The history of psychology is permeated with the moral. Perhaps no other idea links the various concepts of madness more completely than that of a moral fault. Certainly morality, of a sort, was an important factor in the popular reaction to Freud's notion of the sexual nature of neuroses. More than this, however, there was, and probably still exists, the moral righteousness of those who strike out, ironically, at what has been called the "element of weakness" that exists in madness.¹ It is precisely this element of weakness which was given medical credence in the post-Darwinian, pre-Mendelian world through the school of French neurophysiologists led by Freud's teacher, J. M. Charcot.

Charcot, like many French psychologists, had recognized the biological significance of evolutionary theory. In an exposition concerning the influence of heredity in nervous disease, a case communicated to Charcot by Duchenne de Boulogne,² Charcot declared, citing Darwin, that the struggle for the conservation of life was "l'origine de toutes les maladies chroniques du système nerveux centrale."³

In March 1885, after a little over a year in the neurological department of the General Hospital in Vienna, Freud expressed the intention of applying for a travel scholarship offered by the Faculty of Medicine. It was, perhaps, the most momentous decision he was ever to make. His destination was to be the Salpêtrière in Paris, which possessed a wide


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range of clinical material in its department of nervous diseases, under the direction of Charcot.  

One of the things Freud noted about Charcot was that he used to say the work of anatomy was finished, and that the theory of the organic diseases of the nervous system was complete. Charcot saw the neuroses as the next problem, and it was he, more than anyone, who introduced Freud to the problem of hysteria and its etiology.  

For Charcot, there were two essential categories of etiological factors in hysteria: the hereditary and the traumatic, of which the former was considered of greater consequence. It is apparent that Freud gave ready acceptance to this etiology.  

Six months after his return to Vienna, Freud read a paper entitled "On Male Hysteria" before the Society of Medicine. Although the text has not survived, it was probably an attempt to convince his colleagues of the legitimacy of Charcot's thesis that hysteria was as common in men as in women. But it is the subsequent presentation, in November of 1886, which indicates Freud's acceptance of Charcot's hereditary hypothesis.  

In the "Observation of a Severe Case of Hemi-Anaesthesia in a Hysterical Male," Freud began with an account of the patient's family history. Although he gives considerable attention to traumatic factors, the hereditary ones are as interesting. Freud reports that the patient's father died in middle age of Bright's disease. His mother died, also in middle age, of tuberculosis. Headaches are duly noted. The patient had a brother who died of syphilitic cerebral affection, and another brother who was known to be a hysterical and suffered from attacks of convulsions, and so on. What is portrayed is a classic case of family disintegration and, to anticipate, of degeneration. Of some note, too, is the extremely diffuse nature of the ailments cited in the family history, which are no more than implicated in Freud's hysteric. It is almost guilt by association.  


Freud before Oedipus

Much the same impression is given in Freud's article "Hysteria," written for A. Villaret's Handwörterbuch der gesamten Medizin in 1888. Here Freud is much more explicit:

Hysteria must be regarded as a status, a nervous diathesis, which produces outbreaks from time to time. The etiology of the status hystericus is to be looked for entirely in heredity: hystericis are always disposed to disturbances of nervous activity, and epileptics, psychical patients, tabetics, etc., are found among their relatives. Direct hereditary transmission of hysteria, too, is observed, and is the basis, for instance, of the appearance of hysteria in boys (from their mother). Compared with the factor of heredity all other factors take a second place and play the part of incidental causes, the importance of which is as a rule overrated in practice.8

This suggests that Freud accepted uncritically the Charcot hypothesis concerning the etiology of hysteria and of nervous disease in general. Although, as he told Martha Bernays in 1885, he found in Charcot's lectures "an entirely new idea about perfection," this was soon to change.9 And it is in his newfound skeptical appreciation of Charcot that psychoanalysis had its origins.

In discussing the concept of heredity, one must bear in mind that the idea presented by Charcot and others had an important relationship to the doctrine of the hereditary transmission of mental characteristics discussed by Morel and Magnan. This doctrine of degeneration, which gained in influence in the decades just before the turn of the century, was the source of Charcot's concept of predisposition to hysteria and other nervous diseases. As Ola Andersson has pointed out, no attempt was made in this doctrine to differentiate between degeneration and heredity. Nor was there any clear line drawn between acquired characteristics or those of a transmitted nature. Indeed, degeneration, organic or moral, seems to have been generally considered hereditary.10

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10. Andersson, Studies, p. 37, n.1, and George Genil-Perrin, Histoire des origines et de l'évolution de l'idée de dégénérescence en médecine mentale (Paris:
In 1884, the year before Freud arrived in Paris, the important Société Medico-Psychologique opened debate on the question: "Existe-t-il des signes ou des indices qui permettent de connaître qu'une maladie mentale est héréditaire, en l'absence de renseignements sur les antécédents?" It was this issue which was to have profound consequences for the origins of psychoanalysis.

An important figure in the controversy that followed was Charles Féré. In 1884, in the *Archives de neurologie*, published under the direction of Charcot, Féré introduced the notion of "la famille névropathique." It was asserted that both sensory and motor diseases of the nervous system "constituent une seule famille indissolublement unie par les lois de l'hérédité." In this respect, hysteria and epilepsy were analogous diseases linked by their origins in the heredity of the individual. However, heredity itself was not seen to bring about the development of specific nervous diseases, but interpreted as causing a neuropathic disposition upon which nonhereditary factors directed their influence.

It is clear that Féré had not stated any startling proposal. Indeed, he was able to draw upon a large number of works dealing with the role of heredity in mental illness. It seems as though the concept of predisposition toward nervous disease was the prevalent orthodoxy of many French neurologists. Furthermore, the literature indicated more than a passing interest in the post-Darwinian notion of heredity. One of the leading French psychologists, Th. Ribot, claimed psychology had been transformed by the discoveries of the naturalists.

At this point, and for several years following, the psychological, anthropological, and philosophical literature was replete with discus-

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sions of the hereditary component in mental illness. It is of some note that the time of Freud's stay in Paris, from October 1885 to February 1886, was one of heated debate over heredity and degeneration. That Freud was very much aware of Féré's vast contributions to psychotherapy is indicated by the fact that Charcot makes specific reference to Féré in the very book Freud had permission to translate: *Leçons du mardi de la Salpêtrière (1887-8).* He is also mentioned in Freud's Preface to H. Bernheim's *De la suggestion et des applications à la thérapeutique,* and again in the bibliography to *The Interpretation of Dreams.*

The period 1892-93 seems to have been one of transition in terms of Freud's acceptance of hereditary etiology. In December 1892 and January 1893, Freud published, in two parts, "A Case of Successful Treatment by Hypnotism," in which he recounts a brief family history. Apart from the mention of a brother who suffered from neurasthenia, nothing is made of the so-called disposition.

On the other hand, in his obituary article on Charcot, published in 1893, Freud declared: "As for the etiological theories which Charcot defended in his doctrine of the 'famille névropathique' and made the cornerstone of his whole conception of nervous disease, they too will probably soon need to be probed into and corrected." This is a statement of some moment, particularly in relation to his translation of Charcot's *Leçons,* which he undertook during this period.

It is in Freud's footnotes to his translation that we find the most unambiguous, and probably earliest, contradiction of his teacher. In particular, Freud dismisses Charcot's assessment that heredity was the "true cause" of agoraphobia. Freud instead points to abnormalities in the sexual life, even going so far as to claim that the form of sexual abuse could be specified. However, he does admit heredity may vary the intensity of acquired nervous disorders. This was his boldest state-

ment of the sexual hereditary hypothesis that he developed in the following few years.\textsuperscript{19}

Of even greater significance, perhaps, was Freud’s rejection of the doctrine of the “famille névropathique”: “The conception of the ‘famille névropathique’ — which incidentally, embraces almost everything we know in the form of nervous disease, organic and functional, systematic and accidental — could scarcely stand up to serious criticism.”\textsuperscript{20}

Whether the popular ideas of degeneration, apart from the specific concepts of Féré and Charcot, had any effect on Freud’s attitude toward hereditary disposition one can only guess. However, Freud’s criticism of Charcot was much more than simple dissatisfaction with the idea of hereditary taint in a scientific sense. According to Hannah S. Decker, who has recently completed a revision of the reception of psychoanalysis in Germany from 1894 to 1907, failure to accept Freudian sexual etiology did not lie solely in any supposed puritanism on the part of the medical establishment. Far more important was the belief of German psychiatrists in the organic origins of nervous disease. This concept of predisposition to mental illness received “enormous support from the theories of racial or family ‘degeneracy’ in vogue at the turn of the century.”\textsuperscript{21}

That racial undertones were an important question in the debate over mental degeneracy is evident also in the French publications. In 1884, the noted physiologist Charles Richet published a questionnaire which he attributed to Galton. In it, questions relating to character, memory, and descendant and ascendant heredity occurred along with those relating to physical characteristics.\textsuperscript{22} About the time Freud was in Paris, Gustav Le Bon explicitly indicated the racial aspects of the debate. In 1886, Le Bon published a discussion of the inheritance of

\textsuperscript{19} Freud makes a similar criticism of Charcot’s theory of neuropathic disposition to Graves Disease, \textit{Standard Edition}, I, 139-140.

\textsuperscript{20} \textit{Ibid.}, p. 143.


psychological racial attributes. Although, in physiological terms, dégénérescence was seen as "un état anormal du système nerveux, donc quelquechose de fonctionnel," the meaning of the word shifted when aspects of intellect, character, morality, and even of race came into play.

Hence, Freud's attack on predisposition required much more than a revision of medical opinion; it necessitated also the elimination of the organic and often racial basis of those beliefs. It is likely also that Freud was very much aware of this difficulty that would hinder the acceptance of his alternative sexual etiology. In light of this, one can see greater meaning in a seemingly ambiguous statement Freud made in the case history of Frau Emmy von N. in *Studies on Hysteria*: "We should do well to distinguish between the concepts of 'disposition' and 'degeneracy' as applied to people; otherwise we shall find ourselves forced to admit that humanity owes a large proportion of its great achievements to the efforts of 'degenerates'."

Sometimes, one must be reminded that Freud did not conceive of his sexual etiology in a social vacuum. When one considers the environment in which Freud developed his criticism of hereditary disposition, it becomes clear that any concept of organic degeneracy, given its racial undertones, was totally unacceptable to him. One cannot be sure at what point Freud became aware of these possible interpretations of degeneracy, but one can be certain that they did not escape him.

It should also be remembered that Freud's Paris experience would not have left him immune to the realities of racism. Freud arrived in Paris during a period of virulent anti-Semitism that had come to the


24. Henri F. Ellenberger suggests a connection between dégénérescence mentale and late nineteenth-century Neo-Romanticism. See *The Discovery of the Unconscious*, p. 281. Clearly, the psychological concept of dégénérescence was put to good use by the anti-Semites. However, Féref later gave a hint of his fears over misinterpretation of the role of heredity in psychological and physical abnormalities: "In the human races in particular, degeneration is not manifested, whatever some authors may have said about it, by returns to ancestral forms, but rather by evolutionary disorders bringing on somatic deformities and functional perversions incompatible both with the adaptation now necessary and with accepted adaptations" *Popular Science Monthly*, 47 (1895), 396.

fore in the aftermath of the collapse in 1882 of the Catholic bank, the Union Generale. From this situation there arose, in the spring of 1886, Edouard Drumont’s rabid best-seller, La France juive.26 Though it is quite unlikely Freud was still in Paris when the work received its initial acclaim, it is a singularly important reflection of the uses to which “scientific” researches could be and were put.

Though many French anthropologists were unhappy with the anti-Semitic applications of their material, there was ample confusion among Jews and anti-Semites alike concerning the difference between race and religion.27 This was skilfully exploited by Drumont in La France juive.28

More important, however, was Drumont’s use of psychological material to assert that neuroses were particular maladies of the Jews. He cited statistical evidence which purported to show a higher rate of mental illness among Jews than among the Christian populations of Bavaria and Italy.29 Beyond this, however, Drumont made use of statements attributed directly to Charcot, “dans son cours de la Salpêtrière,” concerning the illnesses of Russian Jews.30 Hence, by 1886, it was apparent that the material examined by anthropologists, and by psychologists in particular, was being used to enhance the racist ideologies of the French Right. Given Freud’s immense sensitivity to anti-Semitic racism, it is clear that his appreciation of the role of heredity in

27. Marrus, ibid., pp. 10-27.
29. Ibid., I, 105-106. Similar evidence was reported in the Société d’anthropologie de Paris: Bulletin et mémoires, 3rd ser., 7 (1884), 698-701. See also Dejerine, L’hérédité, pp. 169-170. It should be noted that the Jewish community of Paris were not above playing the same statistics game. The prestigious Archives Israélites responded in kind in 1885. Reviewing statistics on crime, from counterfeiting to incest, the Archives reported, “La conclusion est tout à l’honneur des Israélites.” Archives Israélites: Recueil politique et religieux hebdomadaire, 46 (August 13, 1885), 260-261. On Drumont, see Archives, 47 (November 18, 1886), 361-362; 47 (November 25, 1886), 369-371; 47 (December 2, 1886), 377-379.
character formation could not have remained unaffected by these interpretations.31

From 1887 to 1902, Freud carried on a voluminous correspondence with Wilhelm Fleiss, a nose and throat specialist living in Berlin. It is this correspondence, complete with Freud's "Drafts" of papers, which affords the best glimpse of his developing ideas in the period prior to *The Interpretation of Dreams*. It is in these letters and drafts that there exists the most complete record of Freud's struggle with the role of heredity in nervous disease.

In Draft A of the Fleiss correspondence, dating probably from the end of 1892, one of the problems Freud sets himself is to discover whether heredity is anything other than a multiplying factor.32 Although this is only one of a number of problems Freud outlines, it is a continuous theme throughout his early work.

It is quite evident that Freud's main concern at this point was the organic disposition to neuroses. Although he sought a means by which to reject the organic heredity explanation put forth by Charcot, such a rejection, when it came, did not mean that the hypothesis of the sexual etiology of neuroses was without an organic component. On the contrary, as the theory of hereditary etiology had within it the seeds of its own destruction, it is possible to see the subsequent sexual etiology as derived from that based on heredity.33 How this came about can be traced in the Fleiss correspondence and in Breuer and Freud's major effort, *Studies on Hysteria*.34

In a letter to Fleiss dated May 21, 1894, Freud lists general classifications of the etiological factors in neuroses. These are: (1) degeneracy, (2) senility, (3) conflict, and (4) conflagration. While he does admit there are cases where heredity plays a role, these he limits to the neuroses of the first category.

The manner in which he does this is of some interest. He points out that in all the known mechanisms of hysteria what undergoes change is sexual excitation. Such a thesis, of course, severely restricts the role played by heredity in such disorders. Furthermore, by linking degenera-


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cy with sexuality, Freud had both limited the scope of hereditary factors as well as provided, at least in one of his four categories, an organic (hereditary) basis for the theory of sexual etiology. Thus, disturbances of sexual affects could have origins in both disposition and acquisition.

The year 1895 was one of Freud's most prolific. In it he published *Studies on Hysteria* with Josef Breuer, as well as completing the difficult "Project for a Scientific Psychology." It is the *Studies* which concern us here. The nature of the case histories is particularly noteworthy. Of the five cases presented, only those of the famous Anna O., by Breuer, and of Frau Emmy von N., by Freud, indicated any evidence of neuropathic heredity. However, within Freud's four case histories taken together, and most particularly in the case of Frau Emmy von N., there seems to have been some uncertainty concerning heredity. One might speculate that this case was a point of transformation in Freud's thought.

In his discussion of the daughter of his patient, Freud noted certain psychological changes in the prognosis of which he referred to several step-brothers and sisters who were paranoic. While this was obviously considered a case of heredity in one half of the family and of environment in the other half, Freud went on to state that in the daughter's family "there was no lack of neuropathic heredity." Yet, in the history of Miss Lucy R., Freud describes the case as one of a type which could be acquired by persons of "sound heredity." But, he goes on to state, "It should be understood that I do not mean by this a hysteria which is independent of any pre-existing disposition. It is probable that no such hysteria exists."

What Freud attempted to do was rob Charcot's heredity of its importance in the origins of neuroses. This he did by isolating two different forms of preexisting disposition. The neuropathic disposition we are already acquainted with. It is evident before the actual onset of illness in the patient's hereditary taint. This, supposedly, could be revealed through a detailed family history. The other form of disposition presupposes "nothing more than the possession of what is probably a very widespread proclivity — the proclivity to acquire hysteria." Such an explanation, however, is rather unsatisfying. As Freud noted in his

35. The *Project*, otherwise known as "Psychology for Neurologists," was published posthumously in 1950.
37. Ibid., p. 120. See also Richard Wollheim, *Freud* (London: Fontana, 1971), p. 33.
next sentence, "We have as yet scarcely a notion of what the features of this proclivity may be." 39

Freud, however, was beginning to pay significant attention to the role of sexuality. In his final history, that of Elisabeth von R., Freud described the origins of the hysterical attack in terms of conflict with erotic desires. If one couples this with the picture of no appreciable hereditary taint and the complete reverse of any degeneracy, then it is obvious that Freud had placed severe limitations on Charcot's hypothesis. 40

The limits of the role of heredity were expressed in Draft K of the Fleiss correspondence. Dated January 1, 1896, and entitled "The Neuroses of Defence," the paper explicitly defined the limits of heredity by saying it was an "extra determinant" which is responsible for variations in the degree of the pathological effect. The precipitating cause of the defense neurosis, whether hysteria, obsessional neurosis, or paranoia, is of a sexual nature and occurs before sexual maturity. 41

Obviously, the major recipients of Freud's criticism were those members of the Charcot school who still espoused the theories of degeneracy and "famille névropathique." To drive his point home, Freud published a paper entitled "L'herédité l'étiologie des névroses" in the Revue neurologique for March 30, 1896. Here he addressed "in particular the disciples of J. M. Charcot." 42

Freud listed several objections to the concept of nervous heredity, specifically the problem of the loose definition of what was to be regarded as nervous, along with the difficulty of dissimiliar heredity, where the widest range of nervous disease was said to precipitate disorders of some other form. 43

For Freud, however, heredity was of the nature of a precondition of a severely limited variety. He compared its action "to that of a multiplier in an electric circuit, which exaggerates the visible deviation of the needle, but which cannot determine its direction." 44

It has been noted that as Freud limited the hereditary aspect in his

39. Ibid., p. 160.
40. Ibid., p. 202. The emphasis of Breuer and Freud did not go unnoticed. One reviewer of the Studies questioned the legitimacy of penetrating the private affairs of the patient, particularly where sexual relations were concerned. Freud, Letters to Fleiss, p. 156, n. 1.
41. Freud and Breuer, Studies on Hysteria, p. 146.
43. Ibid., pp. 143-145.
44. Ibid., p. 147.
etiological theory, the role of sexuality increased. This led him to discover a partial alternative to the theory of family degeneration. He found that the appearance of neurotic disposition within a family could sometimes be explained by a "pseudo-heredity," in a case where several children in a family were subject to seduction or sexual abuse by one another. This necessarily gave the impression of a hereditary component if subsequent hysterias developed.\(^4\)\(^5\)

Freud was led to these suspicions through the clinical revelations of his patients, who often recounted episodes of seduction by close relatives. Thus occurred the submergence of the hereditary hypothesis in that of a sexual etiology. In 1896, Freud declared boldly, "heredity is seduction by the father."\(^4\)\(^6\) Hence, the perversion in one generation of a family could be transformed into hysteria in a second generation, and still give the appearance of organic disposition.

This seduction hypothesis that promised so much was soon to be rejected. And yet, Freud was so close to what was to become the keystone of psychoanalysis — the Oedipus complex.

On September 21, 1897, after a long summer holiday, Freud again wrote to Fleiss:

> Let me tell you straight away the great secret which has been slowly dawning on me in recent months. I no longer believe in my neurotica. That is hardly intelligible without an explanation; you yourself found what I told you credible. So I shall start at the beginning and tell you the whole story of how the reasons for rejecting it arose . . . . blame was laid on perverse acts by the father, and realization of the unexpected frequency of hysteria, in every case of which the same thing applied, though it was hardly credible that perverted acts against children were so general. (Perversion would have to be immeasurably more frequent than hysteria, as the illness can only arise where the events have accumulated and one of the factors which weaken defence is present.) Thirdly, there was the definite realization that there was no "indication of reality" in the unconscious, so that it is impossible to distinguish between truth and emotionally charged fiction. (This leaves open the possible explanation that sexual phantasy regularly makes use of the theme of the parents.)

> . . . Now I do not know where I am, as I have failed to reach


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theoretical understanding of repression and its play of forces. It again seems arguable that it is later experiences which give rise to phantasies which throw back to childhood; and with that the factor of hereditary predisposition regains a sphere of influence from which I had made it my business to oust it — in the interest of fully explaining neurosis.47

Freud was very close to Oedipus when he mentioned the use of the parents in sexual fantasy. And then he wrote again, less than a month later:

Only one idea of general value has occurred to me. I have found love of the mother and jealousy of the father in my own case, too, even if it does not always occur so early as in children who have been made hysterics. (Similarly with the romance of parentage in paranoia — heroes, founders of religions.) If that is so, we can understand the riveting power of Oedipus Rex . . . Each member of the audience was once, in germ and in phantasy, just such an Oedipus.48

The rejection of the idea that the neuroses were based primarily on a hereditary disposition was the key to Freud’s discovery of sexual etiology. Such sexuality was found to exist within the family, in particular through the Oedipus complex, and therefore sexual etiology was an alternative, rather than contradictory, hypothesis to that expressed by the Charcot school. Hence, sexuality still had a parallel organic element, however limited.

It has been suggested that the concept of the sexual etiology of neuroses, which subsequently pointed the way to the Oedipus complex, was in part the result of Freud’s analysis and restriction of the role of heredity expounded by the so-called Charcot school. Indeed, Freud’s limitations on the significance of hereditary disposition seem, in retrospect, a rather effective means by which to clarify the role of sexual abnormalities in the family. The moral implications of theories of degeneracy were evident in the numerous proposals for sterilization of prostitutes, alcoholics, and various social misfits. The acceptance of the hereditary etiology of neuroses was often linked with a moral revulsion toward illegitimate children, prostitutes, and beggars. One Professor Pelman of the University of Bonn, in an attempt to calculate the finan-

47. Ibid., pp. 215-216, 216, n. 3. My italics.
48. Ibid., pp. 223-224.
cial cost to the state of social maladjustment, purported to show the hereditary transmission of various criminal and antisocial tendencies through 834 individuals.49

It has further been proposed that Freud’s criticism of heredity had its roots in his personal reaction to anti-Semitism, which found some confirmation in the prevalent anthropological and psychological examinations of race and degeneracy. It is likely that his very sensitivity to racist anti-Semitism was one factor which made any concept of organic determination of character anathema. There is no lack of evidence of this sensitivity, justified as it was, given the times. Between 1867 and 1914, in the Austrian Empire alone, there were no less than twelve trials for ritual murder with Jews as defendants.50

Anti-Semitism was rampant in the last decade of the century. In 1893, Father Joseph Deckert published A Ritual Murder, Established as Fact by Official Documents of a Trial. In 1899, the year of the completion of The Interpretation of Dreams, in which Freud’s Oedipus complex made its first public appearance, a Jew by the name of Hilsner was convicted of ritual murder in Bohemia.51 This was the world in which Freud developed the concepts of sexual etiology which critically restricted theories of hereditary determination of character.

Hence, Freud’s limitations on the role of heredity in mental disorders, and its subsequent displacement by sexuality, may be seen as an effort to reject the racial component in the concept of hereditary degeneracy he encountered in Paris under the tutelage of Charcot.

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