanalysis in 
an accessible manner drawing from the experience of the lectures he delivered. Jekels 
was famous for creating excellent illustrations of psychoanalytic theories by means of 
examples from his own practice. They were so accurate that Freud decided to quote
Development of psychotherapy as a method of mental disorders treatment

some of them in “Psychopathology of Everyday Life” [40]. Having sold his health resort, at the end of 1912 Jekels relocated to Vienna where he became one of the most prominent figures of the Vienna group and a close associate of Freud. The reasons for such a sudden change could be explained twofold. The prevailing belief is that in January 1910 Jekels suffered from depression which resulted from his wife’s suicidal death and he did not wish to stay any longer in a place that would remind him of the tragic event [33]. Indeed, in October 1912 he started psychoanalysis with Freud “initially due to therapeutic reasons” [41]. Nunberg reports another explanation for this fact in Jekels’ short biographical note in “Minutes of the Vienna Psychoanalytic Society” [42]. He states that due to the shift towards psychoanalysis the income from Jekels’ health resort dropped dramatically [42], which was related to the patients’ lower interest in that type of therapy if compared to traditional methods (e.g. water and sun baths, massages) and a lower number of patients who could be treated during a single stay. However, there is one more possible explanation: Jekels began to be more and more involved in the activities of the Vienna Psychoanalytic Society, which involved more frequent travels to Vienna, and his closer relationship with Freud must have collided with his running of the health resort. Furthermore, Jekels’ mission he was dispatched on to Krakow by Freud ended in failure [33]. Despite the apparent interest in psychoanalysis demonstrated by Poles, no branch of the International Psychoanalytical Association was established either in Krakow or any other Polish city. At some point Jekels had to choose the path of his further professional development and decided to relocate to Vienna and collaborate more closely with his master.

Another figure that should not be missed is Ludwika Karpińska (1872–1937) who fervently defended Freud’s and Jung’s views at the 1st Congress of Polish Neurologists, Psychiatrists and Psychologists. She was a psychologist by education and graduated in Zurich in 1909. Her first contact with psychoanalysis was during Jung’s and Bleuler’s lectures at the University of Zurich (“Additionally, I attended lectures on (...), psychiatry, psychopathology and hysteria psychotherapy.”) [43]. In her doctoral thesis she researched experimental psychology and stereoscopic vision and one of her probants was dr Stefan Borowiecki [43]. She collaborated also with Jung in associative experiments in which she dealt mainly with the psychogalvanic phenomenon [44].

The views expressed by Karpińska are indicative of her good familiarity with Freud’s publications and her belief in the usability of a practical psychoanalysis application. She stated that “Freud’s psychoanalytic method reaches the deepest as it explains the origins of disease phenomena and their correlations. From therapeutic perspective it brings the greatest change in an ill individual. The complete cure of psychoneuroses is possible with the psychoanalytic method if the sick individual is not going to be satisfied with the analysis of present complexes but will persist in analysing himself, which will prevent him from developing new pathological complexes” [29]. She also emphasised the fact that psychoanalysis is a part of curricula for psychiatrists, psychologists and educators at the universities in Basel and Zurich [29]. Karpińska acted in favour of psychoanalysis development and published in Polish and German until the outbreak of World War I [44–48]. In the history of the world psychoanalytic movement she left an eternal mark as the person who established psychoanalysis on
psychology grounds. Jones, in the first biography of Freud, pointed out that it was Karpińska who was the first to discover similarities between Freud’s and Herbart’s ideas [49] and quoted her article “Psychological Bases of Freudism” [48]. Because of the article and speeches made at the meetings of the Vienna Analytical Association, Freud would call her “Polish lady philosopher” [50]. From 1919 in “Interpretation of dreams” Freud quoted from her article an example of a senseless word present in a dream (“Svingnum elvi”) [46, 51]. After World War I Karpińska went onto the field of children’s psychological diagnostics and she did not return to activities which would support psychoanalysis.

Having presented the most significant figures in the development of Polish psychoanalysis and psychotherapy, let us go back to Krakow of 1912. The psychiatric outpatient department already operated in a new clinic building although it was not fully completed yet [7]. The doctors who worked there (Stefan Borowiecki, Herman Nunberg) were oriented at conducting psychoanalytical psychotherapy. Ludwik Jekels propagated psychotherapy in Krakow. All their efforts were crowned with the organisation of the 2nd Congress of Polish Neurologists, Psychiatrists and Psychologists which took place on 20th–23rd December 1912 with a separate session entirely devoted to psychoanalysis (“it made Freud’s theory one of the main points of the discussion” [52]). As it turned out, the session “had the highest number of registered speakers and was the cause of the most heated discussion” [53]. Prof. Piltz had also a reason to be proud of as all the discussions took place in the clinic built because of his efforts.

The speakers that contributed to the psychoanalytical session were primarily the key figures of the psychoanalytical movement of those times: Stefan Borowiecki (“Psychoanalysis and Its Criteria”), Ludwika Karpińska (“Psychological Bases of Freudism”), dr Bronisław Bandrowski (“Psychoanalysis in Presence of Key Psychological Theories”), Ludwik Jekels (“Libido Sexualis: Character and Neurosis”), Waclaw Radecki (“Psychobiological Elements in Psychoanalysis”), Karol de Beaurain (“The Symbol”), Jan Nelken (“Psychoanalytical Studies of Mental Diseases”) and Herman Nunberg (“Unfulfilled Wishes According to Freud’s Teachings”) [54]. Many of the presentations were subsequently published in international psychoanalytical journals and became the canon positions in the history of psychoanalysis [48, 55]. Another aftermath of the congress were numerous psychoanalytical articles published in Polish language in 1912–1914 [10, 24, 45].

One of the speakers was Karol de Beaurain (1867–1927) who had his doctor’s diploma nostrified at the Jagiellonian University on 11th June 1896. Then he worked as a doctor in Zakopane, Lviv and Poronin. It is unknown how he gained interest in psychoanalysis. He definitely practised it in Zakopane where he was listed as a medical professional who treated nervous diseases in villa Oksza from November 1911 [56]. The most famous of dr Beaurain’s patients was Witkacy who underwent psychoanalysis in 1912–1913. In a letter to Helena Czerwijowska Witkacy wrote: “I go to Boren’s. The psychoanalysis is about to be completed but I have not gained any more faith in it. He keeps telling me I have an embryo complex – with no effect” [57]. After many years Witkacy perceived the moment of starting the therapy in a slightly different manner. In his book entitled “Unwashed Souls” which he dedicated to his former analyst
he wrote: “I owe the familiarity with Freud’s method, the so called psychoanalysis, to my parents’ friend (somehow my friend as well considering the big age difference), dr Karol de Beaurain whose memory with deep gratitude, respect and admiration I dedicate this work”[57].

Beaurain published merely one article in an international psychoanalytic journal “On Symbol and Mental Conditions of its Origin in a Child” [55]. However, it created a storm the same way Nelken’s articles did. In a letter to Freud, Fereczi wrote about it: “Since it is written very one-sidedly in favour of Jung’s and Silberer’s position, I permitted myself to append to this paper a small essay on the same subject” [50] (“The Ontogenesis of Symbols” [58]). This Ferenzi’s short article immortalised de Beaurain’s views and classified him as another Polish Jungian. During World War I dr de Beaurain was an assistant at prof. Piltz’s clinic in Krakow where he treated war neuroses and from 1921 he became the head of ward in Dziekanka and later in Owinska.

The period of intensive development of psychotherapy and psychoanalytic movement in Poland was interrupted by the outbreak of World War I on 28th July 1918.

When the war started, Krakow was converted into an Austrian fortress. In July 1914 prof. Piltz opened his dreamed-of clinic but he did not have the opportunity to see any civilian patient in it. During the war the clinic functioned as a neurological-psychiatric ward of the Royal-Imperial Fortress Hospital in Krakow. Throughout World War I prof. Piltz with his assistants, dr Artwinski, dr de Beaurain and dr Borowiecki treated war neuroses. He wrote: “In the course of the war [WWI] about 11,000 soldiers suffering from nervous and mental ailments received treatment in the Clinic. Among this number were about 3000 cases of nerve-shock, caused by the horrors of war” [8]. With the vast influx of soldiers around 1916 he organised the first, followed shortly after by the second, specialist ward of war neurosis treatment. The increase in the number of patients with symptoms of war neurosis receiving treatment in the Clinic enabled him to conduct research on their diagnostics and treatment in which psychotherapy was of key importance [59].

Piltz recommended an individual therapeutic course for every patient. As he wrote: “The most effective and significant treatment method (…) is psychotherapy. It consists in, above all, calming the sick person down, gaining their trust, inducing their trust in their own capabilities, renewing their power of will, solving and soothing their pathological affective state, correcting their pathological mental correlations and removing their pathological autosuggestions” [60]. He recommended the use of an individually tailored “indirect suggestion” which should be attributed with “the direction and dynamic action” in dr Beaurain’s terms. Today this treatment method would be dubbed as a short-term psychodynamic psychotherapy. “The individually applied psychotherapy” was complemented with supplementary methods in the form of speech or walking exercises and electrotherapy [60]. Piltz’s views were shared by his team. Artwinski wrote: “Each of those sick people requires psychoanalysis in its broad sense” [61]. As a result of treatment the team obtained very good results in the subsidence of symptom in “almost all cases” [60].

To sum up, the Psychiatric-Neurological Clinic of the Jagiellonian University in Krakow underwent the rapid development of psychotherapy practice between 1905...
and 1914. The views of the clinic director, prof. Piltz, and the intensive contacts with the Swiss psychiatric clinics, Burghölzli in particular, allowed for the expansion of the psychotherapy forms, which had been practised so far, and the inclusion of psychoanalysis in the portfolio. The Clinic personnel actively participated in scientific events that focussed on psychotherapy (congresses of Polish neurologists, psychiatrists and psychologists) and they would attend the lectures of Ludwik Jekels, the first Polish Freudian. Furthermore, they contributed with numerous scientific publications on psychoanalysis. The psychotherapeutic skills of the doctors employed in Krakow Neurological-Psychiatric Clinic also facilitated the inclusion of the psychoanalytical technique into the treatment of war neuroses during World War I and let them obtain excellent results in the course of their treatment.

The time of World War I is the first period that interrupted the development of Polish psychoanalysis. Physical and mental aftermaths of long-lasting warfare, political changes and new demands arising from the need to rebuild the Polish state imposed different duties on the activists of the Polish psychoanalytic movement, who were experienced psychiatrists and psychologists at the same time. Jan Nelken focussed on forensic psychiatry and pacifist publications, whereas Karol de Beaurain assisted in the recreation of psychiatric care in the former Prussian partition. Ludwika Karpińska committed herself to the psychological diagnostics of children and the development of psychotechnics and Stefan Borowiecki explored the concept of the genetics in mental disorders. Ludwik Jekels and Herman Nunberg stayed on emigration in Vienna and contributed to the development of the international psychoanalytic movement. On the other hand, all of them remained eternally convinced about the significance of psychoanalytic psychotherapy, which is corroborated by their post-war public speeches, publications and associates’ views. After the war some sort of the second generation of Polish psychoanalysts also emerged. They acted in Poland, already a freed country, and carried on with the efforts in the field of psychoanalysis of their senior colleagues i.a. Gustaw Bychowski, Roman Maruszewicz, Maurycy Bronsztajn and Tadeusz Bilikiewicz. It was only World War II that prevented the development of Polish psychoanalysis for numerous years. Many psychoanalysts were exterminated (i.a. Jan Nelken) or were forced to emigrate because of the Jewish origin. The post-war times did not facilitate the rebirth of Polish psychoanalysis either as in the fifties of the 20th century the communist authorities regarded it as “an imperialist-bourgeois ideology” and banned its practice [62]. Bilikiewicz cautiously reports on that in “Psychology of a Dream” when he says that “external circumstances did not allow me to start a psychoanalytical practice” [63]. When analysing the historical background of the development of the Polish psychoanalytic thought, at present it seems hardly astonishing that the achievements of the first Polish psychotherapeutic and psychoanalytical movement representatives were consigned to oblivion.
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Development of psychotherapy as a method of mental disorders treatment


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