

Joseph Daquin Piedmontese Savoyard physician A "not well-known Chiarugi"

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Summary

We present a critical review of «La philosophie de la folie», second edition, published in 1804. Joseph Daquin's thoughts and clinical activity in the psychiatric field are described.

Daquin's ideas about various forms of madness and the different therapeutic, moral, physical treatments, his anatomical studies, successes and failures are presented.

Several clinical cases are described. The author's view of the moon's influence on madness is described.

Finally it is shown how very important was the human person and the moral treatment of madness for Daquin, in contrast with the current opinion at the end of 1700.

Resume

On presente ici une vision critique sur "La philosophie de la folie" dans sa deuxieme edition publiee en 1804.

Le contenu decrit la pensee de Joseph Daquin et l'activite clinique dans le secteur psychiatrique. La pensee de Joseph Daquin sur les differentes formes d'alienation mentale et les divers traitements therapeutiques, moraux, physiques; ses etudes anatomiques, ses succes et ses echecs sont exposes ici.

Plusieurs histoires cliniques sont decrites. On mentionne aussi l'idee de l'auteur au sujet de l'influence de la lune sur la folie.

Enfin, on voit que l'etre humain etait tres important pour Joseph Daquin et par consequence le traitement moral de la folie.

Joseph Daquin served as a physician in military and civil hospitals in Chambéry. He was also a librarian there and in addition, active at the university of Lyon, the agrarian societies of Chambéry and Turin, and the medical societies and board of Paris and Montpellier. Abbe Grillet said of Daquin that he was willing to involve himself with any useful organization, and that in many cases people benefited from his enlightenment, his zeal, and his concern for public welfare. Daquin's great knowledge of natural history and physics led to his appointment as chairman of these sciences in the "central

school" of the Mont-Blanc department. He was also selected to make the meteorological observations that the French Prime Minister had commissioned throughout the empire.

Daquin was a zealous promoter of vaccination against small pox. Elected secretary of the relevant central committee, he attempted through his work and writings to expand this practice. In an 1801 letter he described the advantages of vaccination, and in 1811 he prepared a French translation, with numerous marginal notes, of Doctor Sacco's treatise on the subject. On February 5, 1816, the French government acknowledged Daquin's contributions posthumously by presenting a silver medal to his heir.

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The great medical history of Salvatore De Renzi refers to Daquin as follows (1): *To complete, then, this concise review of chemical works published in Italy during this period, I will be satisfied to mention only the analysis of the Boisse mineral waters made by Joseph Daquin, who, with equal zeal cultivated both chemical and medical science.* De Renzi then provided a summary of Daquin's career, adding that in his 1791 book on madness he wisely demonstrated that such diseases could better be treated with moral support than with physical remedies, and noting his contention that the moon has a definite influence on madmen. Daquin's work was also described in Benedetto Trompeo's little-known *Essay on Turin's royal mad-house with some mention of the character and treatment of mental diseases* (2, 3).

Daquin has since been remembered in a number of medical history texts for Italian university students (4), as well as in Edward Shorter's recent *History of Psychiatry* (5), which provides the following discussion of his ideas concerning 'nerves': *A physician like Joseph Daquin, a consultant in the city of Chambery (which then belonged to the Italian Duchy of Savoy), would attribute the problems of the wealthy women in his private practice to the "vapours".* In his medical topography of Chambery, published in 1787, he said, *Nervous afflictions are not frequent in Chambery, yet we see today a greater number than previously; they have even spread to women of the countryside nearby the city* (6).

Shorter continues his summary of Daquin: These nervous "vapours", arising as they did from the uterus, could derange all the functions of the brain. Associated with women who led "a soft and sedentary life", such "vapours" sound like fairly significant disorders, deranging the functions of the brain and whatnot. But were these women "insane" in the sense of being candidates for admission to an asylum? Not at all. Their families would keep them at home. At

the same time, Daquin was medical director of the local hospice, or Hotel-Dieu, of Chambery and treated poor patients for insanity. Some of these Hotel-Dieu patients must have had symptoms similar to those of his private patients. Yet Daquin did not let the two worlds overlap. The author's extensive description on the title page of his topography says nothing about the psychiatric service of the Hotel-Dieu. In conveying his ideas to the public (5), Daquin kept nerves and madness quite separate and did not advertise that he functioned as a psychiatrist.

In the accompanying footnote, Shorter mentions in passing Daquin's 1791 essay on mental illness and the organisation of the asylum portion of the Hotel Dieu, in *La Philosophie de la folie* and a summary of this treatise. He refers to the work by Gauchet and Swain (7) and writes that the authors, however, end up making the ludicrous claim that it was Daquin who thought up moral therapy.

Intrigued by these various accounts, we were interested in gaining a deeper knowledge of Daquin's work in the psychiatric field. After careful research we came into possession of the second edition of the *Philosophie de la folie* (1804). By analyzing this revised and enlarged text in respect to the first edition of 1791 we have been able to study the evolution of Joseph Daquin's thought and practice.

At the beginning of the 1804 text, the author enumerates his writings, which confirm and augment the references cited by Bonino (Fig. 1). Daquin appears to us as a scholarly and committed physician, rather than as an individual characterised mainly by a provincial medical practice.

We analyse the text and we make a series of interesting observations: Daquin's dedication of his essay to Philippe Pinel alerts us to the forward-looking nature of his studies. His ideas about insanity were completely in accord with

those of the great French physician. More revealing still is the Prologue (*AvantPropos*), in which Daquin (Fig. 2) claims a sort of priority over Pinel in the care of acute madness (8): *Lorsqu'en 1791 je publiai l'ouvrage dont je donne id une seconds edition, je n'avois pas des donnees en assez grand nombre, ni des observations aussi positives et aussi repetees que je les ai aujourd'hui. Il n'avoit encore paru aucun livre sur la Folie, comme le Traite medico-philosophique sur l'alienation mentale, du Docteur Pinel* (a). Furthermore, he considers that his method of caring for mental illness with moral rather than physical therapy and that of Pinel developed independently of one another. In his prologue, Daquin condemns the practice of enclosing the insane in rooms *overly similar to prisons, damp and bad smelling, fit more for animals than for men*, and complains that if the State makes no financial commitment, society will certainly do little for the insane poor.

In his second edition, Daquin describes his examination, both of the clinical literature and that of the history of medicine, in works dealing with the serious subject of madness, and claims to have found nothing of value. Therefore, after 17 years of meticulous clinical work among the insane poor, he has decided to publish his results. Even in cases where, as he admits, his patients *were not restored to health, unfortunately*, Daquin is confident that he mitigated their sufferings and did not worsen their condition. The 1804 prologue concludes with a strong defence of the humanity of mental patients and makes an international appeal for research and care for mental illness, comparable to the public assistance provided for disabled war veterans and the like.

The *Filosofia delta follia* then begins with a lengthy 27-page introduction in which Daquin discusses:

1. the tragedy of mental illness
2. the general indifference in the past to this form of disease, except by the author himself

- and by Pinel
3. his attempt to identify the distinguishing features of mental health versus insanity
4. a preliminary classification of the various forms of insanity, such as 'furious', 'imbecile', 'dumb', and other subtle distinctions.

The body of the text consists of numerous case histories (*les observations*) of curable and incurable patients, all of whom, however, were studied with interest by Daquin, who may therefore be considered a pioneer psychiatric specialist. Now examine some of these *observations*, since they provide valuable insights into Daquin's personality and practice, revealing a forward-looking observer and therapist of mental illness. The case histories provide details of Daquin's philosophies, his therapeutic methods, and a series of clinical successes and failures which defined the career of an enlightened and sometimes prophetic psychiatric pioneer.

After mentioning the possibility of an hereditary predisposition to madness, Daquin emphasises the strong connection between the body and mind and states that influences generating insanity can be transmitted from the mind to the body, and vice versa. His first pair of observations illustrate the effects of physical illness on the mind: Two women, one suffering from smallpox, the other with arthritis, became deranged; the first good-humoured, the second morose. Leeches were applied to the nape of the neck and to the arms of both women, and they were given drastic purgatives: both recovered their senses.

Another pair of observations demonstrated the effects of the soul on the body. A thirty year old woman with a sad and meditative disposition became mad following a confession. Believing she saw the devil everywhere, she wished to stay alone in dark and solitary places. Cold baths, but above all consoling speeches and particularly human companionship, restored her sanity. After being deserted by her intended

Original internal cover showing the book title and the list of qualifications and offices carried on by Dr. Daquin.

husband, who married another girl, a twenty-five year old woman became furiously deranged: talking and shouting continuously, destroying everything that came within her reach. After six months Daquin gave up all hope of her recovery: the patient lived completely unclothed, she stopped eating, becoming gaunt and amenorrhoeal, and she was terribly aggressive to anyone who approached her. Before abandoning her case entirely, Daquin gave her a night-dress. The patient put it on, and from that moment started to improve in health: she gained weight, the menses reappeared; in brief, she recovered, became quieter and mindful of her health, and was allowed to walk out of her cell. After eleven months she was declared cured, and got a job serving a benefactress.

From these four cases Daquin deduces that in the first two, some anatomic alteration of the brain resulting from physical illness had influenced the patient's mind, whereas in the other two instances, a diseased soul altered the mind's functions. Diseases of the soul, he notes, are so persistent and difficult to cure that they are often despaired of. Daquin is therefore critical of anything that excessively stimulates the feelings, be it either passionate novels or religion and contemplative life, and claims that *we see in convents mad people of every kind*. Love, jealousy, envy produce furious derangement, he concludes, while excesses of tenderness, friendship, study, and religion cause quiet madness, imbecility, and intermittent insanities, the last featuring long intervals of calm and reason.

From these observations Daquin concluded that women are more susceptible to insanity than men because they are weaker, have more delicate constitutions, and are more sensitive to extremes of feeling because of the menstrual cycle and its cessation. Madness can be caused by pregnancy, difficulties in childbirth, and the disappearance of milk. His second group of observations feature a young mother who *lost the milk*, entrusted her child to a wet-nurse and

LA PHILOSOPHIE DE LA FOLIE,

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raux que par les secours physiques}

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Que ceux qui en sont atteints, <S^{prou}*
vent d'utie maniere non equivoque
rinfluence de la lune.

*Seconds Edition revue, augmtmtc'e elappuye'e.suf
un grand nombre de differentes pbservations.*

Viu- JOSEPH DAQUIN, Docteur err rmedecine de
l'Universiie de Turin ; Medecin dps hopitau*
civils et militaire j Asspcie honoraire de
l'Alhencc de Lyon ; de la Societe libra
d'Agriculture de Chanibcry, et de celle de
Turin; Correspondant de ia ci-devant Societe;
royale de jncefecine de Paris et de celle da
inedecine pratique de Montpellier; ex-Pro-
fpsscurs d'Histoire naturelle a l'Kcple centrale
du departement du Mont-Blanc, et Bibliothe->
caire de la ville de Chambery.

*Multi igitur ab animi pathemate pendente!,
bland?, ac leniter tractandi sunt: d nimid
remediorum copi& et yehementid, qvhiri
maximi abstincndum.*

BAGLIVI praxeomedicee, lib. I. cap, XIV

C H A M B E R Y ,

De rimpvimerio de P. CL&AS , rue Verit6
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fell into a cold madness, uncommunicative, one of the most resistant forms of insanity. She lay on straw in her own faeces, feeling nothing. This madness Daquin considered incurable because the blood is imbued with the milk's humours, and neither leeches nor temperate baths are enough to purge it.

These cases are followed by a portrait which minutely describes the distinctive features of the insane in:

1. They are physically strong, well able to withstand cold, heat, and lack of sleep; they have a surprising strength even if of delicate constitution.
2. They love tobacco.
3. They love pleasure.

Here Daquin's prognosis is gloomy: De-ranged people are difficult to treat and are

always a source of frustration to the doctor. Few recover, and only in England are there any hopeful results. Daquin cites the example of the hospital in York, where among 599 lunatics, 286 recovered, 151 became calm, 47 were incurable, 40 died, 37 men and 38 women remained in treatment. *We must give honour to the English, who have restored to society so great a number of people*, he concludes. *We can try to cure insanity*. Furious madmen can recover if they are cared for at the onset of their illness. Some cases remain inexplicable to medical science. Daquin refers to two of his patients, considered incurable, but who returned to reason following bouts of 'putrid' fever and 'quartan' fever, suffering even from serious oedema of the limbs. He complains that anatomy fails to provide satisfactory information about mental illness, and sheds only a weak light on remedies and cures. *It is very hard to take care of mad people*, he concludes: *it is the most difficult branch of medicine* (8).

Then, also after reading Pinel, I am persuaded that what I wrote in the first edition about my treatment of the insane is the most sure and reasonable method: the gentle way of treating them, gaining their confidence, and the use of therapie morale (a daily routine, physical exercise, freedom from restraint, light tasks, and all sorts of diversions). The doctor must identify himself with the insane character. People will shout the contrary when I say that it is necessary to speak continually about reasoning with madmen, but it is with consistency that we will restore them. I can report more than one case proving the success of this way to proceed (8).

In his third set of observations, Daquin recounts the case of a woman near thirty years old who had remarried, believing her husband had died. When he came back home and the woman found herself with two husbands, she lost her senses, falling into violent convulsions and maniacal delirium. She was taken to the

asylum with the consent of both husbands. Because the woman was insane but calm, Daquin subjected her to moral therapy. After nine months she became depressed and silent, rejecting food and drink. Nearly 23 days later, the doctor was sure he would lose her, but after looking at her near death, with her mouth half-open, he made her drink some sugared water: she seemed to appreciate it. Then Daquin tried again to nourish her with some orange-peel syrup. On the third day she drank some meat broth. Her voice, her sleep and her bodily functions were soon restored, the interviews resumed, and the doctor set her some small tasks in the garden. The recovery was definitive. After a year and a half of illness, she was restored to society.

Daquin on physical therapies

The deranged, if not dangerous, must not be shut up for long periods of time. The prison-cell is a torture which every madman strives to escape. Daquin also maintains that the horizontal position is detrimental to the furiously insane; it is necessary to let them stand and walk about, to lessen *the tension and the fullness of the cerebral vessels*. He is likewise critical (8, b) of the strait-jacket described by Cullen: dressing the madman in it during a furious attack is too difficult and binding him when calm is cruel.

Another form of therapy undertaken during the furious crisis is bleeding: this can sometimes be effective at the onset of the disease, but it is useless if the madness is long-standing. Daquin prescribes blood-letting from the foot. The temporal and jugular veins too can be bled, but better results can be obtained by lancing the cerebral vessels, [a terrible suggestion A.N!] It is better to err by bleeding too little than the opposite. Here Daquin cites the case of a youth between sixteen and eighteen presenting with mental derangement. After interviewing him, the doctor diagnosed masturbation was the cause of his insanity. Daquin succeeded in correcting him of

The second edition dedication of the «La philosophie de la folie» to Philippe Pinel and the priority claim.

AU Docteur PH. PINEL,
Professeur de l'école de médecine
de Paris, Médecin en chef de l'hô-
pital national des femmes, ci-devant
la Salpêtrière, et Membre de plu-
sieurs Sociétés savantes.

*J'*AVOIS adressé la première édition de cet ouvrage à l'humanité, parce que le sujet paroissoit m'en faire un devoir ; mais aujourd'hui j'en remplis un bien plus satisfaisant pour moi, Monsieur, et bien plus conforme à la chose, en vous dédiant cette seconde édition, parce que vous êtes cette précieuse vertu même, personnifiée. Votre écrit sur la Manie peint tout à-la-fois les sentimens généreux d'une belle ame et la fécondité du génie : on y trouve cette sensibilité sympathisante aux maux d'autrui, à côté des ressources salutaires de l'art pour les soulager. Ne sont-ce pas là des motifs suffisans pour vous

présenter le fruit de l'étude que j'ai faite de cette affligeante maladie, appelée Folie, et de l'intérêt que j'ai pris à ceux qui en étoient atteints ?

Je vous l'offre donc comme à l'ami du genre humain, comme à un homme vertueux et éclairé, et comme à un Médecin habile dans toutes les parties de l'art de guérir, et sur-tout dans celle-ci, qui en est la plus épineuse.

Recevez-le, Monsieur, sous ces trois rapports, en témoignage de l'estime sincère et de la considération distinguée de votre serviteur et confrère le Docteur

DAQUIN.

this vice, and he seemed to recover, but he fell again into temptation, presenting such a state of alienation that his parents called a country doctor who bled him three times in succession. After the third bloodletting, the poor young man fell into a state of permanent imbecility.

The source of madness is not always located in the head; it may for example be located in the lower abdomen. If the cause of imbecility is located in the stomach, an emetic can be effective. However, it is necessary to use these drugs sparingly because they push the blood to the brain through the carotids, and this may result in more damage than benefit to health. On the contrary, laxatives may be freely used; the insane always eat a lot, and prefer heavy food. The purgative relieves the head of unhealthy humours which are eliminated by the intestine. The diarrhoeic madman, for instance, is less furious and his ideas less odd.

Opium, however, is the heroic drug. The raging maniac, submitted to opium, is soothed; the circulation of the blood stabilised and he becomes cheerful and quiet; this drug may also be used as a cure when maniacs are calm. Most doctors prescribe opium in too low a dose, as the madman's humours are acidic and easily destroy it. Daquin prescribes twenty-five to thirty drops of laudanum of Sydenham or one to one-and-a-half grains of pure opium. Along with the opium, Daquin often prescribes camphor, but he does not believe in the effectiveness of such supposed specifics as safranum, castoreus and moss. He is also opposed to the use of hellebore. Although it was considered since the time of Hippocrates to be a very effective drug for insanity, it is toxic and can be used only on very strong people. Daquin considers hellebore more of a mythological drug than a practical remedy, citing the example in Pliny of Melampus, who cured the insanity of King Proteus' daughters with it.

Finally, physical therapy can involve warm or cold baths, but the warm bath should only be used where the nerves are dry and rigid, typically in melancholic people. Cold baths are more commonly used. Cold water may be spilled on the maniac's shaved head or ice applied in the form of a cap. On this subject Daquin reports the case of a robust and melancholic thirty-year-old man with bleeding haemorrhoids who began showing unequivocal signs of madness after the bleeding ceased. Upon seeing the patient's dry temperament, Daquin treated him with tepid baths and by sprinkling cold water on his head. After the 15th bath the haemorrhoids reappeared and began bleeding and after the 40th, he recovered.

Daquin concludes, however, that these chemical and physical therapies are insufficient. Of greater therapeutic benefit to the insane are mental hygiene, fresh air, and freedom under supervision: *They need to be closed in as little as possible*, exactly the opposite of what was routinely done for centuries. Music can also have beneficial effects: A case of furious madness treated by a physician in Chalons sur la Marne with a one hour concert is cited. Establishing a healthy daily routine is essential, and this is often at odds with practice in madhouses. For example it would be helpful for mad people to have a toilet in their cells. The food is often very heavy. They must take three well spaced meals a day with perhaps some fruit that they particularly appreciate between midday and suppertime. Water is the preferred drink, but may be better accepted if mixed with some wine.

Daquin also considers the possible use of electricity in the treatment of mental illness. Although not yet part of the psychiatric armamentarium, electrotherapy has been used for epileptics, paralytics, and apoplectics: why then, he argues, can it not be useful in cases of insanity? Perhaps such experimentation is not very *humane*, but it is necessary for medical

progress. Daquin concludes this section with a discussion of the therapeutic use of cold and warm mineral waters. The Aix warm water can be employed for the melancholy, imbecile, and dumb insanities; the cold, martial water of Amphion is more appropriate for the maniacal and furious. *I would have more trust in these therapies, than in the electricity*, he asserts. The Boisse water is not recommended, however, because it can bring on respiratory diseases .

The Moon's Influence on Madness

Along with many previous writers, Daquin is convinced of the moon's effects on the insane. In addition to citing the Abbe Toaldo, whose meteorological text he translated in 1784, Daquin reports his own research findings on the subject. The doctor selected five men and five women and followed them methodically, treating each subject in the same manner and recording their answers and the state of their health. Entering the patients' cells alone, he asked each of them how they were and whether they were sleeping well. Usually he did not receive an answer, so he next asked if they were eating well. Often he received complaints about the scarcity of the food — complaints which were found to be untrue. He asked the women about their menstrual cycles, and if (as often happened) no answer was forthcoming, he had the hospital attendants look at their underwear. He checked each patient's pulse, without encountering any particular resistance, and then ended the visit with an interview, by which he recorded the patient's mental condition: whether it was worsening, recovering or stationary. Finally Daquin correlated these observations with the moon's phases.

More than 800 visits in 16 years of research are documented and he found some lunar influence apparent in all cases. Although he could not determine precisely the mechanism responsible, it does not appear strange to Daquin that the moon's phases, along with other

climatic and meteorological conditions, could affect both healthy and deranged minds. At the new moon and full moon, madness is at its maximum, while during the last quarter phase it is lighter and then in the first quarter phase it is at a minimum. The moon's influence is greatest at the equinox and solstice.

In conclusion, the more closely the moon approaches the earth, the greater its effect on individuals. Daquin again cites the case of the girl who became mad following the desertion of her intended husband: this woman was very sensitive to the moon's phases. But lunar effects are the most extreme upon furious and incurable madmen. There is nothing magic in these effects; it can all be explained scientifically, just as Descartes and Newton affirmed the influence of the moon on the movement of the tides.

Address on Suicide

Suicidal people cannot be enumerated among madmen by the alienist. Deranged people rarely take their own lives, and this is proven in the asylum registers. Inmates there die from acute or chronic disease. The person who kills himself is wrongly considered as mad. Suicides are lucid and end their lives with determination and clearness of mind. However the suicide is not a hero: Cato killed himself to avoid seeing his country's downfall; he would have done better by endeavouring to save it. Certainly the person who bears his pain with fortitude and for a long time is braver than he who tries to free himself with suicide. Daquin calls the suicide cowardly, and concludes that such cases are a matter for the legal system, whereas it is necessary for medical science to attend to the insane.

Address on Drugs

It is interesting to note that near the conclusion of his essay the author justifies his title of *Philosophie de la Folie* because of his conviction

that insanity can better be cured with moral therapy and humane treatment than with specific pills or other drugs. The doctor himself, however, is necessary as a *guide and succourer* of the madman. Daquin refutes Rousseau's adage that *Medicine works without physicians*; it is necessary rather to prosecute quacks and corrupt doctors. It is more useful for the physician to comfort than to prescribe. *Chemists and medicasters will shout at me*, he fears. Yet by the end of the eighteenth century Daquin spoke out against the abuse of drugs and the enormous number of useless and dangerous preparations. It sounds like a recent problem.

Daquin then calls for the establishment of a new sort of school, which in addition to such subjects as mythology and history would teach anatomy. *Why not educate young people between 8 and 14 years old about the mechanics of the human body?* Finally, after a complaint against those physicians who place their theories before their humanity and good sense (here he is referring primarily to the contrast between Cullen and Brown), Daquin concludes his essay with a final Observation. After citing Franz Joseph Gall's research on the crania of the insane, Daquin reports his own observations of a 70 year old man, dead after spending 40 years in a mental hospital, who had a depression on the right side of his cranium. This depression must have dated from the patient's birth or early childhood. Daquin concludes that this injury to the cranium was probably the primary cause of his insanity.

Conclusions

We were intrigued by the figure of this student of insanity who lived at the end of the 18th century. From his text on madness emerges a portrait of an individual endowed with extraordinary humanity and honesty. A man of moderate means, he was, apparently free of the desire for money or power. This learned and cultivated man had a philosophy similar to our

own: humane and unsentimental. An objective, empirical observer, he tested his theories before adopting them. He expressed his findings clearly. He studied the clinical literature to discover how the Italian, the English, the French, and the ancient authors thought. Daquin denounced money-grubbing charlatans, and probably made numerous enemies. In a world in which in many places the insane were condemned and confined to cells like animals, living in straw among their own excrement, with keepers who undoubtedly mistreated them out of fear and ignorance, he was a physician who saw himself as a healer in the tradition of Hippocrates; who went into the cells and observed the patients directly.

Daquin saw his patients not as desperate, hopeless maniacs, but as individuals distinguishable by their language, their behaviour, their physical condition and their chances of recovery. He consoled them, observing that in this way they became calm. He treated them by contemporary methods but believed that *to each patient there is one cure*. We cannot generalise, he argued, all patients are not the same; it was only out of laziness, or despair, that other physicians used identical methods on all patients. Daquin argued this was wrong, and he took particular care not to worsen the patient's condition with drastic remedies. He insisted that one approach often made matters worse and he avoided persistent questioning of patients about the origins of their madness. There is often a protective, paternalistic attitude toward the insane in Daquin's work. Sometimes his writings seem to fall between early and modern medicine, between the stake and mad cages and modern psychotherapy, a bridge joining one way of thinking with another.

Daquin's recognition of insanity as an illness implies an acceptance of the essential humanity of the insane, and an understanding that although some people, as a result of a particular disease, or accident of fate, can fall victims to this unfortunate state, they can still be considered

individuals, deserving care and study. This was unusual thinking in his day. An openness and generosity of spirit is the appeal of Daquin. He was an asylum doctor of the late 1700s, who cared for sick minds in defiance of convention, yet sufficiently humble to recognise the limits of his own understanding.

According to Daquin, insanity has many symptoms which he attempted to identify and classify: there are gay and sad forms, chronic and acute forms, furious and estranged varieties, melancholy and stupid types. The treatment is different for every case. Madmen must be observed, followed, advised, comforted, and treated with medical and physical therapies, but mostly with philosophy to bring them relief: with consoling conversations, better nourishment and a pleasant environment including the open-air.

Daquin found moral treatment including conversation to be the most efficacious therapy. He thought little of pharmaceutical agents, apart from opium, seeing the results of moral therapy as the main indicator of good care. He likewise considered music to be one of the best forms of therapy, even though others considered Daquin the madman for this belief.

The standard medical opinion of the day was quite different from Daquin's views: pharmacy and medicinal herbs were greatly respected, and they were attributed with benefits which they did not in fact possess, resulting in the widespread use of some highly toxic compounds. Physicians like charlatans often sought to heal all diseases with the same medicine. Daquin, by contrast, advocated studying disease and anatomy in order to determine how to treat the patient, in the same manner that a person who understands the mechanics of an engine is able to repair it when broken. He was a strong believer in conducting autopsies: in such examinations lay the future and the hope of medical science. In order to further explore the influence of the moon and draw accurate conclusions he kept a

diary in which he meticulously recorded variations in symptoms over the course of the moon's phases.

There is similarly great precision in his therapies. In particular he studied diet: the number and quality of meals, which if too strictly enforced, would be refused. Water was seen as very important; wine less so, although Daquin advocated its use for melancholies. Warm and cold showers and baths were likewise exactly prescribed: their number and the appropriate type in relation to the patient's condition, as is the use of thermal waters and watering-places. Electric current was also cited as potentially useful in the treatment of insanity, although Daquin viewed this recent discovery primarily as a future hope. In conclusion, this physician whom history has remembered as a spa doctor, chemical analyst and meteorologist, emerges from our examination as an important figure in the history of medicine: a late 18th-century asylum doctor, contemporary with Pinel and Chiarugi and like them an early pioneer of modern psychiatric practice.

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In Giovanni Giacomo Bonino's two-volume Piedmontese medical biography (9), there is a discussion of Joseph Daquin just ten years after his death. Daquin, who graduated in medicine from Turin University in 1757, was born in Chambéry in 1733 to a family of distinguished magistrates. He died there in 1815 at the age of 82. Daquin's writings include *Lettres aux amateurs de l'agriculture* (Chambéry, 1771), to which the Abbe Grillet attributed the establishment of the Royal Society of Agriculture, Arts and Trade the following year.

Daquin published widely: on thermal waters, on putrid fevers, on meteorology, on theology. Other publications by Daquin include:

- *Analyse des eaux thermales d'Aix en Savoie* (Chambéry, 1773, in 8°).
- *Memoire sur la recherche des causes qui entretiennent les fièvres putrides a Chambéry* (1774, in 8°).
- *Analyse des eaux de la Boisse* (Chambéry, 1775, in 8°).
- *Essai meteorologique sur la veritable influence desastres, dessaisons, changementde terns, applique aux usages de l'agriculture, de la medicine, de la navigation, etc, pax Joseph Toaldo Vincentin, traduit de l'italien en fran-gais, avec des notes du traducteur* (Chambéry, 1782, in 4°).
- *Reponse a la lettre d'un Ecclesiastique fran-gais ecrite a Mr. l'Eveque de Chambéry, sous le nom du Rabin de la Synagogue d'Amsterdam, a l'occasion des notes du traducteur de Toaldo* (Chambéry, 1784, in 8°)
- *Reflexions d'un cosmolite sur celles du polite Solitaire de la Cassine, relatives aux eaux de la Boisse* (1786, in 4°).
- *Topographie medicate de la ville de Cham-béry et de ses environs.* (Chambéry, 1787, in 8°). This work was criticized by the compilers of the December 1787 «Oltremontana Library," but it received a gold medal from the Paris Royal Medical Society.
- *Defense de la Topographie medicate de Cham-béry contre un article du journal de Turin intitule Biblioteca Oltremontana* (Chambéry, 1788, in 8°).

His most significant medical work was *La Philosophie de la Folie, ou Ton prouve que cette maladie doit plutot etre traitee par les secours moraux que par les secours phisiques; et ceux qui en sont atteints eprouvent d'une maniere non equivoque l'influence de la lune* (Chambéry, 1791, in 8°)". The 1804 second edition of this work is dedicated to Prof. Philippe Pinel.

Notes

- a In 1791, when I published the first edition of this work, I had not yet assembled a sufficient number of facts, nor had I made as many specific and repeated observations as I have today. No study of Insanity has ever been published apart from Dr. Pinel's Medico-philosophical treatise on mental alienation.
- b "Le celebre Cullen recommande une chemise serree au corps, comme le meilleur moyen pour contenir les fous qui sont furieux; ce moyen paroit an effet assez convenir; mais, comment leur vetir cette chemise dans leurs acces de fureur, sans qu'il y ait du danger pour celui qui voudra s'en charger? avec quelle colere et avec quelle force ne se defendront pas les fous a qui il s'agira de l'endosser?"

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Biography

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