

# The concept of mental health and mental illness: Historical and philosophical roots

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**Why do we succumb repeatedly to foolish temptations against our better judgment?**

**Historically, professionals and the public alike considered behavior within the concepts of:**

- **Moral inferiority**
- **Vanity**
- **Dissipation**

**But today mental health and mental illness are a necessary part of the training of psychiatrists, psychologists, social workers, teachers, nurses, and ministers, who serve the needs of the troubled, but it is also a significant part of the curricula of all colleges.**

# The origins



**Accounts of persons with mental disorders as well as treatment efforts are dated back to ancient Mesopotamia, Egypt and Greece.**

**It was always part of medicine in spite of religious and spiritual beliefs of the time.**

**Its birth as a modern discipline can be traced to the late 18th and early 19th century and the person who is considered to have defined it as a separate discipline within medicine is Philippe Pinel (1745-1826) in France,**

**Pinel was neither the only nor the first to introduce this kind of reforms in the treatment and care of patients, with Vincenzo Chiarugi (1759-1820) and William Tuke (1732-1822) having similar ideas.**



The word **‘psyche’** comes from ancient Greek, and it survives until today.

Etymologically it probably comes from the verb **‘ψύχειν’** (psykhein) which means **‘to blow, to cool’** and in turn comes probably from the proto-indoeuropean root **‘bhes-’**.

Subsequently it includes the meaning **‘to breath’** or **‘to be alive’**.

The word also referred to butterfly

Psyche is often depicted as a **butterfly** or with butterfly wings.

The concept is probably similar but not identical in meaning with the Latin **‘animus’** and the Hebrew **‘nephesh’**.



# Psyche, Eros and Thanatos (Soul, Love and Death)



**By the 19th century, beginning in France, the term ‘alienist’ was used for a psychiatrist.**

**The term comes from French word ‘aliéné’ (meaning: insane) which in turn comes from the Latin ‘alienus’ or ‘alius’ meaning the foreigner, stranger, different (similar to Greek ‘άλλος’).**

**The root comes from the proto-indoeuropean ‘al-’ (meaning: beyond)**

**Thus, an alienist of the time was a physician who acted as an intermediary between the society and mental patients and by defining their relations was the agent of the patients’ alienation**

The term **‘Psychiatry’** was coined in Germany by Johann Christian Reil (1759-1813) in 1808

It was derived from the Greek words **‘ψυχή’** (psyche meaning the soul) and **‘ιατρική’** (iatrike meaning the discipline of medicine).

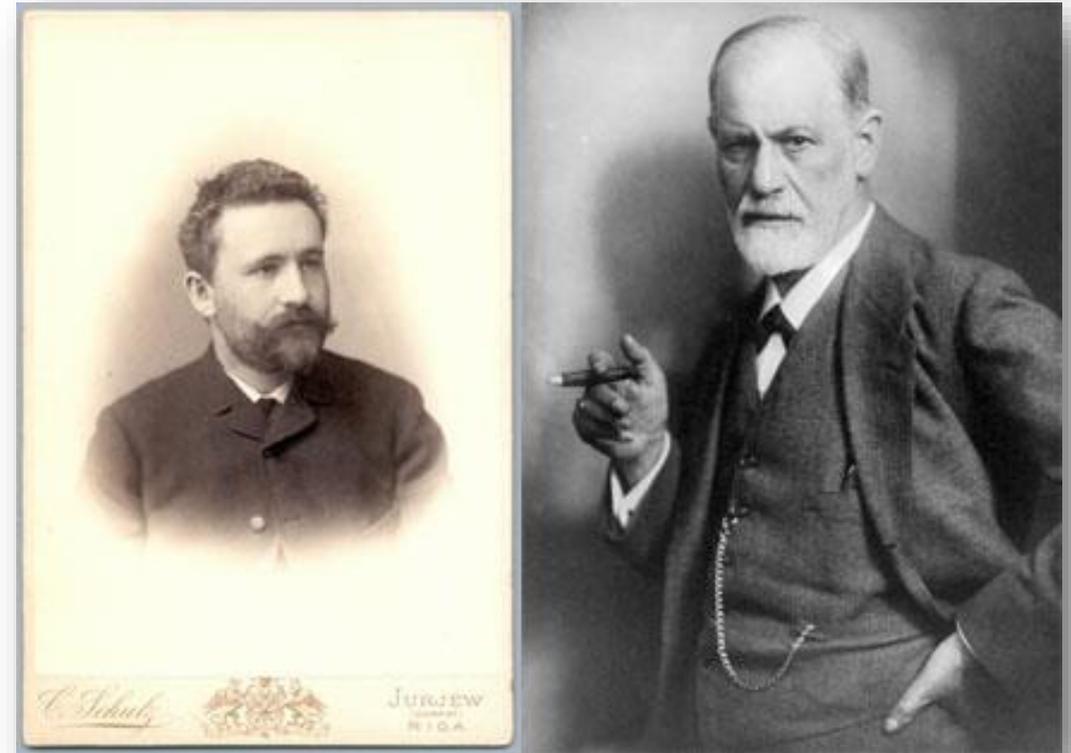
Thus a verbatim translation for Psychiatry is **‘medicine of the soul’**



As no brain damage was identified, this led to

- The development of a precise psychiatric nosology by **Emil Kraepelin (1856-1926)** and of
- Psychoanalysis by **Sigmund Freud (1856-1939)**.

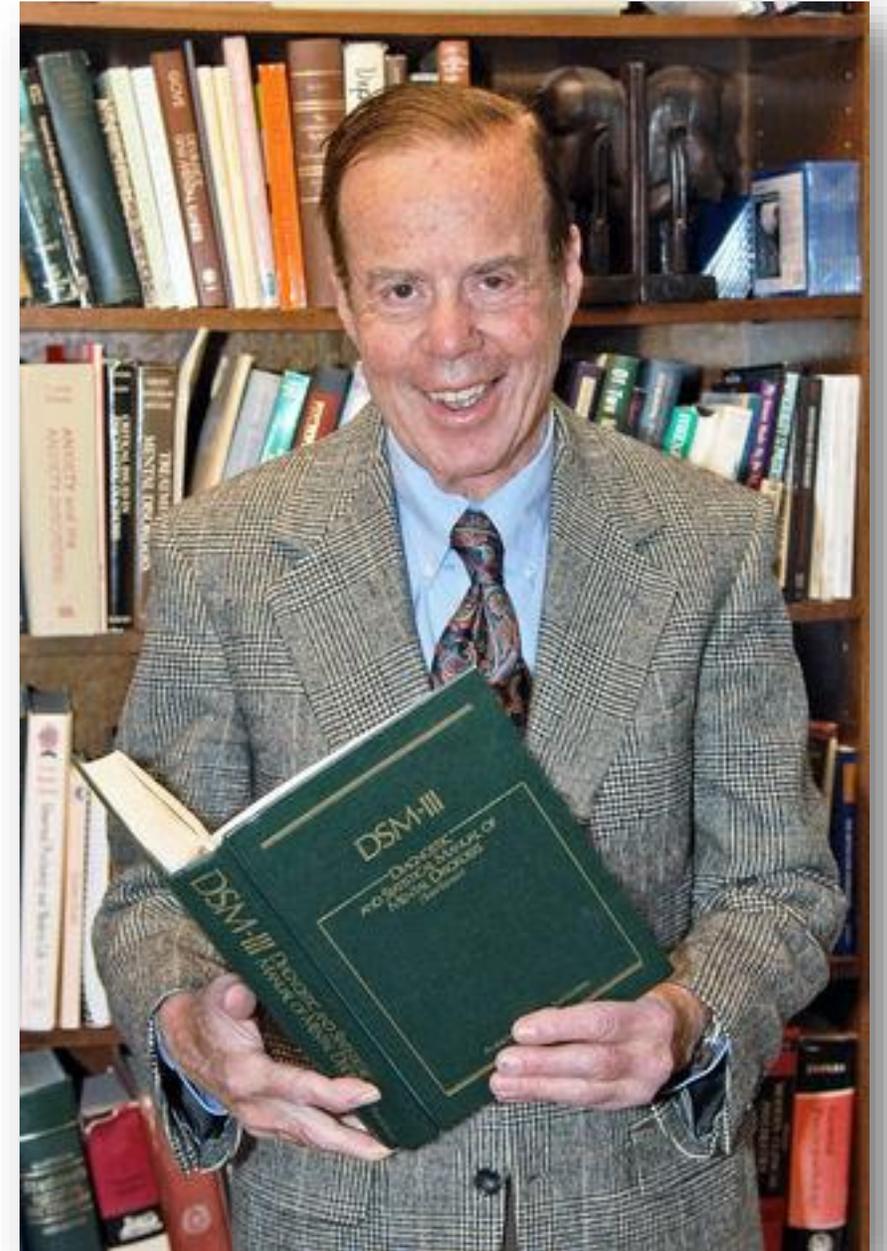
It is interesting that while for the general public Psychiatry identifies with Freud, his theories are academically obsolete today while the legacy of the unknown-to-the-public Kraepelin is absolutely dominant today



However, during the second half and until today it was dominated by the development of precise tools and operationalized criteria for the diagnosis and the development of psychopharmacological agents for the treatment of mental disorders.

The contribution of **Robert Spitzer (1932-2015)** in this process was decisive.

*Wilson M (1993) Am J Psychiatry 150 (3):399-410*



An additional important development was the introduction of a wave of **pragmatic methods of psychotherapy** as a substitute for psychoanalysis, pioneered mainly by ....



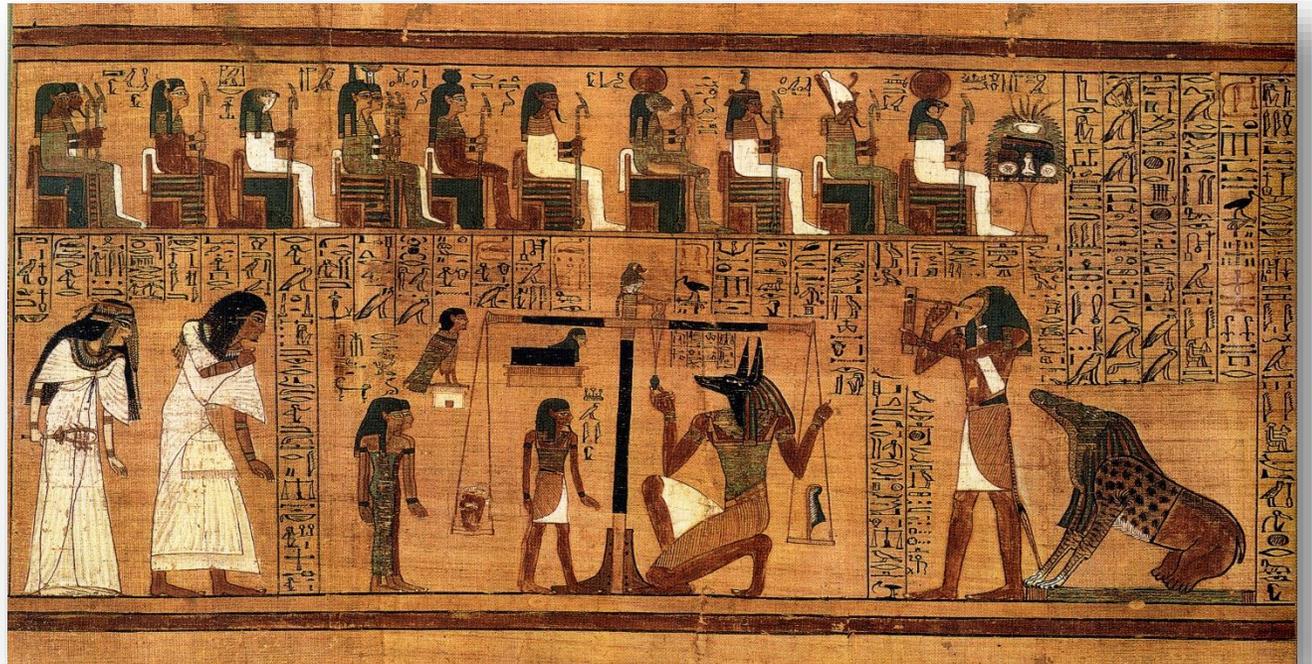
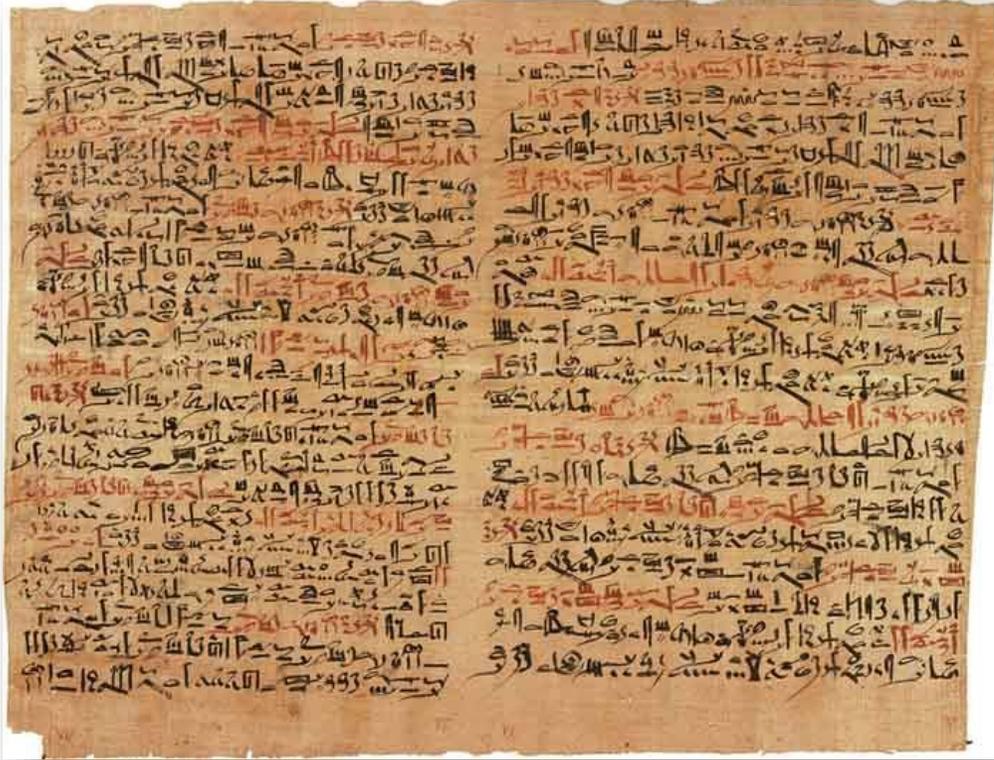
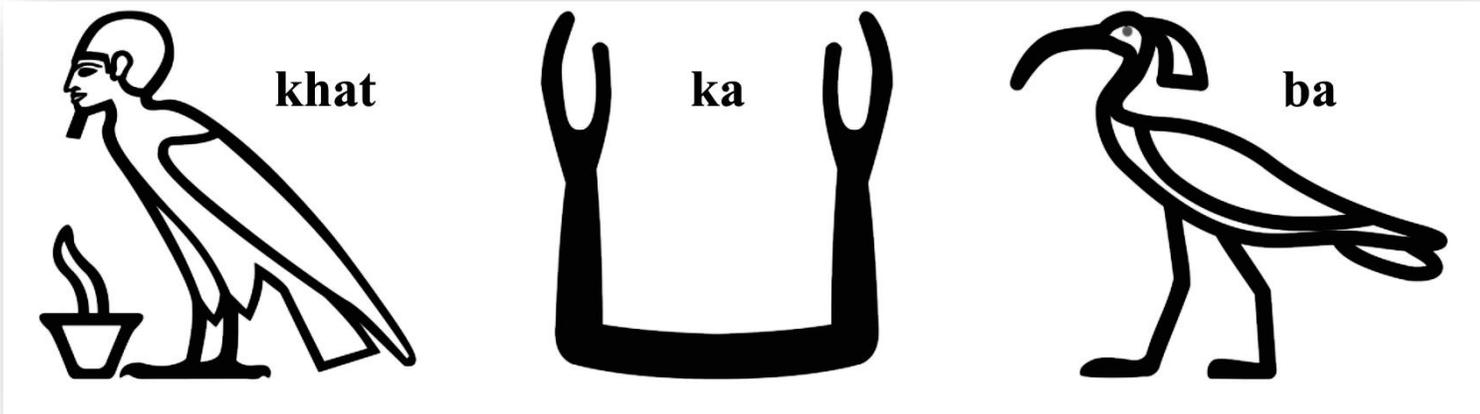
**Albert Ellis (1913-2007) and Aaron Beck (1921- )**

**These approaches would eventually have a far greater impact on the discipline of Psychology which currently is largely based as a profession on the implementation of these treatment options**

*Beck A (1976) Cognitive therapy and the emotional disorders. International Universities Press  
Ellis A (1958) Rational psychotherapy. J Gen Psychol 59 (1):35-49*

# The philosophical roots





Eber's papyrus (book of the heart); Egypt c. 3000 BC

**The efforts to understand the nature of human kind and especially the nature of the human mind and behavior can be traced several thousand years ago.**

**They are characterized by**

- **Complex turns**
- **Unexpected influences and alliances**
- **In the beginning by the lack of the scientific eye and method.**

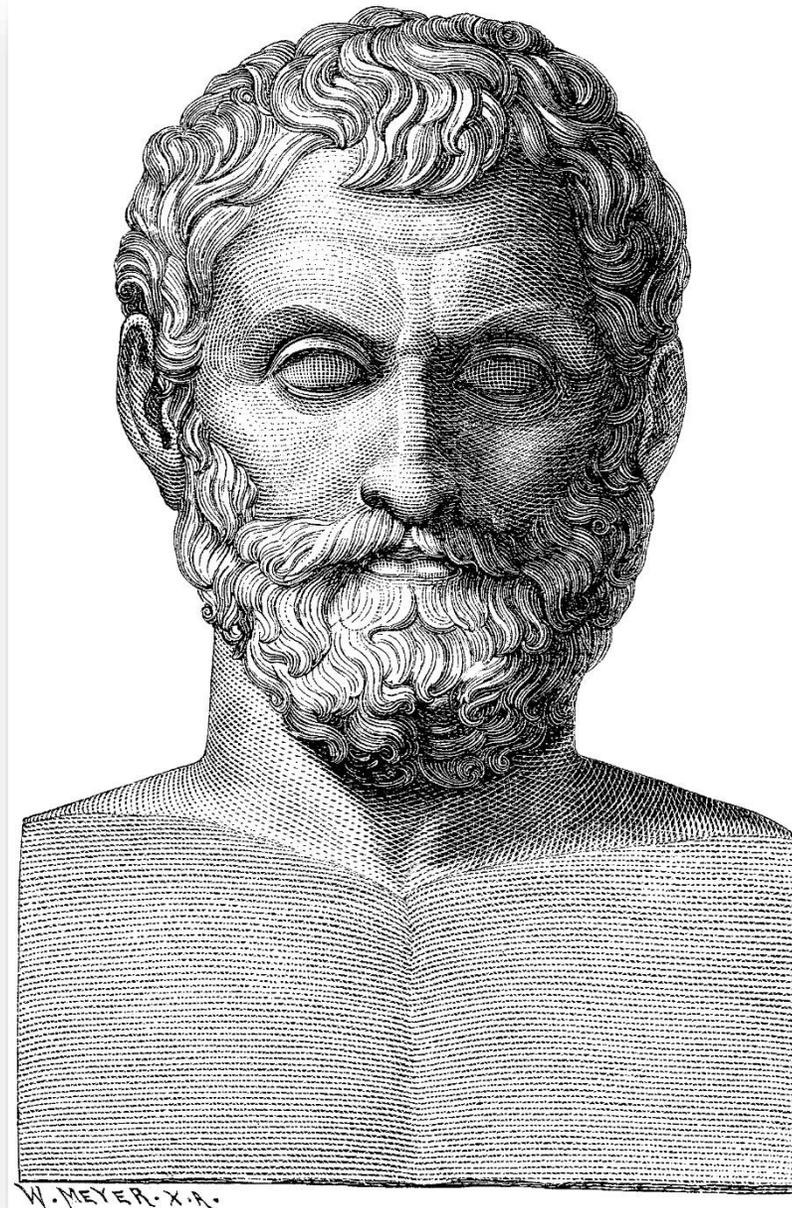
**Early attempts are sacred rather than scientific or philosophical**

**Can be classified into**

- **Animistic**
- **Mythological**
- **Demonological (religiousness of late antiquity with strong ethical elements)**

# Thales of Miletus

Illustration from "Illustrerad  
verldshistoria utgifven av E. Wallis.  
volume I": Thales.



**It was Pythagoras (580-496 B.C.) who suggested for the first time that**

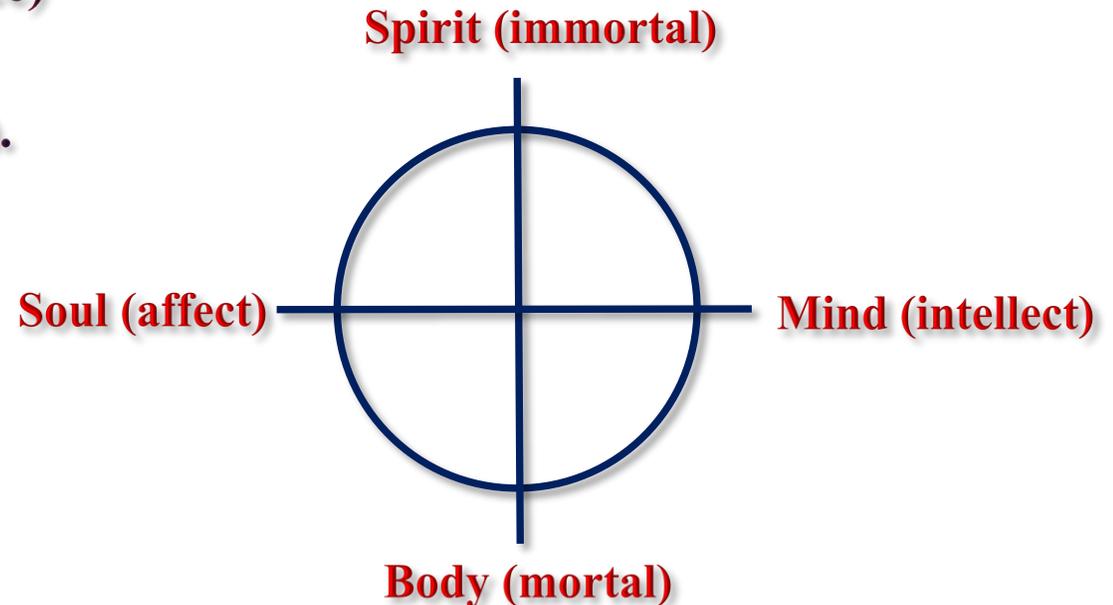
- **The brain is the organ where mental phenomena take place**
- **Mathematical concepts of balance and ratio should be used**

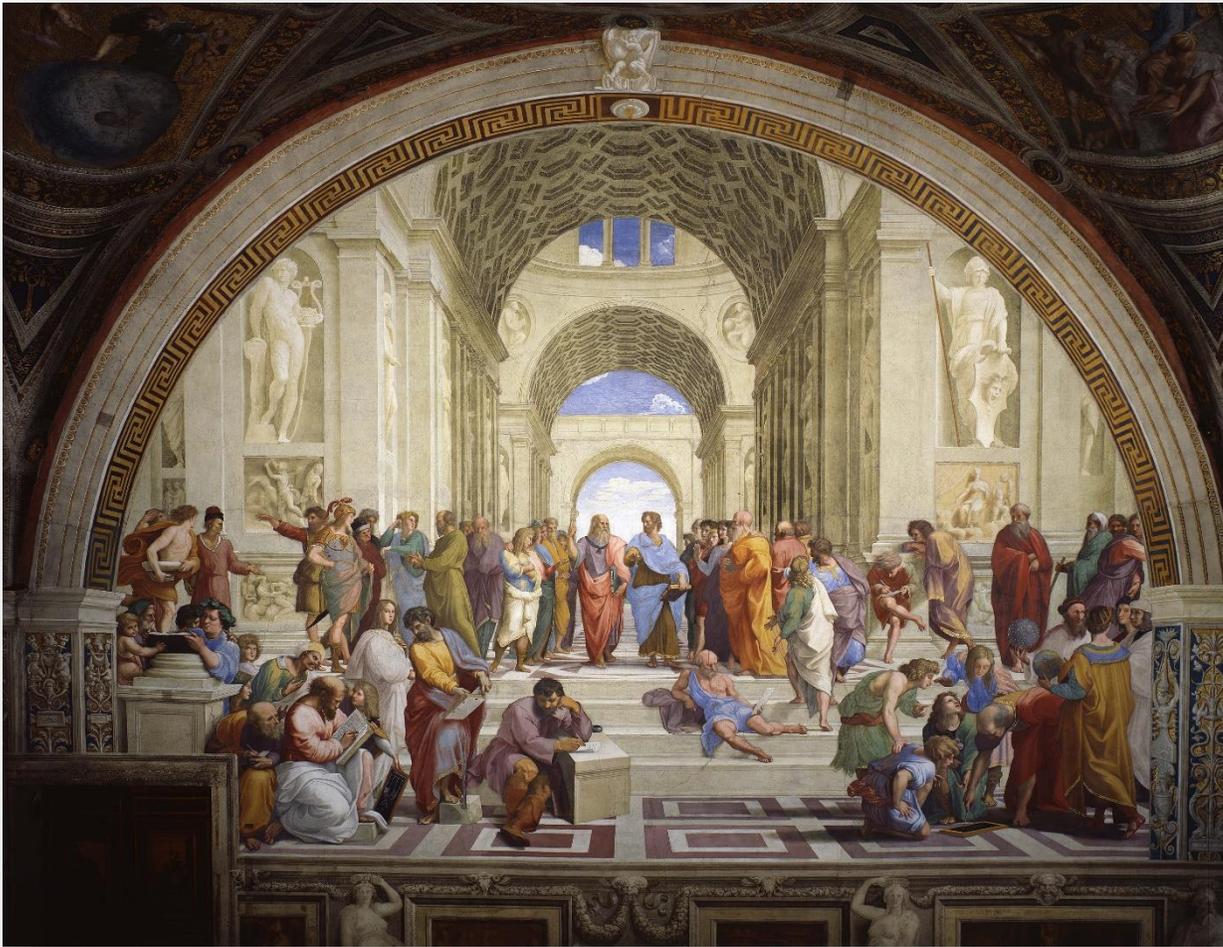
**The basis of his philosophy was numbers and especially the tetractis (tetrad)**

**Went further and proposed a four-components structure of humans**

- **Body** and the three other (three was another sacred number)
- **‘νοῦς’** (mind, corresponding to reason and intelligence)
- **‘ψυχή’** (soul, corresponding to affect) and
- **‘πνεῦμα’** (spirit, corresponding to the immortal part).

**Pythagorean metaphysical and religious beliefs also included immortality and the transmigration of souls**





**'The School of Athens' by Raphael (Raffaello Sanzio da Urbino; 1483-1520) c. 1511.**

At the center of the picture, Plato points towards heaven and Aristotle to the earth in a symbolic scene of the conflicting philosophical approaches. Around them gather other philosophers including the Greek Socrates, Zeno of Citium, Epicurus, Pythagoras, Antisthenes, Anaximander, Heraclitus, Diogenes of Sinope but also Averroes, Zoroaster and possibly other more contemporary figures.



**Aristotles (384-322 BC). Statue in the campus of the Aristotle University of Thessaloniki Greece**

**The Hippocratic texts (today is believed to be the work of unknown authors) introduced the concept of the **four essential body humors****

- **Phlegm**
- **Yellow bile**
- **Black bile**
- **Blood**

**This theory is in fact a microcosmic form of the macrocosmic theory of the four elements (earth, water, air, fire) and the four qualities (dry, wet, cold, hot) of the universe as first proposed by Empedocles (5th century B.C.).**

**The brain was considered to be the seat of life. Mental illness was considered the result of body humor imbalance.**

*Polybos pupil and son-in-law to Hippocrates (4th century B.C.)*

*‘Περὶ φύσεως ἀνθρώπου’ ( ‘On the Nature of Man’).*

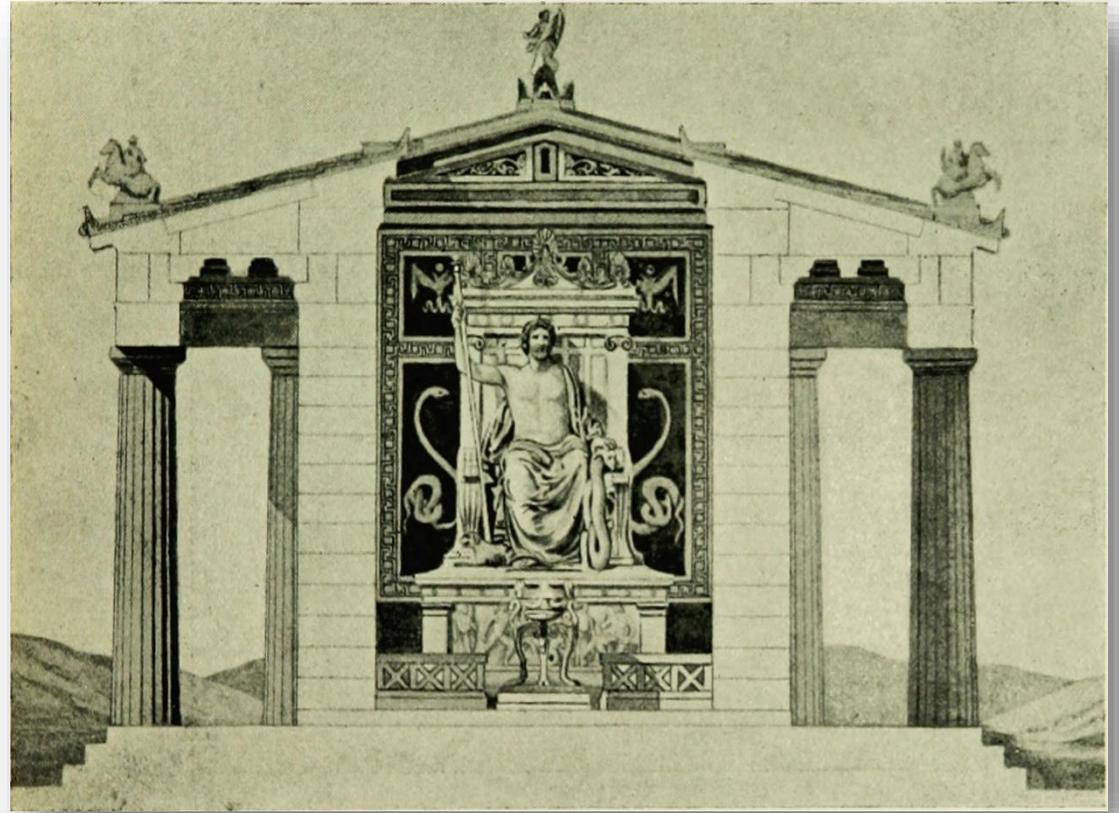
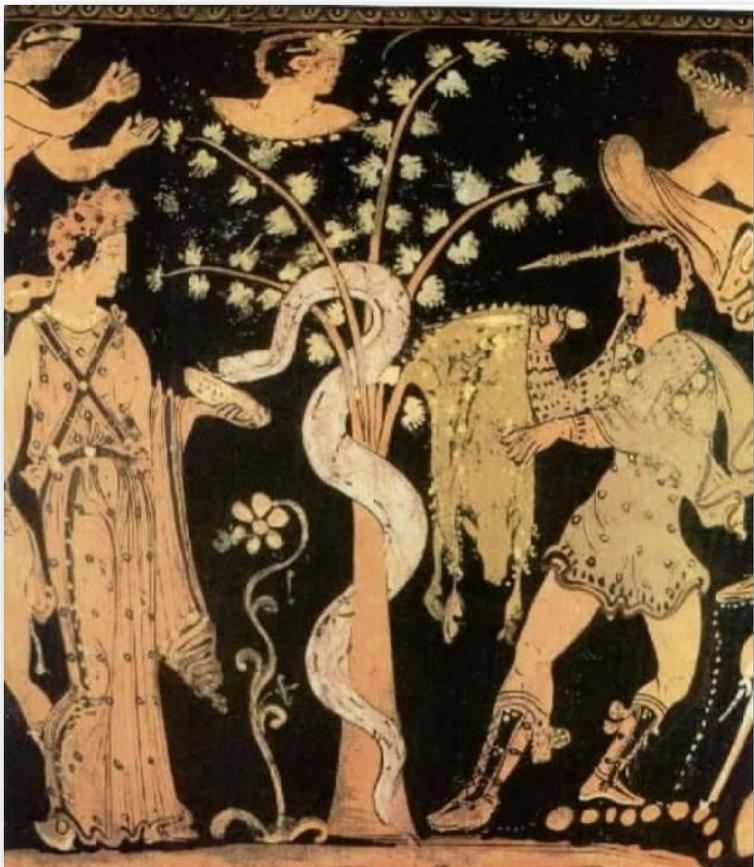
**Plato (424-348 BC)** was probably the first to talk about subconscious conflicts and cognitive biases.

**Aristotles (384-322 BC)** stressed the need for experimental verification but also believed in the supremacy of rational thought over senses and observations.

To him the heart, not the brain, was the organ of mental life

In his book ‘Περί Ψυχής’ (De Anima; On the Soul) he argues that **experience rather than inherent ideas and traits shape the human mind.**

This belief was further elaborated by the Stoic school of philosophy (e.g. Zeno of Citium) as well as the Arabs (e.g. Avicenna) and later led to the concept of ‘tabula rasa’ (blank slate) in the 17th century AD by John Lock and Thomas Hobbes.



**Aurelius Augustine (354-430), better known as **St. Augustine**, was a key personality that shaped the transition from late antiquity to the Middle ages.**

**This transition concerned mainly:**

- **The rise of Christianity and**
- **The domination of religious and metaphysical beliefs in the way the reality is perceived and interpreted.**

**This led to a **moralistic and hostile approach to mental disease.****

**It should be noted that a kind of psychotherapeutic intervention can be traced as early as the writings of St. Augustine and especially in ‘Confessions’ (354-430 AD).**



**Saint Thomas Aquinas (1225–1274)** on the other hand tried to reconcile faith and science and established Scholasticism.

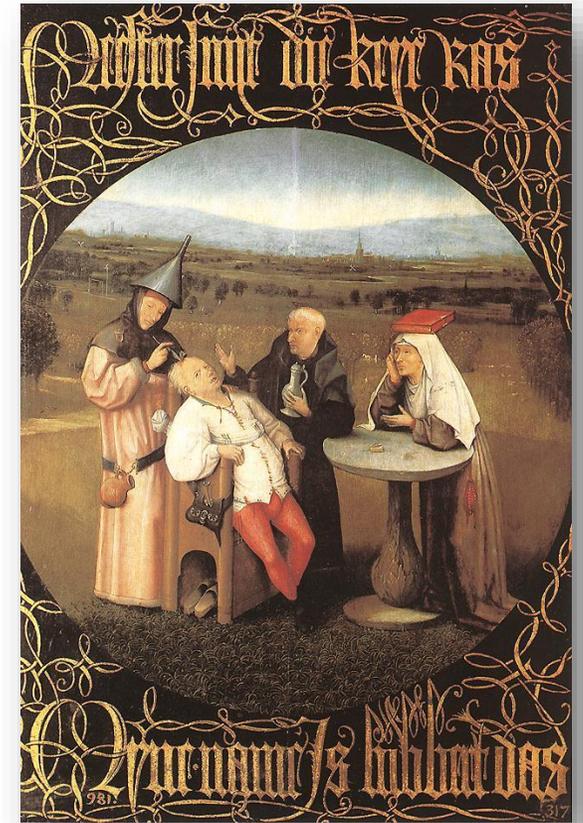
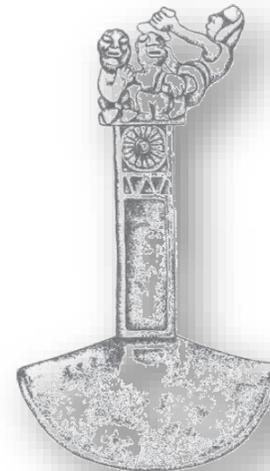
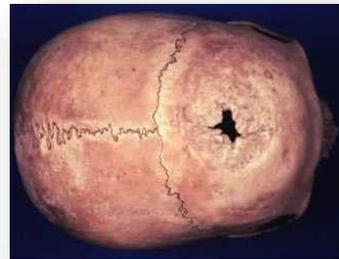
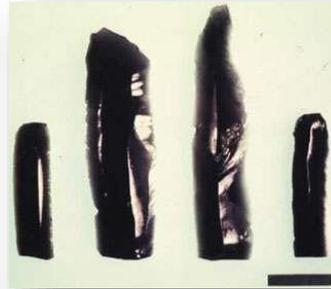
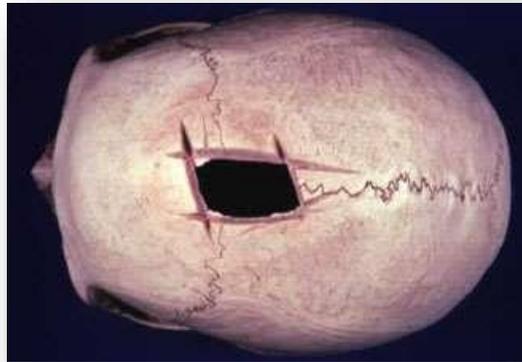
According to his views, the essence of human existence was the immortal soul which consisted of

- Intellect and
- Will

This was the early mentioning of the importance of **'free will'** and as such is somewhat a precursor to modern existential theories.

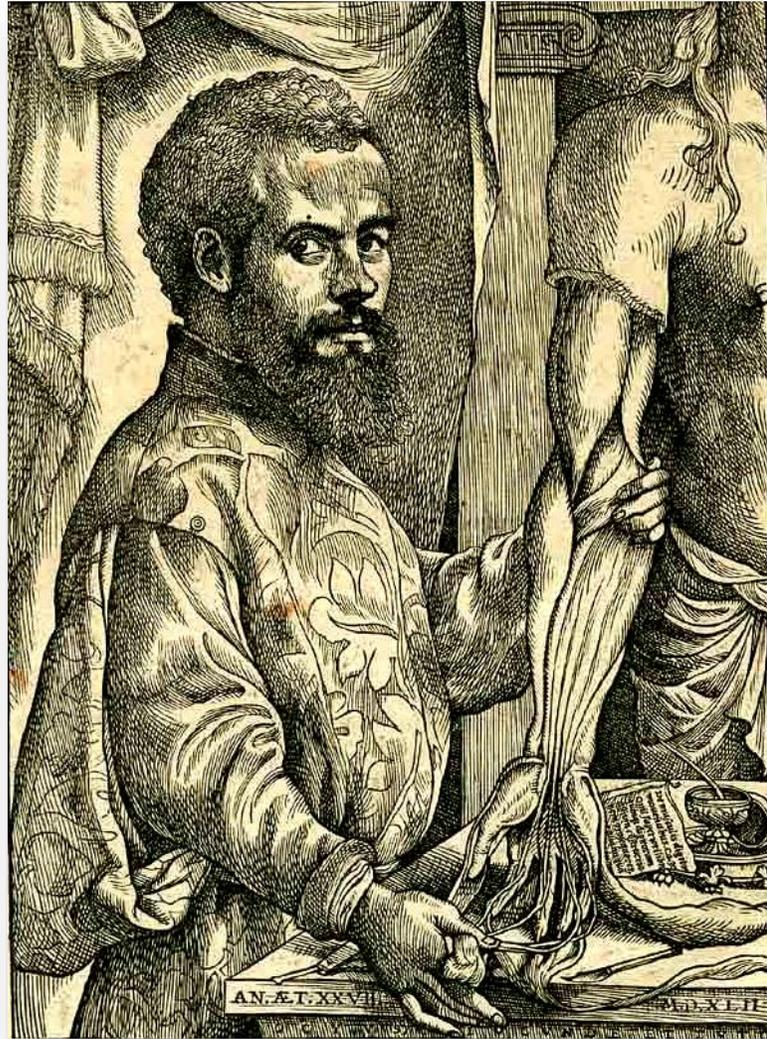


# Skull trephination

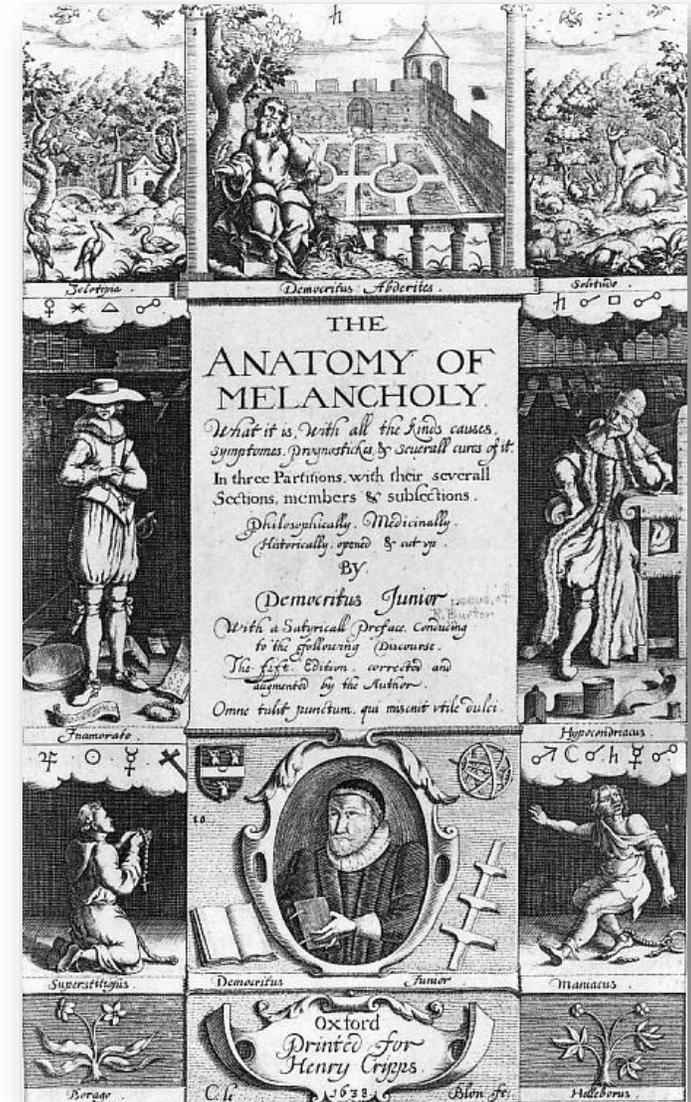


**The Extraction of the  
Stone of Madness  
Hieronymus Bosch  
(c.1488-1516)**





Portrait of Vesalius created by to Jan van Calcar; from-  
Page xii of 'De humani corporis fabrica' (1534 edition),



The front cover of the 1638 edition of Robert  
Burton's The Anatomy of Melancholy

**Francis Bacon (1561-1626)** strongly supported empiricism.

He further elaborated on the ideas originally conceived by Plato on **false baseline assumptions** which hold in bondage the mental capacity to comprehend

He named them **'idols'**, thus describing in more detail what later in 20th century would had been defined as **'cognitive biases'**.



In a pivotal moment in the history of modern psychiatry and neurosciences, **René Descartes (1596-1650)** in his books ‘The Description of the Human Body’ (1647) and ‘Passions of the Soul’ (1649) proposed **the mind-body dichotomy (Cartesian dualism)**

This was essentially a rejection of the Aristotelian approach which was dominant at that time, especially in religious circles, and in accord with the ideas of Plato

This assumption suggested that mind was distinct from matter, but could influence matter (through an unknown way) He also thought that ‘animal spirits’ travel through the nerves.

*Descartes R, Cottingham J, Stoothoff R, Murdochtrans D (1984) The Philosophical Writings of René Descartes (1641). Cambridge University Press, Cambridge*

*Mendler R (2014) False Truths: The Error of Relying on Authority. Hamilton Books,*

- Descartes could not answer the riddle of the mind-body interaction which was evident through basic functions (e.g. hunger, sexual desire etc.) as well as the effect of substances on behavior (e.g. alcohol)
- Thus he proposed that the **pineal gland** was serving as connector between them
- The animal spirits were often distorting the process and humans were obliged to control passions through their **free will**.
- Descartes believed that **mathematics and mechanics** could explain the function of the mind
- Another important element in Descartes' philosophy was the concept of the presence of **innate ideas and knowledge** and this was attributed to God

Berhouma M Clin Neurol Neurosurg 2013;115 (9):1661-1670.

Cunning D (2014) The Cambridge Companion to Descartes' Meditations. Cambridge University Press

Dicker G (2013) Descartes: An Analytic and Historical Introduction. Oxford University Press,

Duncan G The Journal of medicine and philosophy 2000;25 (4):485-513.

Janiak A Stud Hist Philos Sci 2015;51:89-99.

Kirkeboen G. Hist Psychol 2019;22 (1):17-39.

Kogge et al. Stud Hist Philos Biol Biomed Sci 2013;44 (2):181-189.

Lokhorst et al Journal of the history of the neurosciences 2001;10 (1):6-18.

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Sangiaco A Sci Context 2015;28 (4):515-543.

Shapiro L. Br J Hist Philos 1999;7 (3):503-520.

Shiraev E (2010) A History of Psychology: A Global Perspective. Sage Publications Inc,

Smith CU Brain Cogn 1998;36 (1):57-72.

Stone MH. J Am Acad Psychoanal 1980;8 (4):473-495

It is interesting how his remains were treated after his death

In an admixture of admiration for his contribution to science, philosophy and the society and probably because of a metaphysical need for relics, fingers were taken for posterity, bones for jewellery rings and **his skull was stolen**, and today rests in the Musée de l'Homme

On the skull surface the **names of several former owners are engraved**, as if, in this essentially 'sacrilegious' way, they had managed to grasp some of Descartes's fame or brilliance.



**Benedict Spinoza (1632–1677)** rejected Cartesian dualism (neutral monism). Further, he suggested that psychological function is a natural phenomenon and subsequently the human mind is subject to the laws of nature. In an ethical extension of these views, the concepts of ‘good’ and ‘evil’ are merely the products of the emotions of pleasure and pain.

**John Locke (1632–1704)** rejected the presence of ‘innate ideas’ according to Descartes and suggested that only experience shapes the human mind.

Similar concepts were expressed by **Thomas Hobbes (1588-1679)**

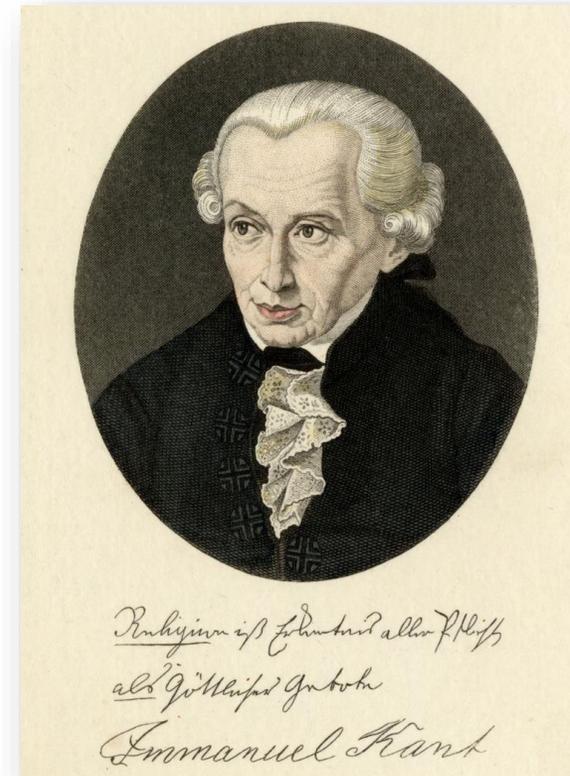
Locke and Hobbes seemed embarrassed when discussing the possible total lack of inherent ideas.

Both philosophers utilized the ‘**tabula rasa**’ theory to promote the idea of universal human rights.

**Immanuel Kant (1724-1804)** who was essentially a metaphysical philosopher, in his 1781 book ‘Critique of Pure Reason’ rejected the Cartesian dualism and agreed on this issue with Spinoza.

He essentially rejected empiricism in favor of logical reasoning and rational philosophy, although some scholars suggest that he was only delineating the limits of empiricism, not completely rejecting it.

According to him, the mind can know only what the senses allow (**‘phenomenon’**) but not the meaning and the qualities of the thing (**‘noumenon’**).



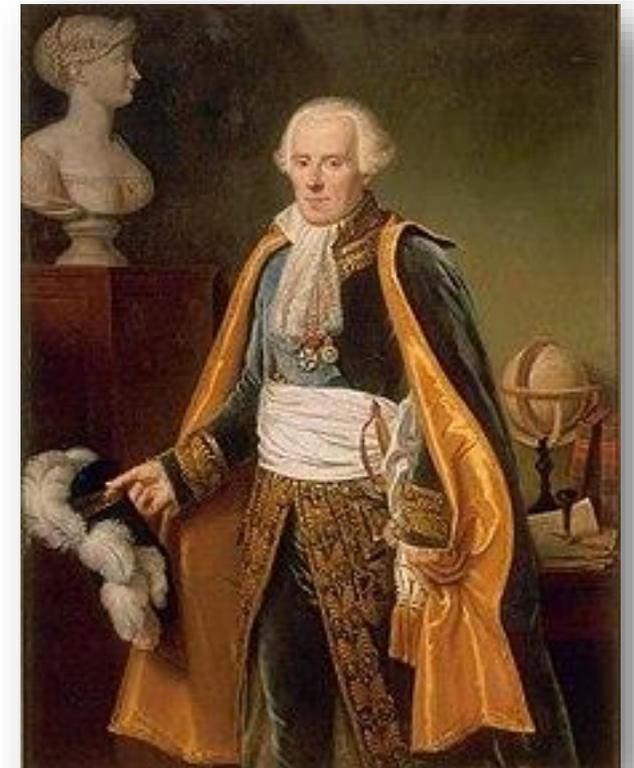
## Pierre-Simon, marquis de Laplace (1749-1827)

- Viewed the laws of nature as a comprehensive deterministic system
- A sufficiently powerful mind, supplied with a complete knowledge of the laws of nature and the state of the universe at one time, could derive what its state would be at any subsequent time.

Unlike Newton and Descartes, Laplace believed that

- **A law-governed world must also be deterministic**
- no room for either miracles or free will.

*Mécanique Céleste (Celestial Mechanics) (1799–1825).*





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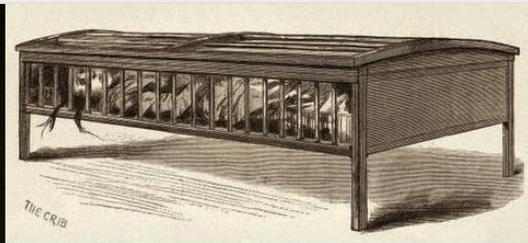


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### Three possible solutions:

1. Free will does not exist; all are deterministically mechanical. Ethics have no meaning (hard atheism)
2. The 'soul/mind' is not governed by the laws of materialistic nature and is not based on brain function (quasi-religious).
3. There are exceptions to the laws of nature (religious)







**Phillippe Pinel (1745-1826) removing the chains from patients at the Salpêtrière asylum in 1797**

**Søren Aabye Kierkegaard (1813-1855)** argued that life is characterized by the struggle against two opposing forces:

- The wish for **immortality** and
- The reality of **death**.

Connection with others is essential and lack of it creates alienation which is a disturbing human condition.

He believed that individuals become what they make of themselves through a series of **choices**. He divided choices into

- **‘inauthentic’** (when individuals allow themselves to be shaped by the demands and expectations of the masses in what he called the ‘tyranny of the plebs’) and
- **‘authentic’** (when the individual assumes full responsibility of fate and existence).

**‘Existential anxiety’** develops when the person struggles to make authentic choices and avoid inauthentic ones.

In 1843 in the UK, the case of Daniel M'Naghton (1813-1865) who while suffering from persecutory delusions committed murder influenced English and American legal criteria for acquittal on the basis of insanity.

He was a Scottish woodturner who assassinated English civil servant Edward Drummond, he was ruled **not guilty by reason of insanity** and was committed to an insane asylum for the rest of his life

This was followed by the 1845 Lunacy Act in England and Wales which recognized the status of 'patients' for all persons with mental disorders (lunatics).



*Coleman et al Journal of the National Medical Association 1978;70 (8):599*

*Diamond BL. Am J Psychiatry 1956;112 (8):651-656.*

*Quen JM. Bulletin of the history of medicine 1968;42 (1):43-51*

*Rosenberg CE. Bulletin of the history of medicine 1983;57 (4):621-624*

*Sauer et al The Bulletin of the American Academy of Psychiatry and the Law 1976;4 (1):73-75*

*Slater E. British medical journal 1954;2 (4890):713-718*

**Wilhelm Maximilian Wundt (1832-1920)** argued that many elements of intellect seem to be **inherent**, exist independently of and are not included or caused by sensory input.

He conceptualized mental phenomena as changing processes of consciousness and of humans as ‘motivated and thinking subjects’.

He introduced the notion of ‘Psychophysical parallelism’ to argue that mental and physical phenomena are neither identical nor convertible into one another and simply coexist in a parallel way.

He went further on to describe **principles of mental causality** (creative synthesis, relational analysis, mental contrasts and heterogeneity of purpose) in contrast to the natural causality of neurosciences.

In principle he believed that **Psychology cannot be reduced to physiology** and this constituted a direct influence from Leibniz

*Araujo F. Hist Psychol 2012;15 (1):33-49*

*Greenwood JD Hist Psychol 2003;6 (1):70-88*

*Mulberger A Stud Hist Philos Biol Biomed Sci 2012;43 (2):434-444.*

**Charles Robert Darwin**  
**(1809-1882)**



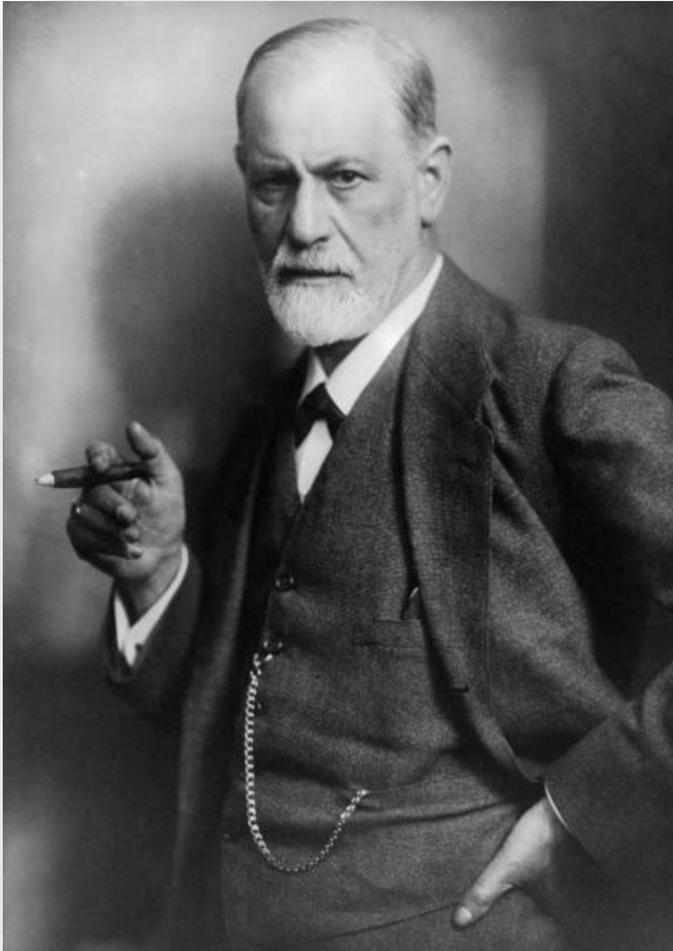
**In the early 20<sup>th</sup> century philosophy tries to reconcile and synthesize the impossible**



**Sigmund Freud (1856-1939)**  
*Psychoanalysis*

vs.  
vs.

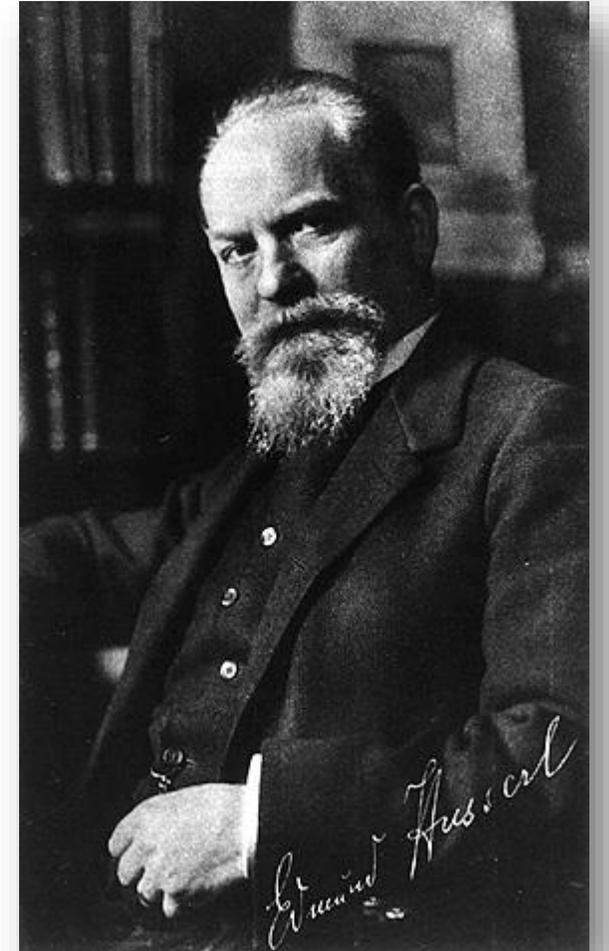
**Edmund Husserl (1859-1938)**  
*Phenomenology*



*Interpretation*  
*Unconscious*

-

*'epoche'*  
*Conscious*  
*transcendental*  
*intersubjectivity*





**Left: Bertrand Russell (1872-1970)**

**Center: George Edward Moore (1873-1958)**

**Right: Ludwig Wittgenstein (1889-1951)**

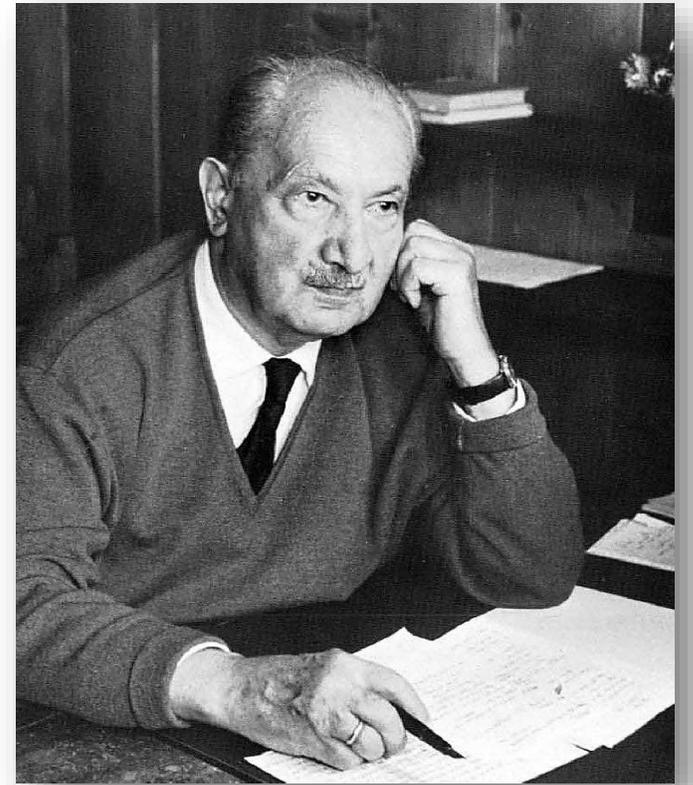
**The founding fathers of Analytical Philosophy**

In 1927 **Martin Heidegger (1889-1976)** published his book **'Being and Time'** (Heidegger 2008).

The core of his theory concerned the notion of **'Dasein'**, or **'being-there'** or **'being-in-the-world'**. Heidegger considered this as the central issue of human existence.

Those who cannot accomplish **'being there'** because of having dreadful feelings, they end up in a conventional and inauthentic life full of worthlessness and guilt.

Existential anxiety is considered to be the result of fear of loss of **'dasein'** while depression comes from non-acceptance of the inevitable human fate of death.



*Heidegger M (2008) Being and Time. Harper Perennial, New York*

In the middle of WWII, in 1943 **Jean-Paul Sartre (1905-1980)** published his book 'L'Être et le néant : Essai d'ontologie phénoménologique' (Being and Nothingness: An Essay on Phenomenological Ontology)

- Humans are defined by their actions, not by some predetermined purpose. This was both in accord with an atheistic perspective but also by his belief that there is not any fixed constitution or nature.
- Character continuously changes as a consequence of experience (a notion strongly similar to the 'blank slate').
- He attributed 'free will' a dominant role; humans are absolutely responsible for their actions and decisions and internal subconscious forces play no role.
- His line of thinking essentially considered **mental illness to be the product of free will and choice** and later he went on to support antipsychiatric movements by also writing the introduction to foreword to 1960 book 'The divided self' by Ronald David Laing (1927-1989).

**Jean-Paul Sartre**  
**(1905-1980) c. 1967**



One of the developments during the 1960s was the rise of the civil rights movement, feminism and labor movement - **psychiatric patients were considered to be an oppressed minority.**

**Emergence of antipsychiatry.**

- **In 1961, Thomas Szasz (1920-1912) published ‘The Myth of Mental Illness’ and argued that the very concept of mental illness was a logical absurdity**
- **In 1967, David Cooper (1931-1986), was the first to refuse the existence of mental illness (Cooper 1967).**
- **Jean-Paul Sartre (1905-1980) in his foreword to the book ‘The divided self’ by Ronald David Laing (1927-1989) noted that ‘mental illness is the revolt that the free organism in its total entity invents in order to live in an unbearable situation’**

*Cooper D (1967) Psychiatry and Anti-Psychiatry Tavistock, London*

*Laing R (1967) The Politics of Experience. Penguin Books,, Harmondsworth*

*Szasz T (1961) The Myth of Mental Illness: Foundations of a Theory of Personal Conduct. Hober-Harper, New York*

## **The science of the 20<sup>th</sup> century:**

**Claims about Quantum Mechanics:** at its most fundamental level, the universe is not deterministic, but probabilistic.

**In reality:**

- **The Copenhagen interpretation by Niels Bohr (1885-1962) and Werner Heisenberg (1901-1976) , posit that the universe itself is truly random.**
- **Albert Einstein (1879-1955), argued that the underlying reality is deterministic, and only appears probabilistic because we do not see the whole picture.**

**Moreover, true randomness does not provide a basis for free will, either. It is not clear that talk of "free choice" makes any more sense in a world of quantum randomness than in a deterministic world.**

# Philosophy

# Science

Religious predominance

Plato (424-348 BC)

St Augustine (354-430)

Francis Bacon (1561-1626)

René Descartes (1596-1650)

Pythagoras (580-496 B.C.)

Aristotles (384-322 BC)

Saint Thomas Aquinas (1225-1274)

Body humors

Atheistic predominance

Empiricism

Wilhelm Maximilian Wundt (1832-1920)

Sigmund Freud (1856-1939)

Rationalism

Benedict Spinoza (1632-1677)

John Locke (1632-1704)

Thomas Hobbes (1588-1679)

Immanuel Kant (1724-1804)

Søren Aabye Kierkegaard (1813-1855)

Edmund Husserl (1859-1938)

Martin Heidegger (1889-1976)

Jean-Paul Sartre (1905-1980)

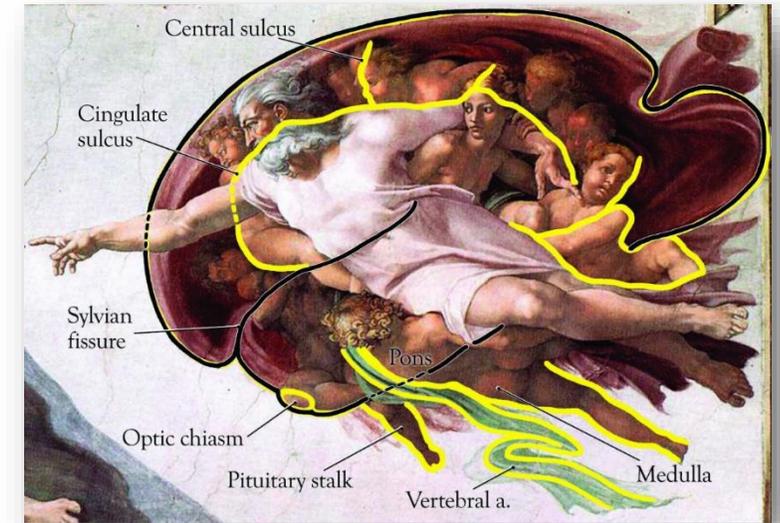
Anatomy and Physiology

Psychiatric nosology

Neurosciences

# Dualism

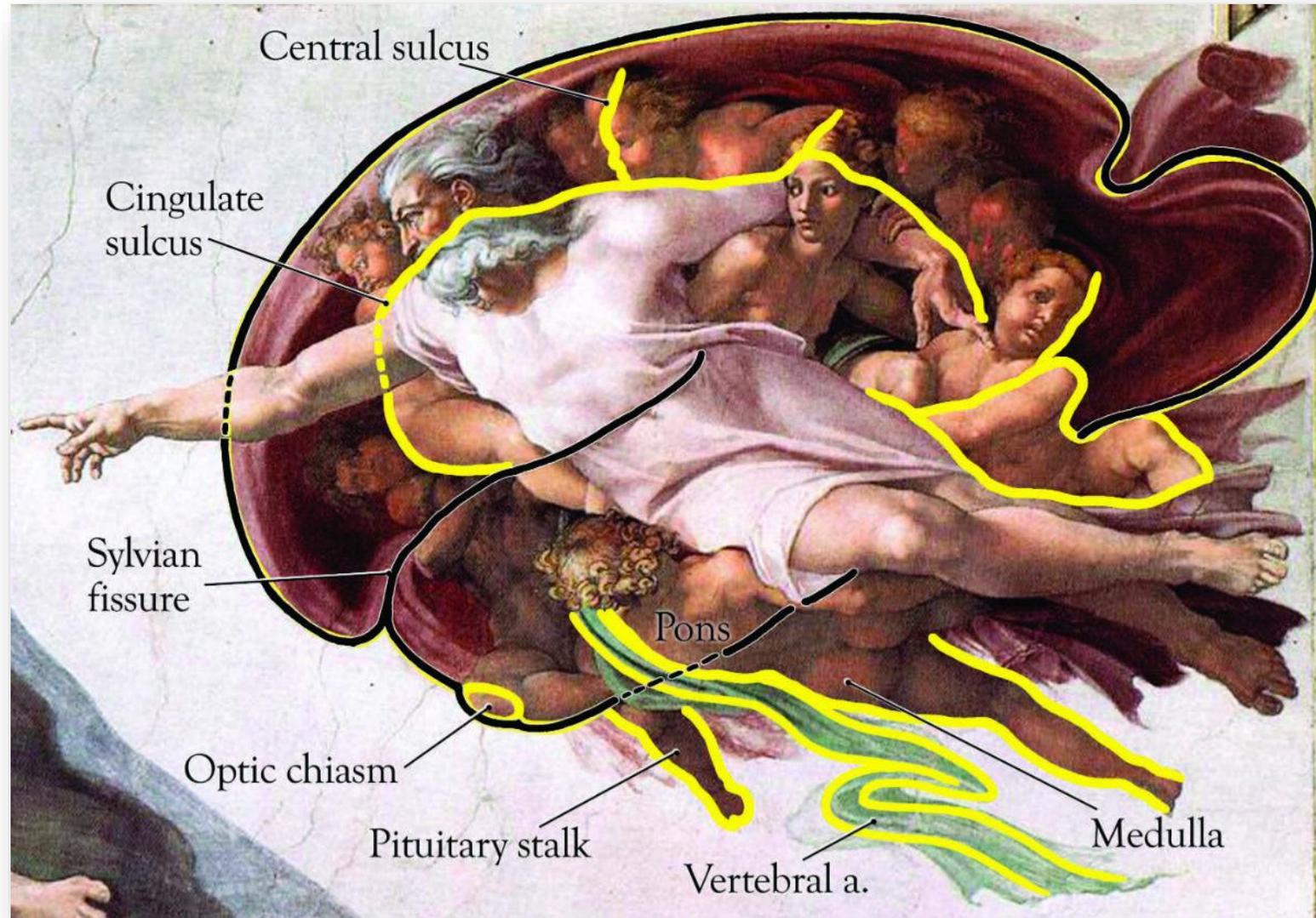
- Substance or Cartesian dualism
- Psycho-physical parallelism
- Occasionalism
- Property dualism
  - Emergent materialism (Emergentism)
  - Non-reductive physicalism
    - ❖ Anomalous monism
    - ❖ Predicate dualism
    - ❖ Biological naturalism.
  - Epiphenomenalism
  - Interactionism, or interactionist dualism
  - Panpsychist property dualism or Panpsychism



# Monism

- Materialism
  - Naive materialism.
  - Metaphysical materialism
  - Dialectical materialism.
  - Physicalism.
- Idealism
  - Subjective idealism.
  - Objective idealism
  - Transcendental idealism
- Neutral monism

*Altmann M (2014); Banks EC (2014); Carr HW. Nature;108 (2712):247-248*  
*Chalmers D (1996); Churchland PM (1984),*  
*Collins C. Int J Philosophical Studies 1997;5 (1):15-33*  
*Davidson D (1970, 1980); Descartes R (1641); Dewey J (1882)*  
*Dicker G (2011); Eccles J (1973, 1990), 1984, 1986); Fodor J (1968)*  
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# Consciousness -A

Comes from the Latin conscious, meaning 'knowing, being aware' which in turn comes from conscire (con meaning 'together' + scire meaning 'know').

Probably this is a loan-translation of the Greek word 'συνείδηση' (sinidisi) which comes from the verb 'σύννοια' (meaning 'I know well'). From the Latin scire also come the words 'sense' and 'science'.

While consciousness has been the focus of philosophy in the frame of mind, self and morality, and **most philosophers had adopted the dualistic approach (brain vs. soul/mind)** modern advances in neuroscience point to the conclusion that it is **fundamentally a function of the brain.**

However so far there was no success in the efforts to identify neural mechanisms that give rise to consciousness

# Consciousness -B

A basic approach to consciousness is its conceptualization as a state of awareness. Modern philosophers of mind such as John Searle (1932- ) and Thomas Nagel (1937- ) ascribe three main features to awareness: subjectivity, unity, and intentionality.

- **Subjectivity** poses the greatest scientific challenge since it could be in direct conflict with the principles of conducting research and conceptualizing in a scientific way.
- **Unity** refers to the fact that experiences surface into consciousness as a unified whole and all the various senses are merged into a single conscious experience of reality.
- **Intentionality** refers to the attribution of meaning beyond the moment of experience.

This is not new- it is more or less a summary of philosophical thinking so far

# Consciousness -C

There is a debate whether the human brain can completely understand itself and subsequently whether consciousness could be scientifically studied.

- Some philosophers e.g. Colin McGinn (1950- ) believe that **there are limits to human cognitive capacities which preclude the comprehension of what consciousness really is**
- Searle and Nagel disagree.
- A third approach suggested by the Nobel laureate Gerald Maurice Edelman (1929-2014), is that consciousness is simply the outcome of the computational workings of the association areas of the brain and in this frame it could be the focus of scientific research

*Edelman G (1978) The Mindful Brain: Cortical Organization and the Group-selective Theory of Higher Brain Function. MIT Press*

*Edelman G (1989) The Remembered Present: A Biological Theory of Consciousness. Basic Books*

*Edelman G (1992) Bright Air, Brilliant Fire. . Penguin*

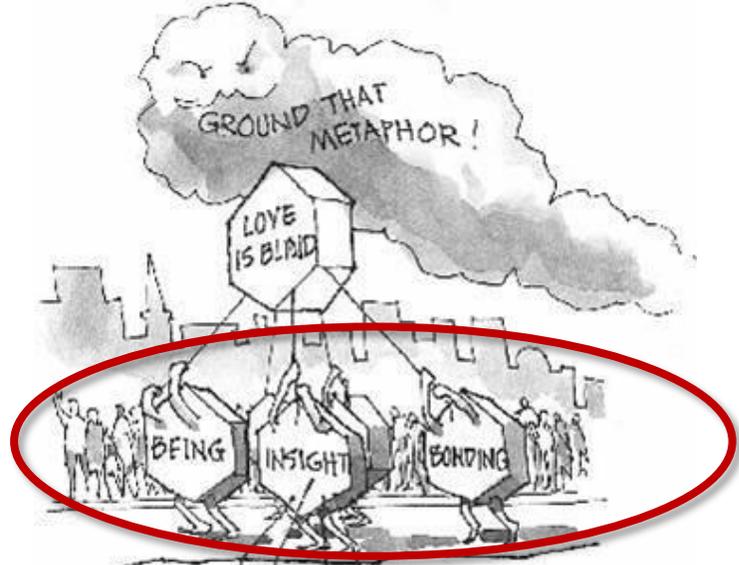
*Edelman G, Changeux J (2001) The Brain. Transaction Publishers*

# Consciousness -D

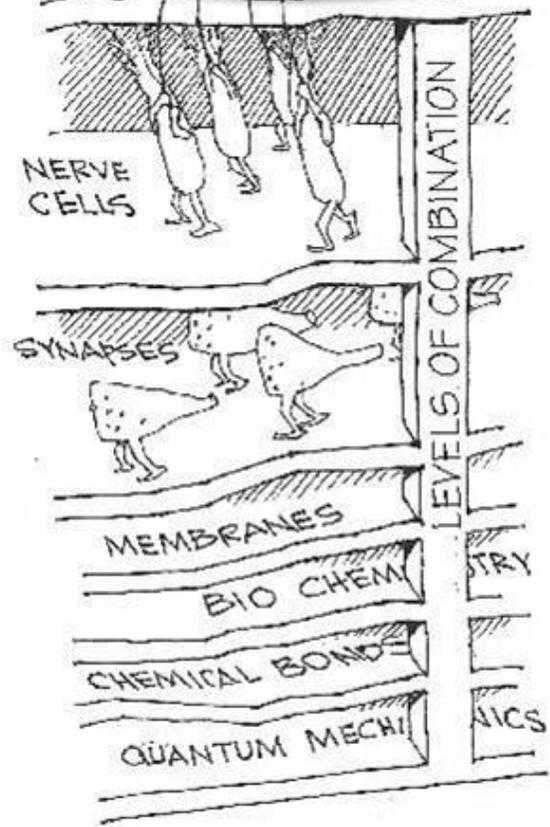
The great practical problem is the **astronomical complexity of the brain's functional anatomy and physiology.**

The optic nerve alone contains between 770,000 and 1.7 million nerve fibers (approx. 1 million). Now if each of these neurons can take only two distinct states (e.g. yes/no, fire/silent etc.; a very simplistic approach) then the total number of states the optic nerve can take, is  $2^{1,000,000}$ . This number is **larger than  $10^{250,000}$**  which should be compared with  $10^{80}$ - $10^{97}$  which correspond to estimations of **the number of all elementary particles of the visible universe.**

This scale of complexity, considered together with the limited number of experimental trials we can conduct and the limited number of subjects and observations we can gather, makes **impossible the study of these phenomena** with the standard reductionist approach to events, which science normally follows.



← **Consciousness**





**Consciousness is the unified, subjective experience of reality (self and environment) with the intention to act**

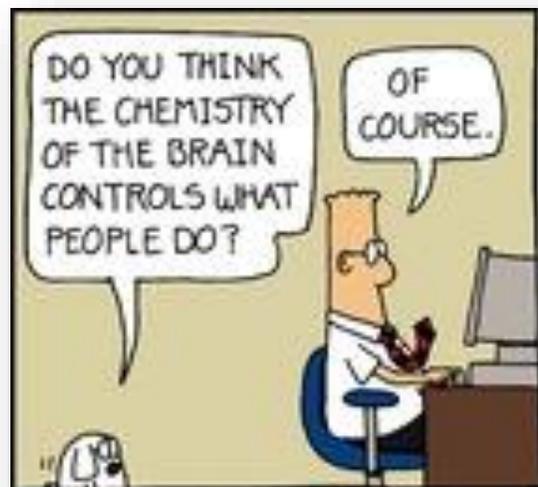
# Free Will

**Social/political not scientific concept**

**Determinism and incompatibility**

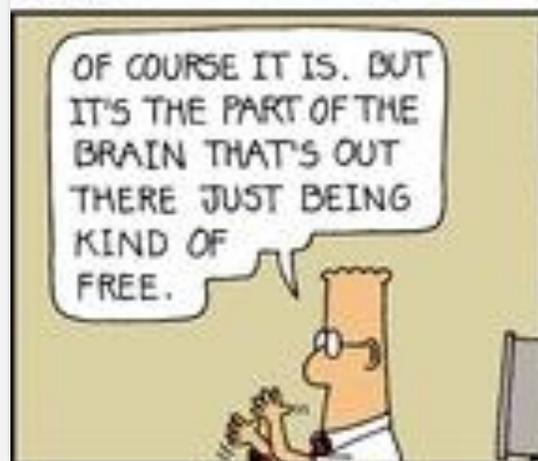
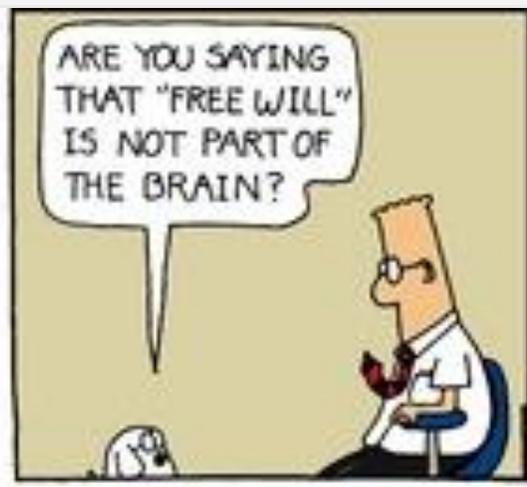
- *Theological*
- *Philosophical*
- *Scientific*

**The Libet et al 1983 experiment**

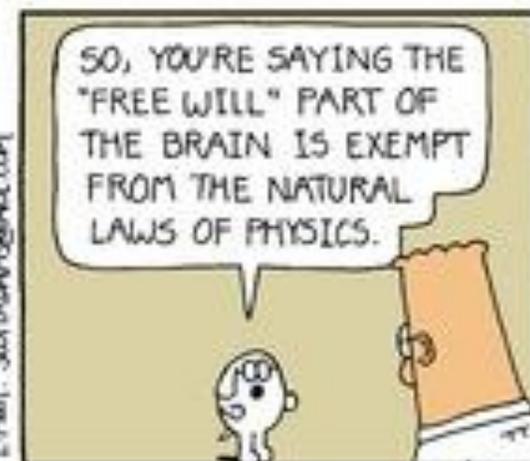


OF COURSE.

S. Adams



E-mail: scott@adams.com



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# Free Will in the modern neuroscientific era- A

## Mechanism of decision making:

Complex network which:

- Receives **sensory** information
- Amygdala adds an **emotional component** which is essentially a primitive kind of assessment and decision (e.g. fear in the sight of a snake) while
- The hippocampus provides with feedback from previous **experiences and memories** on the basis of current sensory input and emotional state.

This representation of the environment undergoes several loops of processing before reaching the **frontal lobe** where it is considered against affect (current emotional state) and previous memories and other mental components (e.g. response options) held in consciousness.

# **Free Will in the modern neuroscientific era- B**

**Affects provide the person with fast decisions which serve survival.**

**Some of these decisions are easy to understand (e.g. fear of animals), but others are incomprehensible in principle (aesthetics and attraction to the opposite sex).**

**These emotional processes are:**

- Evolutionary older**
- Are characterized by speed and dominance.**
- They utilize pre-determined strong assumptions**

**Logical thinking aims towards an 'objective' assessment of the situation.**

**The two processes, although independent in principle, they interact and influence each other.**

**The emotional status causes bias in logical thinking and logical analysis triggers emotions.**

# Free Will in the modern neuroscientific era- C

One astonishing characteristic of the human brain is that it is capable of performing complex process of information in extremely short time but is incapable of performing much less demanding process of information.

This is because the essential architecture and the basic principles on which the brain function is based is completely different from that of electronic computers and specifically of what is called '**Turing machines**'.

The principles of the so-called **non-Turing machines** have only recently began to emerge and their main characteristic is that their functions are not deterministic.

The function of brain as a **non-Turing computational machine probably solves the incompatibility problem**, since it allows space for some kind of free will in the frame of a non-deterministic environment.

# **Free Will in the modern neuroscientific era- D**

**In conclusion, our current scientific understanding manages to overcome the old dualistic approach and the incompatibility/determinism problem**

**It suggests that free will although exists, is not an ‘all or none’ phenomenon**

**Often it is restricted by the need to response to reality and by priorities deeply embedded in human nature (e.g. survival).**

**It is interesting to note that these restrictions are also embedded in legislation and social rules already since antiquity.**

**Will is as free as large is the variety of options under consideration for a response to a specific situation.**

**Consciousness**



**Free will**



**Will is as free as large is the variety of options under consideration for a response to a specific situation**

# Free Will and mental illness-A

People with mental illnesses are characterized by:

- Decreased volition
- Difficulty in filtering and altering their behavior
- Difficulty in adjustment and functioning.
- They tend to manifest repeatedly the same behaviors and to utilize the same malfunctioning mechanisms to arrive at a decision.

While existential philosophers argue that mental disorder is a matter of personal choice, which is in accord with the **antipsychiatric approach**, clinical as well as neurobiological and pharmacological data do not support this.

# **Free Will and mental illness- B**

The most reliable and valid interpretation of the relationship between free will and mental illness is that the former is **restricted and malfunctions** in the case of the later.

Again **this is not an 'all or nothing' phenomenon**

Depending on the severity of mental disorder the 'degrees of freedom' are restricted to a variable degree, and **the availability of response options narrows.**

**Effortful processes are more often necessary** to serve decisions which normally do not require or require minimum effort.

Often, the choice not to undergo treatment is seen not as the product of free will, but this is a 'hot' topic of debate during the last decades.



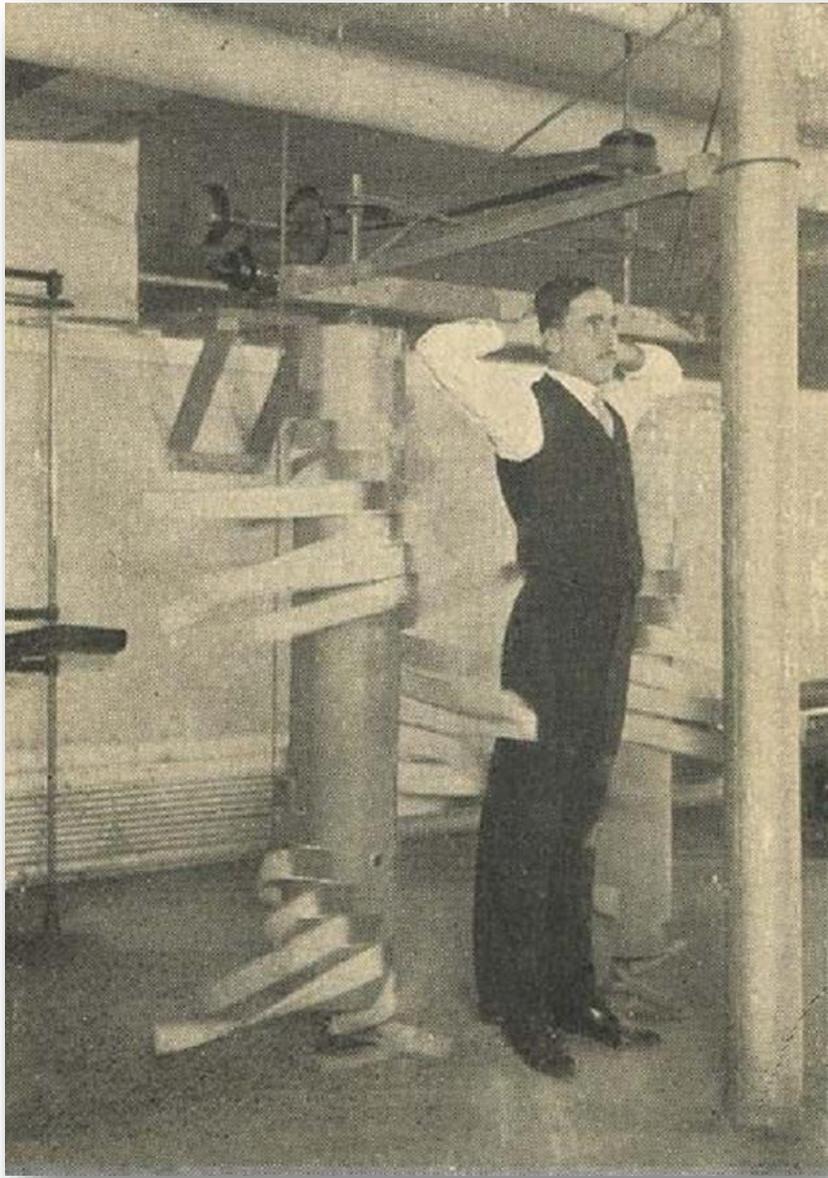
**Vs.**

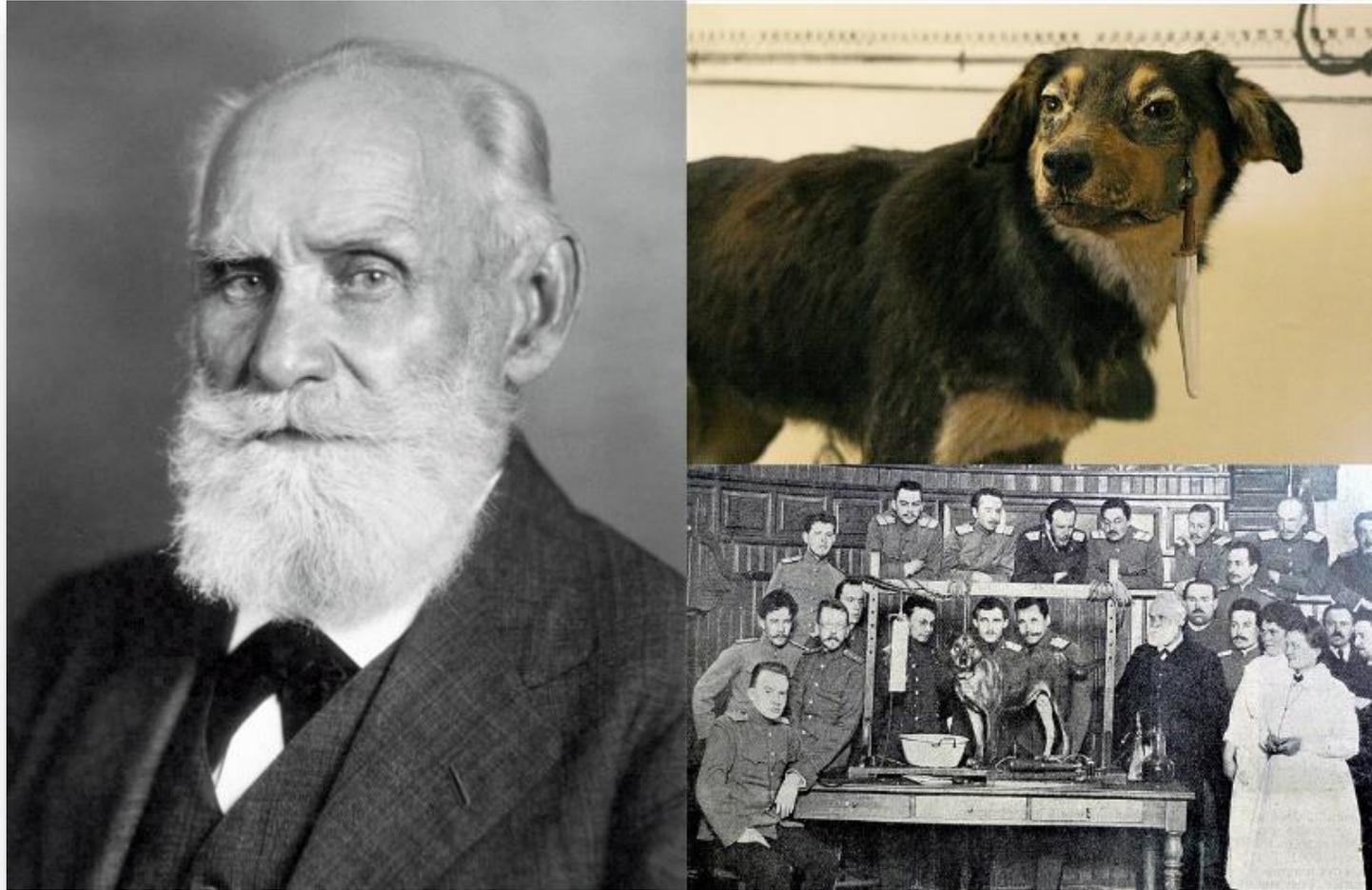


**Free will is restricted and malfunctions in the case of mental disorder.  
The availability of response options narrows.  
Effortful processes are more often necessary**

# The treatment revolution







**Left: Ivan Petrovich Pavlov (1849-1936)**

**Right up: One of the many dogs Pavlov used in his experiments (possibly Baika), Pavlov Museum Ryazan, Russia. Note the saliva catch container and tube surgically implanted in the dog's muzzle.**

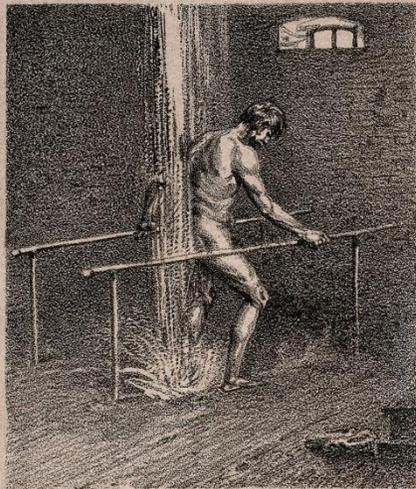
**Right down: Pavlov with assistants and students at the Imperial Medical Military Academy of St. Petersburg**

**Third International Psychoanalytical  
Congress, 1911 in Weimar Germany**

**Sigmund Freud, Carl Jung, Karl  
Abraham, Otto Rank, and Sándor  
Ferenczi in the middle**

**What is interesting in this photo is the  
pyramidal shape of the gathering with  
Freud in the middle, whose figure  
emerges as taller and dominant in  
comparison to others.**





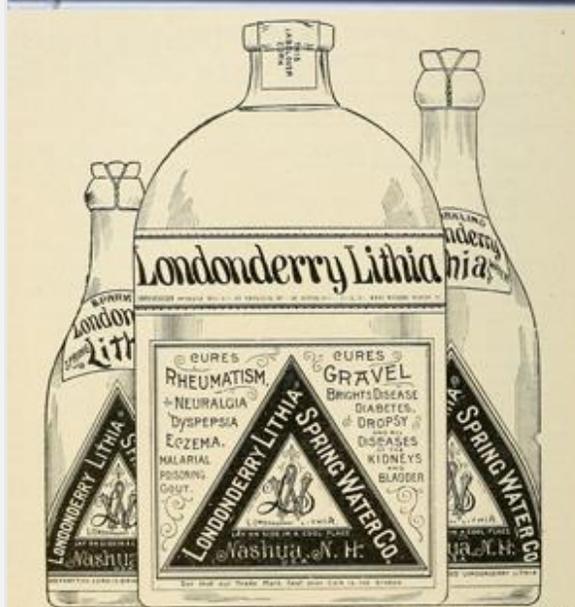
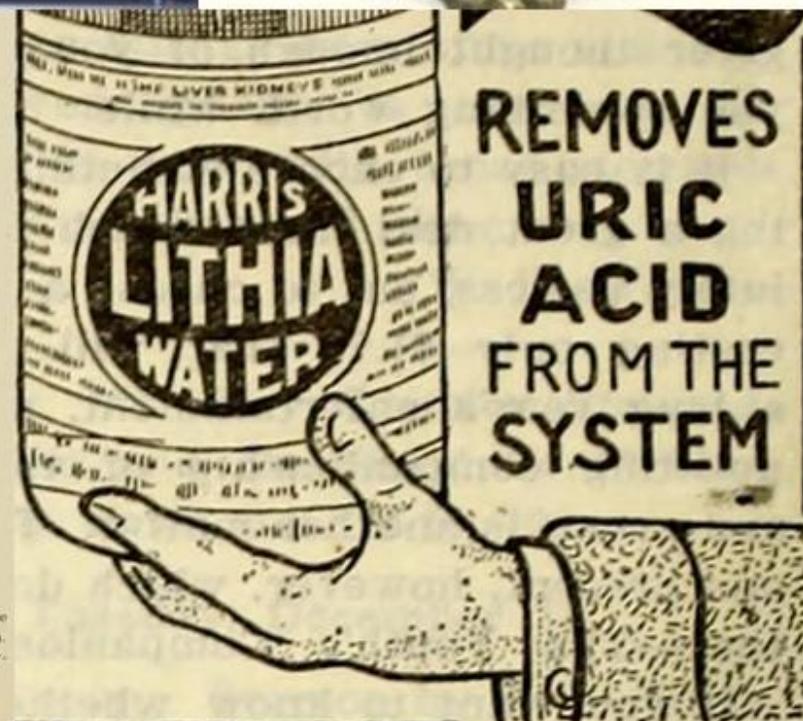
Douche.



Leibbinde.



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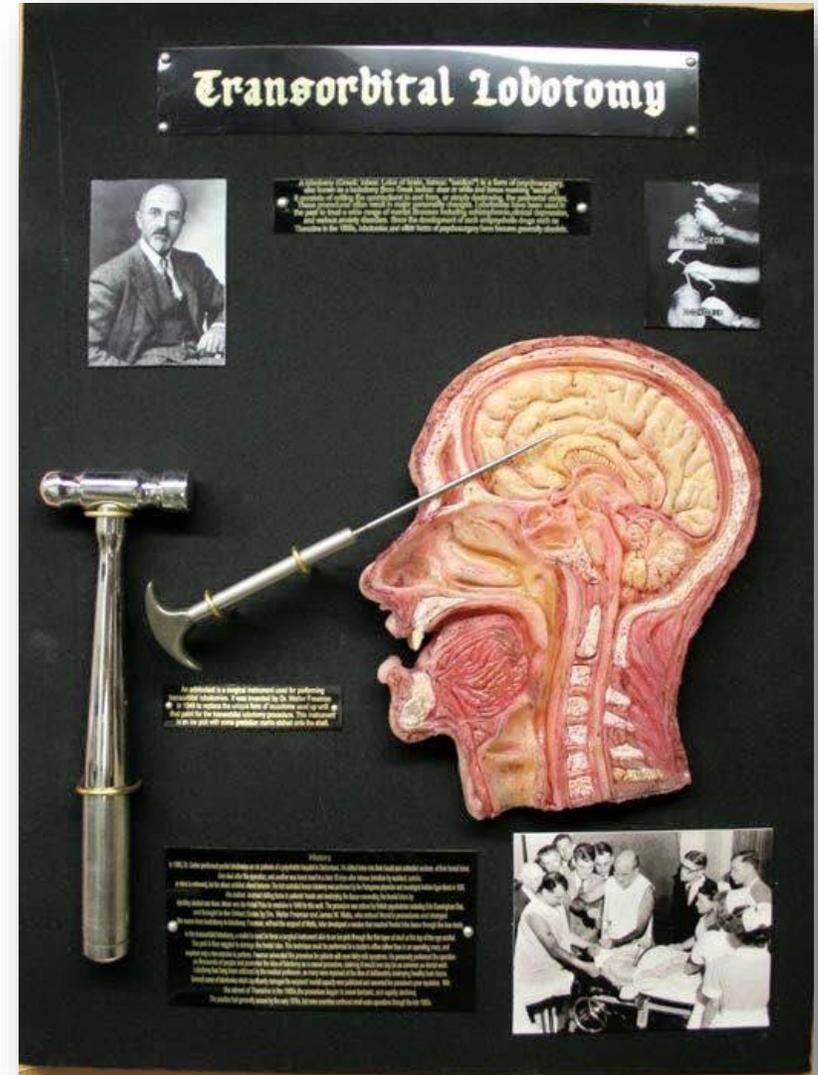


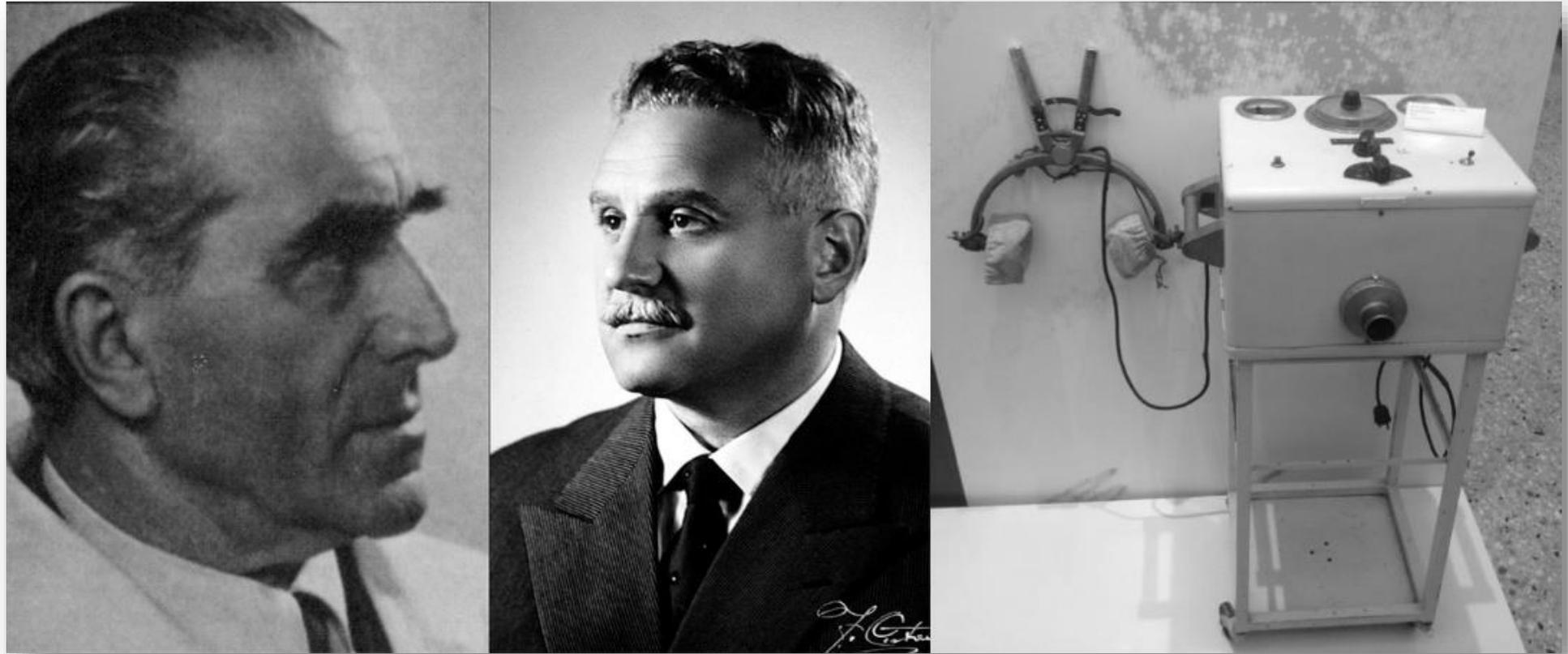
**Left: Manfred Sakel (1900-1957)**

**Right: insulin shock treatment in Lapinlahti  
Hospital, Helsinki in 1950's**



**António Egas Moniz (1874-1955)**

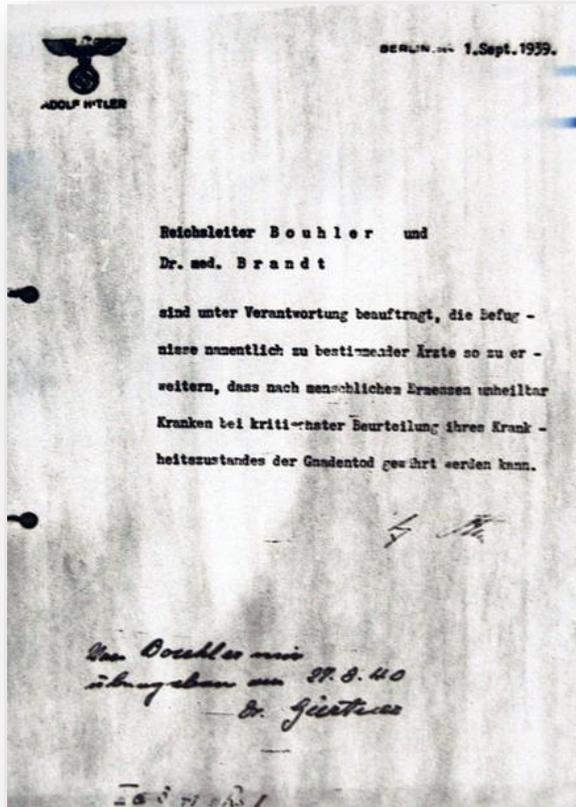




**Left: Ugo Cerletti (1877-1963)**

**Center: Lucio Bini (1908-1964)**

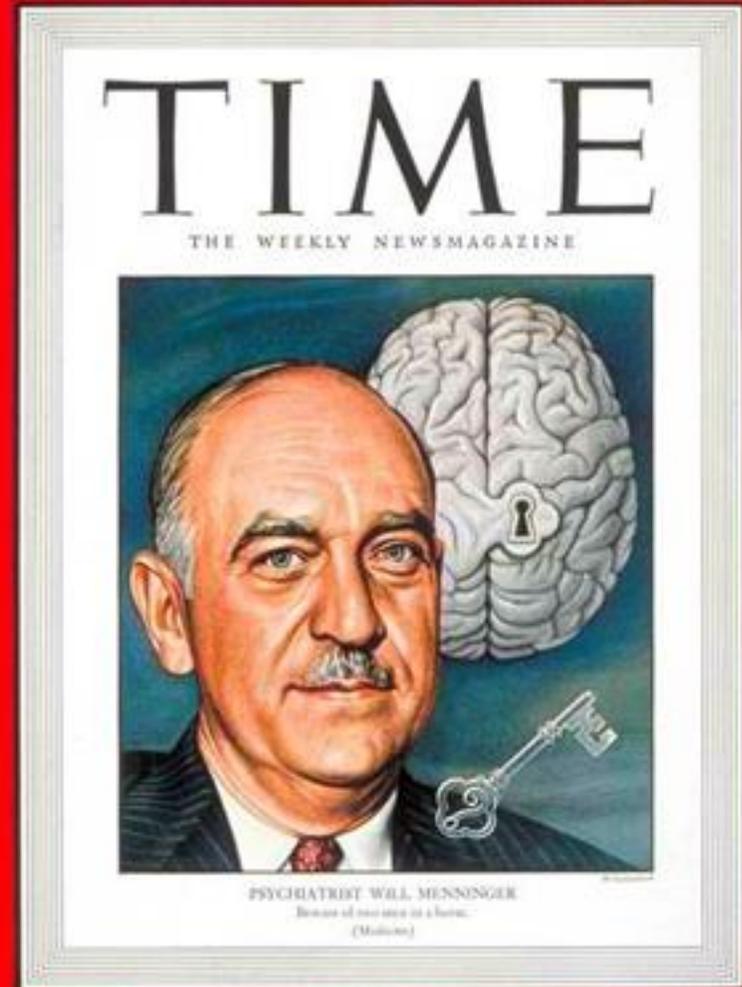
**Right: Cerletti's ECT machine preserved at Museo di Storia della Medicina in Rome**



**Left:** Hitler's order to grant euthanasia to incurably sick patients. In English: 'Reichsleiter Bouhler and Dr. Brandt are assigned to be professionally accountable in charge to extend the legal authority of specific named Medical Doctors, so that they may grant euthanasia to as far as is humanly possible to tell incurably sick patients after most critical adjudication of their medical condition. -- A. Hitler'

**Center:** Nazi propaganda showing 'how much it cost' the German state to take care of the disabled. This discourse even appeared in children's math textbooks with arithmetic problems about the subject c. 1936

**Right:** Five disabled Jewish prisoners, photographed for propaganda purposes, who arrived in Buchenwald after 'Juni-Aktion'.

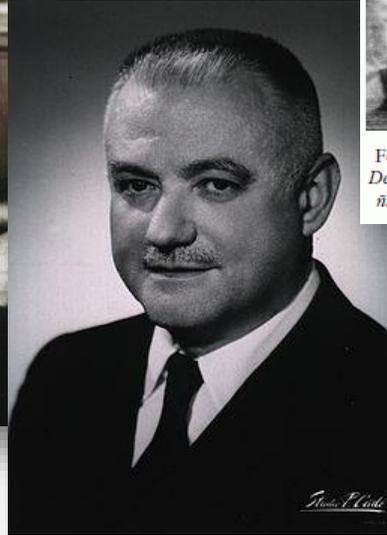




**Henri Laborit  
(1914-1995)**



**Jean Delay  
(1907-1987)**



**Pierre Deniker  
(1917-1999)**

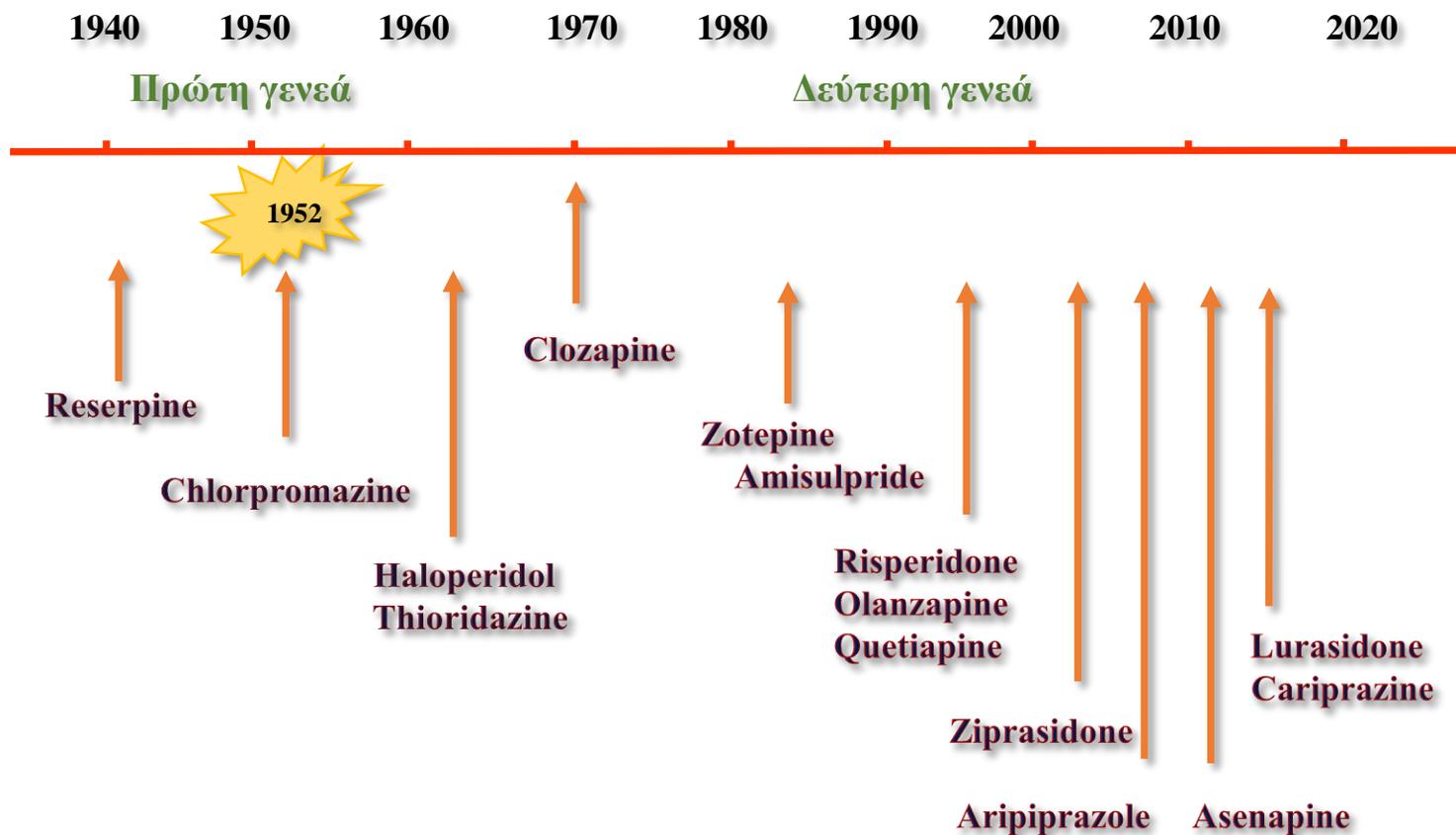


*Foto 15. Jean Delay con un abrigo oscuro, flanqueado por Pierre Deniker a la izquierda y por Pierre Pichot a su derecha y, acompañándoles, Bernard Sadoun, Jean Thuillier y Thérèse Lemperière.*

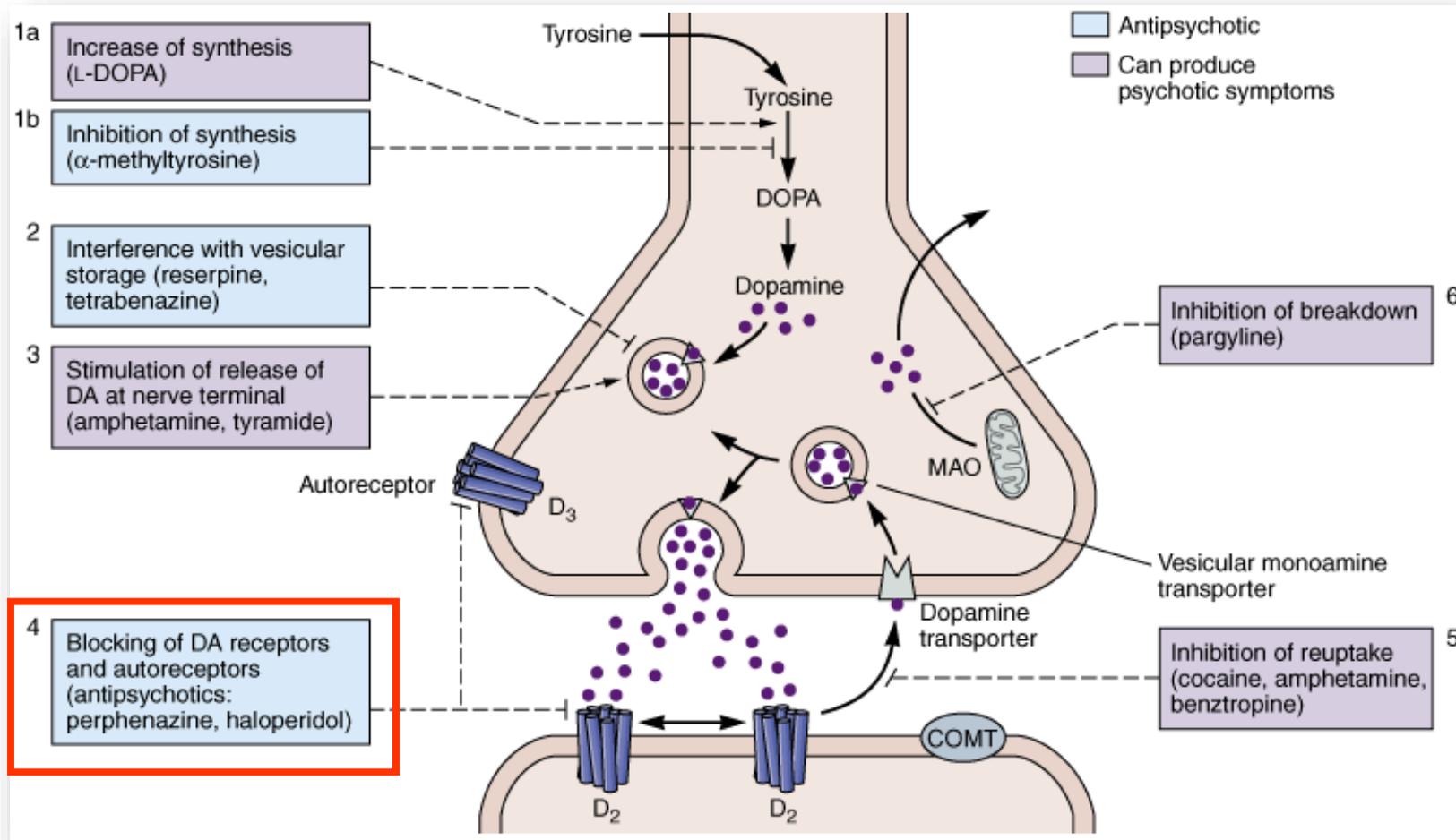


**Arvid Carlsson  
(1923-2018)  
Nobel Laureate 2000**

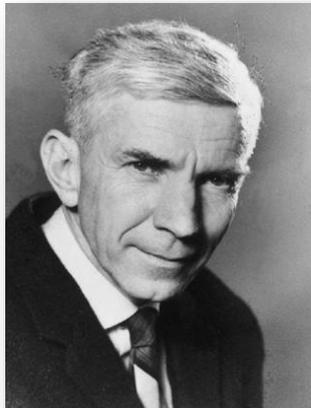
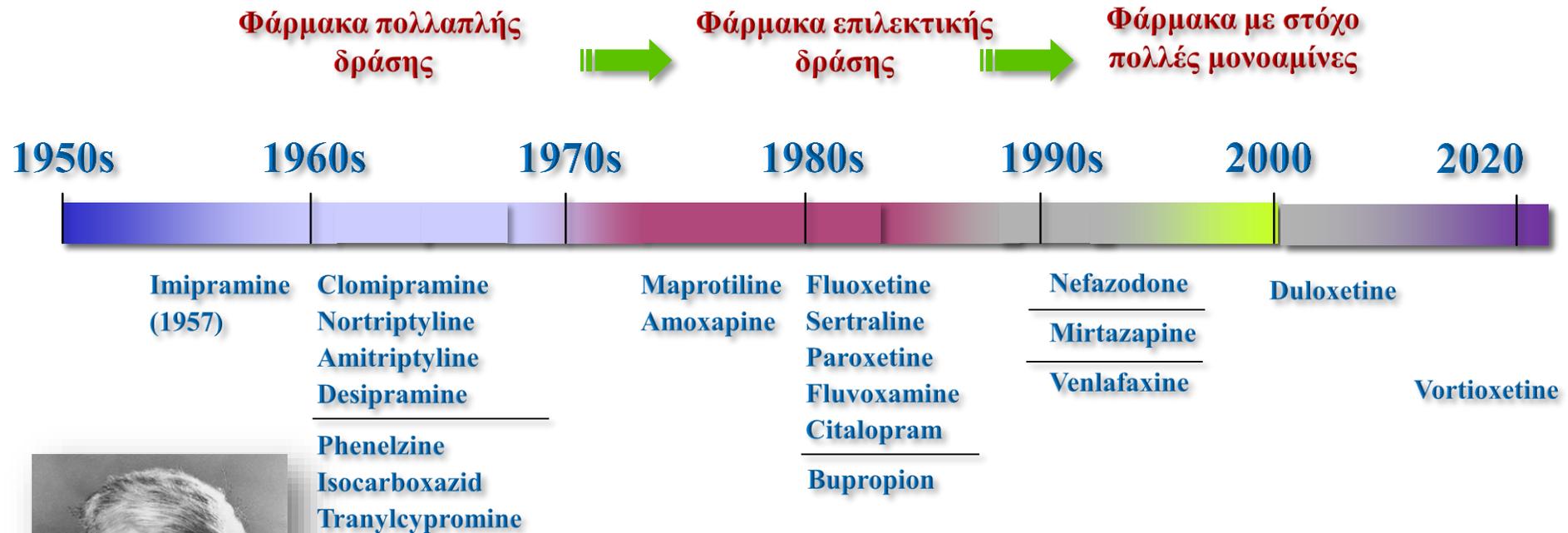
# Στιγμές-σταθμοί στην εμφάνιση των αντιψυχωτικών



# Μηχανισμός δράσης αντιψυχωτικών: αποκλεισμός των D2 υποδοχέων της ντοπαμίνης

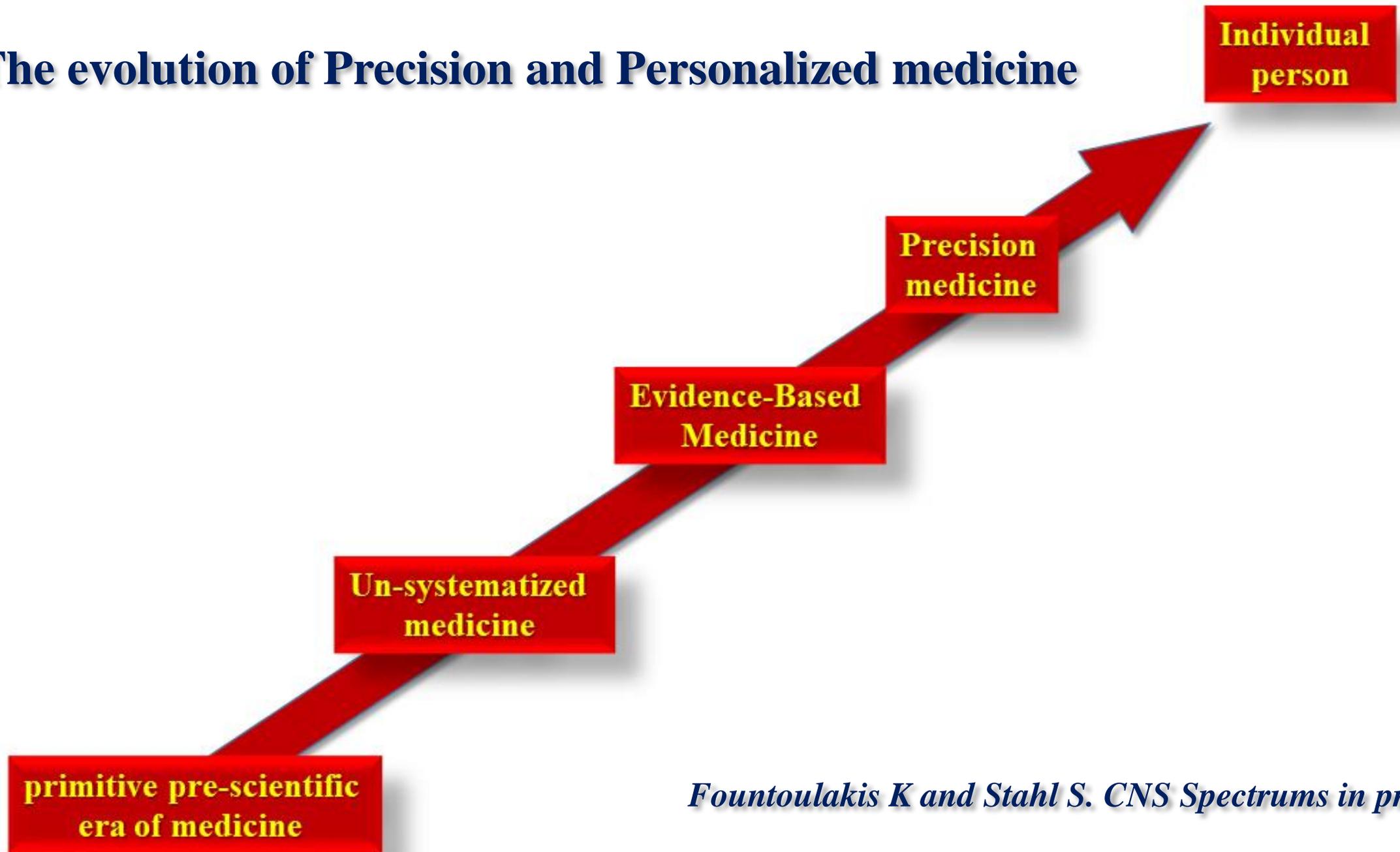


# Χρονολογικός πίνακας εμφάνισης των αντικαταθλιπτικών

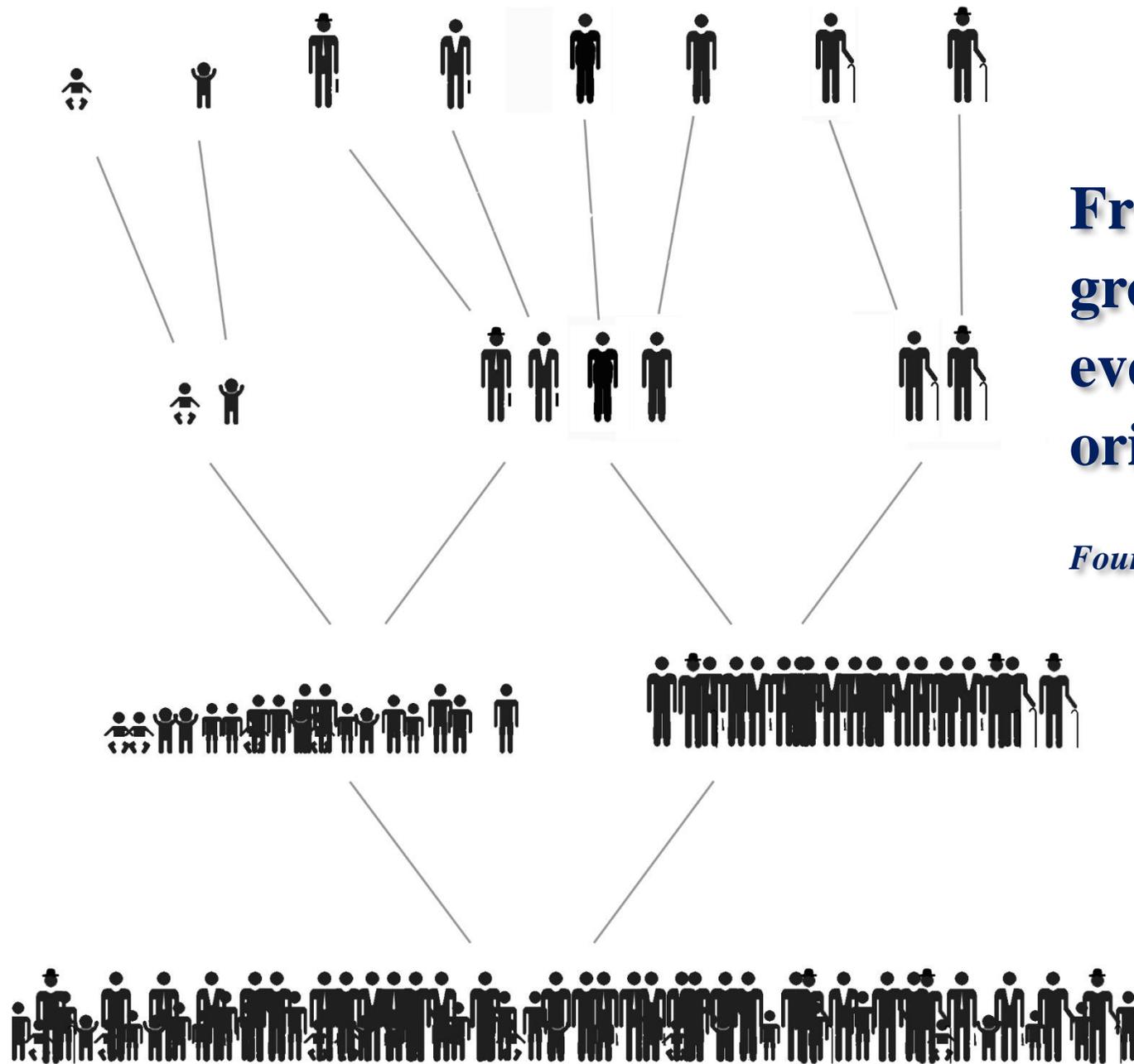


**Roland Kuhn (1912–2005)**

# The evolution of Precision and Personalized medicine

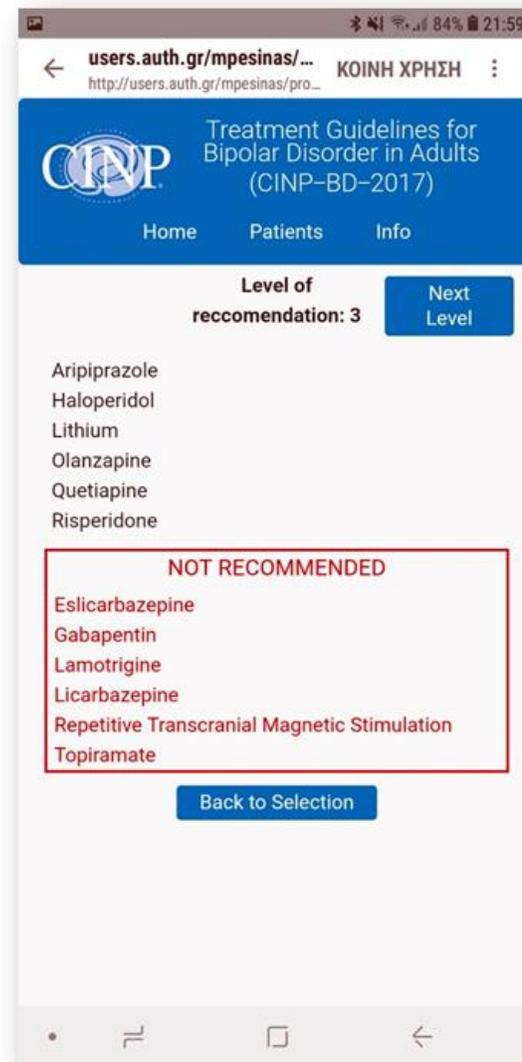
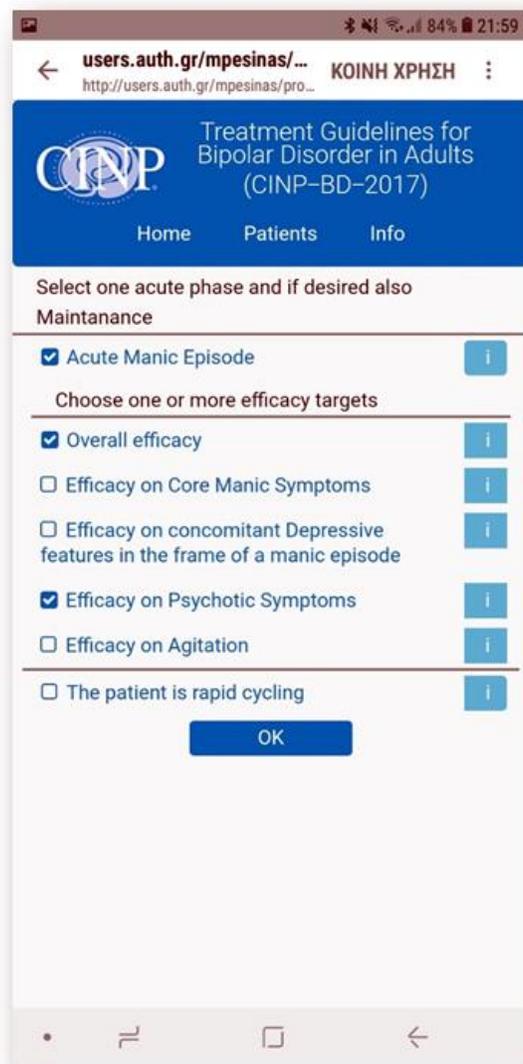
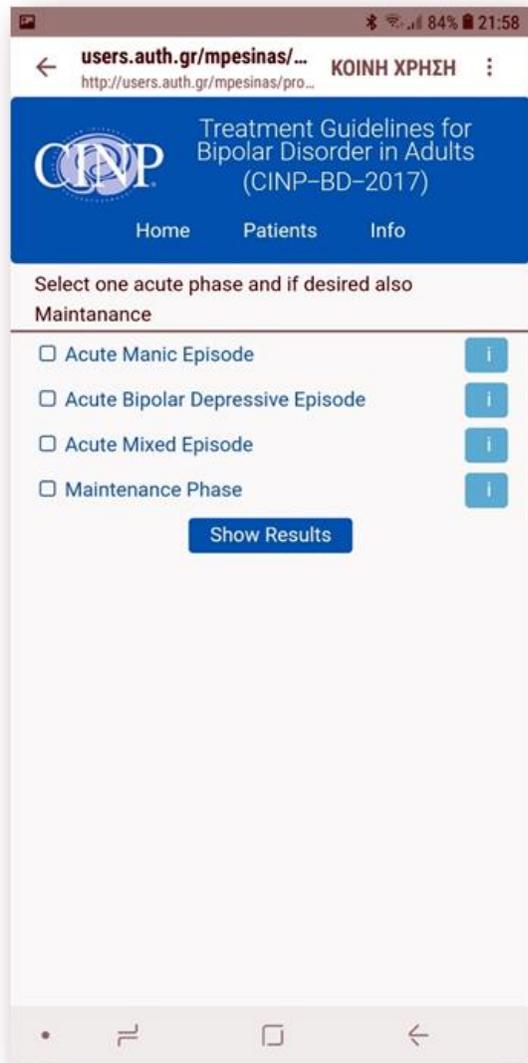


*Fountoulakis K and Stahl S. CNS Spectrums in press*



**From large to more defined groups and eventually to individual person-oriented diagnosis and treatment**

*Fountoulakis K and Stahl S. CNS Spectrums in press*



# What are the origins of Psychology?

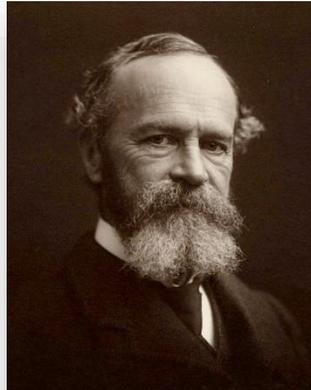




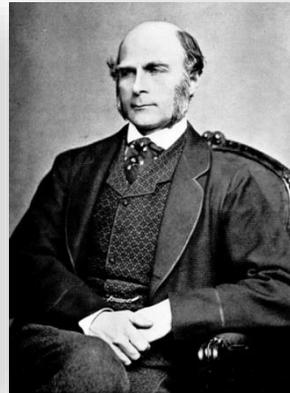
**Gustav Theodor Fechner**  
(1801-1887)



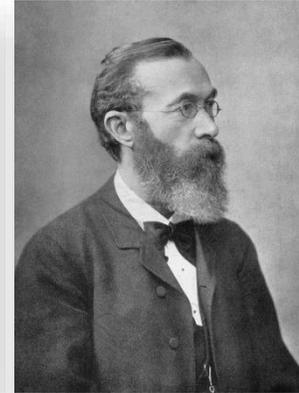
**Ernst Heinrich Weber**  
(1795-1878)



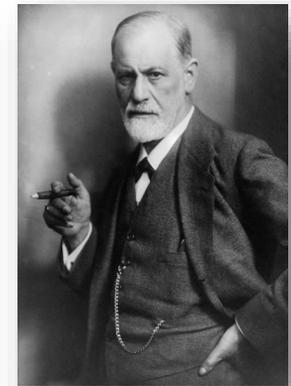
**William James**  
(1842-1910)



**Sir Francis Galton**  
(1822-1911)



**Wilhelm Maximilian Wundt**  
(1832-1920)



**Sigmund Freud**  
(1856-1939)

**Most ‘founding fathers’ of Psychology were physicians with a special interest in human behavior and internal experience. They established the ‘medico-psychological’ field**

**Some where anthropologists interested in individual differences**

**Philosophy was the motive and the ‘glue’ but not the origin**

# The concept and definition of mental illness

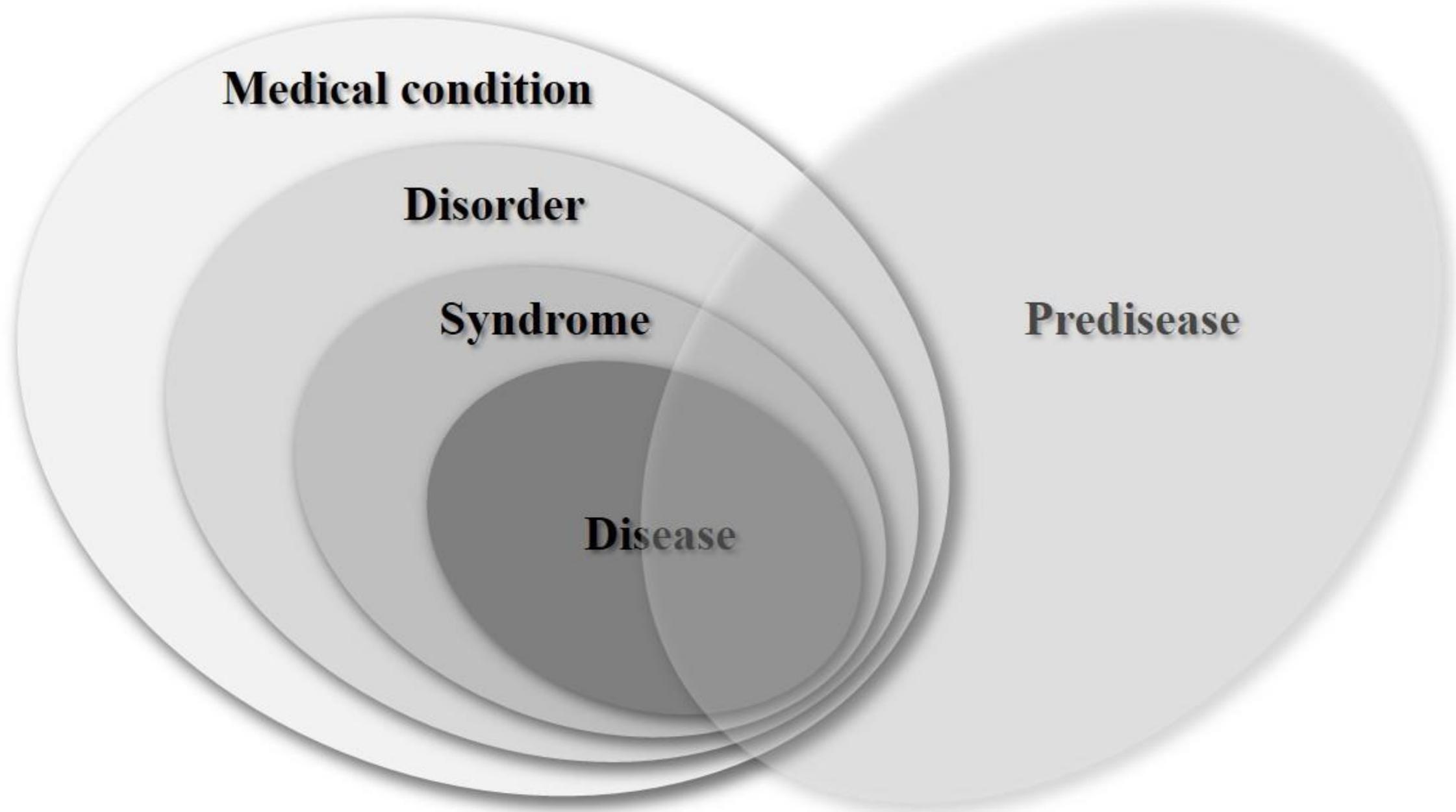


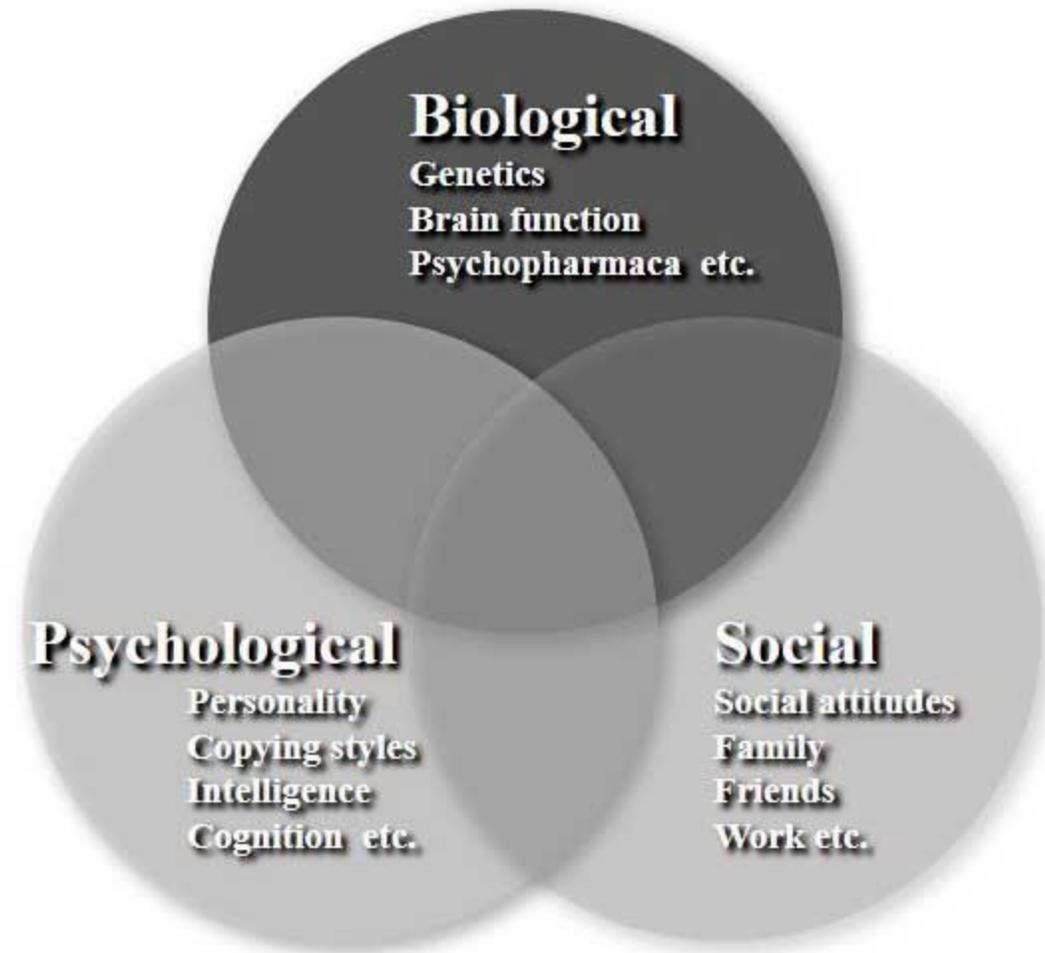
**Morality vs. Health**

**Normal vs. disease**

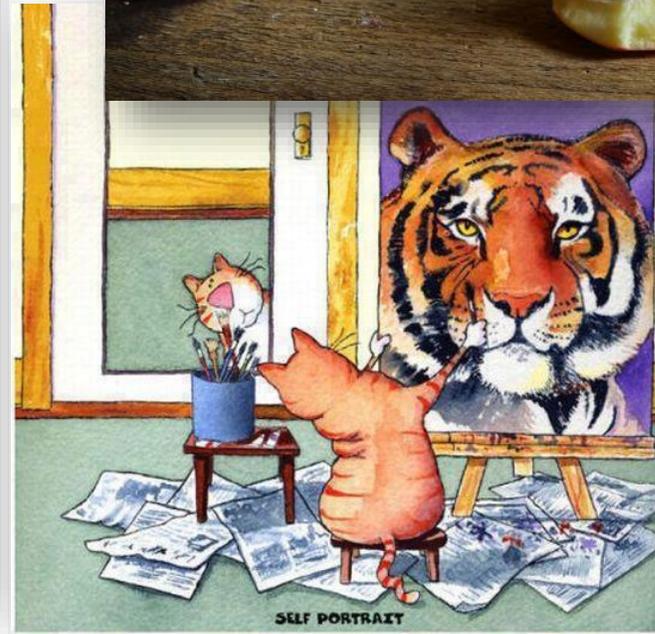
**Holistic vs. Reductionism**

- **Realism** assumes that the content of science is real and independent of human activities. The problem is that the nature of mental disorders is yet unknown, which is a problem not uncommon in other fields of medicine also.
- **Pragmatism** argues for a sensible approach to mental disorders by simply seeking categories that perform well in the world in an otherwise atheoretical way. This is currently the basis of contemporary classification systems.
- **Constructivism** suggests that social forces shape our conceptualization of mental disorders and this approach has been associated with anti-psychiatry activists. The existentialist approach should be considered as part of this third approach.
- **Naturalism** claims that disorder can be defined in terms of biological dysfunction (either with a causal or an etiological role) and it is a value-free concept (Wakefield et al. 2007; Wakefield et al. 2011; Wakefield and First 2013b, a; Wakefield 1998, 1993, 1992; Fulford et al. 2006c, e; Varga 2015).
- **Normativism** contrasts the previous approaches (Murphy and Woolfolk 2000; Murphy 2006; Kitcher 1996; Cosmides and Tooby 1987; Murphy and Stich 2000; Tooby and Cosmides 1990) and suggest that shifting values and social norms caused changes in mental disorder. These thoughts are based on the statistical theory of disease (rare somatic or mental conditions are abnormal and if dysfunction accompanies them, then there is a need for threatment) and the evolutionary approach to health and disease.





# The conceptual problem of Personality Disorders



# Mental health, society and the arts



An Achievement Born in the Raging Elements of Life's Emotions!



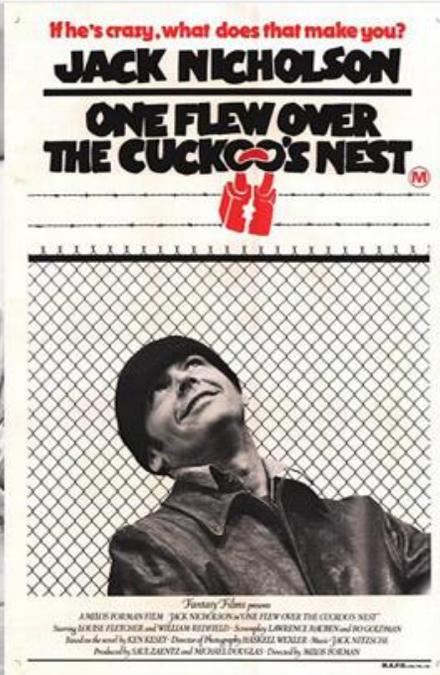
Darryl F. Zanuck presents  
**OLIVIA de HAVILLAND**  
the  
**Snake Pit**

also starring  
**MARK STEVENS** and **LEO GENN**  
with Celeste Holm · Glenn Langan  
and Helen Craig · Leif Erickson · Paula Boni · Lee Patrick · Howard Freeman  
Natalie Stryker · Ruth Dussanly · Katharine Locke · Frank Conroy · Maria Gordon

Produced by **ANATOLE LITVAK** and **ROBERT BASSLER**  
Screen Play by Frank Furica and Milton Brand · Based on the Novel by Mary Jane Ward  
Directed by **ANATOLE LITVAK**

**20th CENTURY-FOX**





**Left: Ken Kesey (1935-2001)**

**Center left: the poster of the film**

**Center right: Michael Douglas, Milos Forman, Louise Fletcher, Jack Nicholson and Saul Zaentz, posing with the five Oscar awards (1976)**

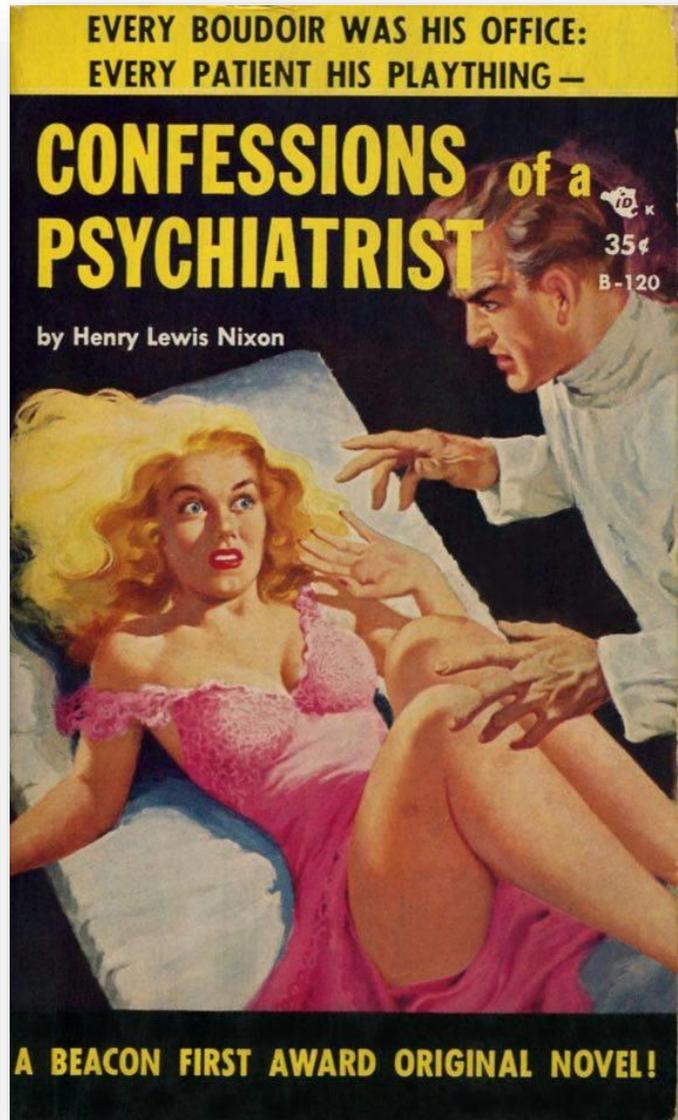
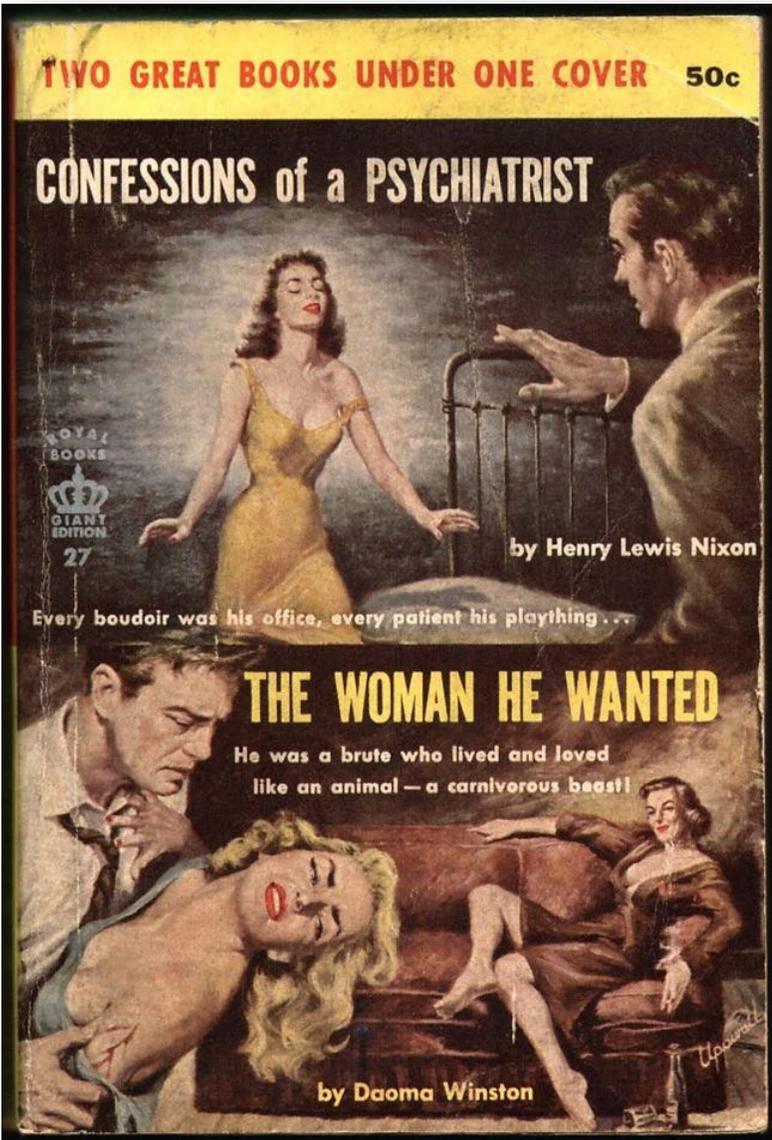
**Right: Dr. Dean Brooks (1916-2013) is shown with the hydrotherapy console that a patient uses to break a window and escape from the mental hospital in the film “One Flew Over the Cuckoo’s Nest.” Brooks also appeared in the movie as a psychiatrist.**

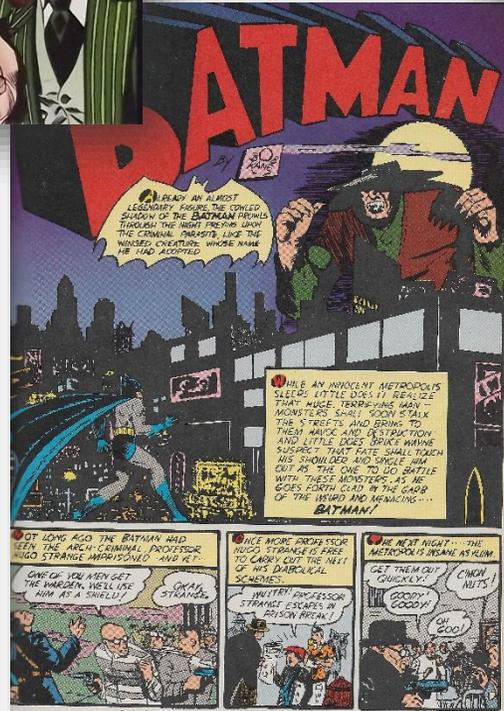
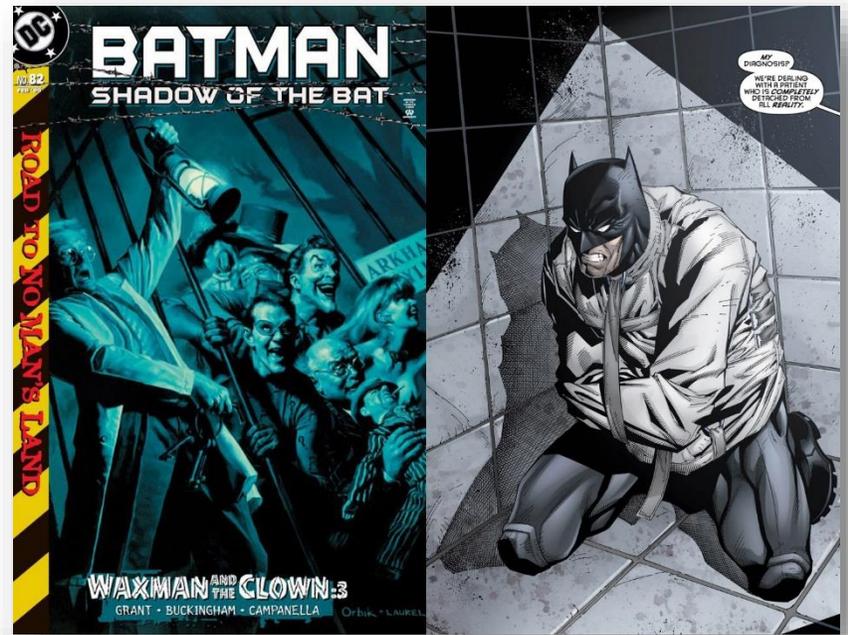
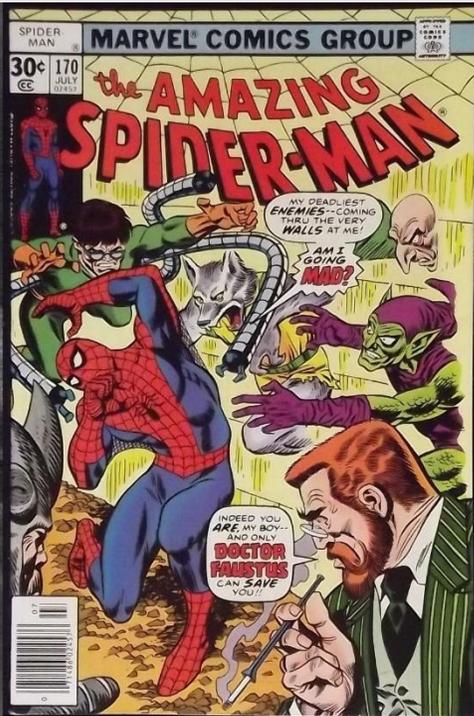
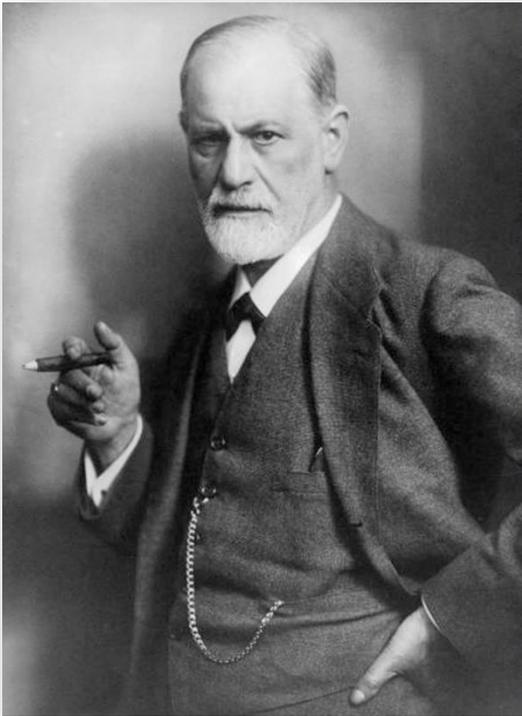




**Left: Barbara Gittings, Frank Kameny, and John Fryer in disguise as "Dr. H. Anonymous"**

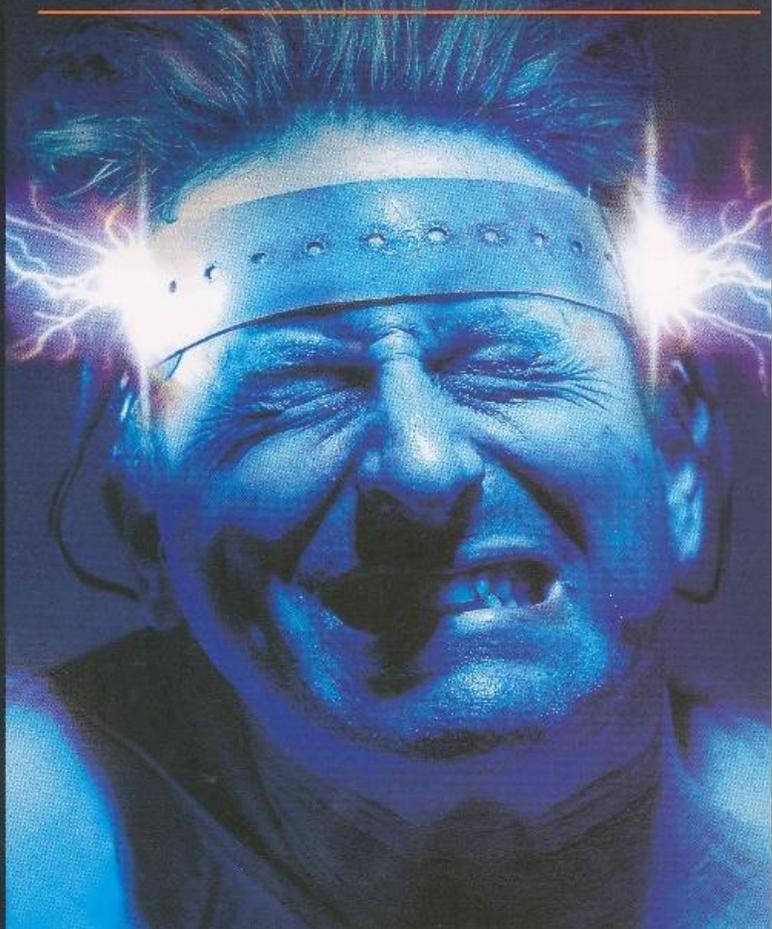
**Right: John Fryer (1937-2003)**





**INFLIGGERE DOLORE**

# LA PSICHIATRIA DISTRUGGE LE MENTI



Publicato come servizio pubblico dal Comitato dei Cittadini per i Diritti dell'Uomo





**Η Επιτροπή Πολιτών για τα Ανθρώπινα Δικαιώματα (CCHR)**  
ιδρύθηκε το 1969 από την Εκκλησία της Σαεντολογίας, για να ερευνήσει και να αποκαλύψει τις ψυχιατρικές παραβιάσεις ανθρωπίνων δικαιωμάτων και για να ξεκαθαρίσει το πεδίο της πνευματικής υγείας. Σήμερα έχει πάνω από 250 γραφεία σε 34 χώρες. Το σώμα των συμβούλων της, που ονομάζονται εντεταλμένοι, περιέχει γιατρούς, δικηγόρους, εκπαιδευτικούς, καλλιτέχνες, επιχειρηματίες και αντιπροσώπους αστικών και ανθρωπίνων δικαιωμάτων.



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### Antidepressant drugs don't work – official study

By Jeremy Laurance, Health Editor

Tuesday, 26 February 2008

Royal College of Psychiatrists

They are among the biggest-selling drugs of all time, the "happiness pills" that supposedly lift the moods of those who suffer depression and are taken by millions of people in the UK every year.

But one of the largest studies of modern antidepressant drugs has found that they have no clinically significant effect. In other words, they don't work.

The finding will send shock waves through the medical profession and patients and raises serious questions about the regulation of the multinational pharmaceutical industry, which was accused yesterday of withholding data on the drugs.

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It also came as Alan Johnson, the Health Secretary, announced he was to be trained during the next three years to provide nationwide access to "talking treatments" for depression, instead of drugs, in a £17m new generation of antidepressants, which include the best in class.

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### Prozac, used by 40m people, does not work say scientists

Analysis of unseen trials and other data concludes it is no better than placebo

Full text: the PLoS paper

Sarah Boseley, health editor  
The Guardian, Tuesday 26 February 2008  
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Last Updated: Tuesday, 26 February 2008, 11:36 GMT

Anti-depressants' 'little effect'

New generation anti-depressants have little clinical benefit for most patients, research suggests.

A University of Hull team concluded the drugs actively help only a small group of the most severely depressed.

Marjorie Wallace, head of the mental health charity Sane, said that if these results were confirmed they could be "very disturbing".

But the makers of Prozac and Sertraline, two of the commonest anti-depressants, said a spokesman for Glaxo the study only looked available.

Reviewed data

And Eli Lilly, which makes scientific and medical effective anti-depressants.

Alan Johnson, the Health Secretary, has announced 3,600 therapists are to be trained during the next years in England to increase patient access to talking therapies, which minister as a better alternative drugs.

Patients are strongly a medication, without it.

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Antidepressants no more effective than placebo, leading researcher claims in new book

By Steven Levingson

Antidepressants are little more than placebos, argues a new book on sale this week, adding to a long-brewing controversy over the drugs' effectiveness and raising questions about how America treats patients suffering from mental illness.

Irving Kirsch, a psychologist who has researched placebos and antidepressants for more than a decade and co-authored a seminal study in 1998, discovered after reviewing drug company data that there was little difference between the effects of antidepressants and the effects of placebos.

In "The Emperor's New Drugs: Exploding the Antidepressant Myth," Kirsch extends the argument to the nature of depression and its treatment. After years of assessing the clinical studies, he rejects the conventional belief that depression is caused by a chemical imbalance in the brain that drugs can fix. "The belief that antidepressants can cure depression chemically is simply wrong," he writes.

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### The Depressing News About Antidepressants

Studies suggest that the popular drugs are no more effective than a placebo. In fact, they may be worse.



Tom Schmitz for Newsweek. Illustration by Sarfan Ozan

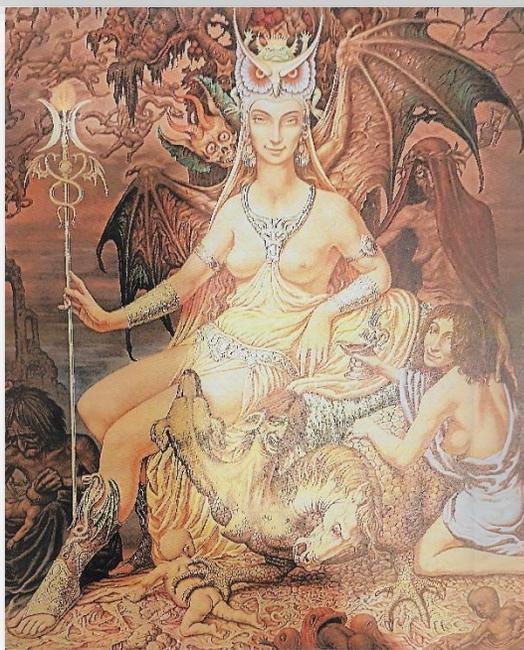
By Sharon Begley | NEWSWEEK

Published Jan 29, 2010

From the magazine issue dated Feb 8, 2010



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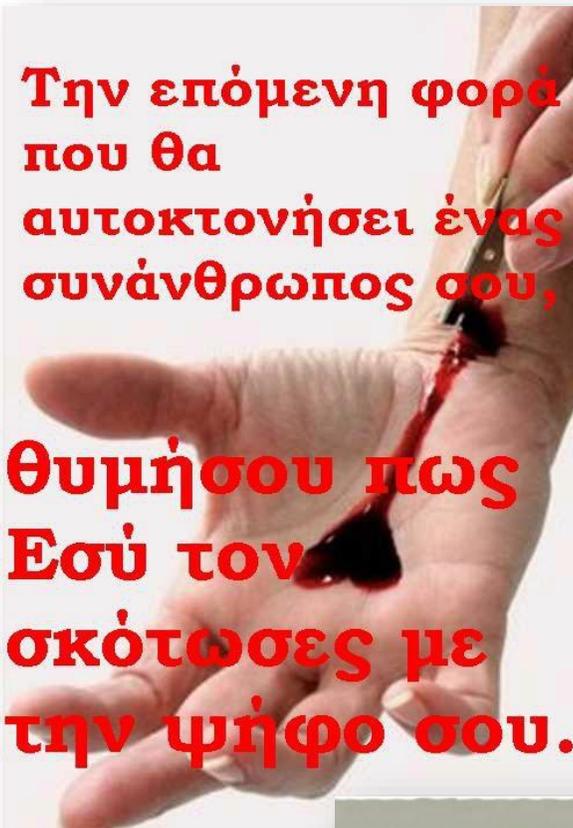
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