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Historiographical framework

As stated by Roy Porter, “the critique of the epistemological status of insanity” in Michel Foucault’s *Madness and Civilization* (1961), which inverted the traditional history of psychiatry by converting its heroes, i.e., the doctors, into villains, as well as the anti-psychiatric movement, as evidenced in the works of the American psychiatrist Thomas Szasz, *The Myth of Mental Illness* (1961) and *The Manufacture of Madness* (1970), which considered mental illness to be a myth forged by psychiatrists for their own glorification, made psychiatry and social policy towards the mentally ill from the 1960’s onwards a subject of intense historical and sociological analysis. These ground-breaking publications gave rise to several critical historiographical works, which Porter referred to as representing the “new” history of psychiatry and Andrew Scull spoke of as being an intellectual enterprise inspiring an array of provocative questions and fresh areas of research, which in turn resulted in the publication of monographs which have presented us with a more subtly multifaceted and nuanced history of psychiatry.

The subsequent production of a new breed of anti-institutional historiographical writing, Kathleen Jones contended, made the evaluation of psychiatric praxis during the nineteenth and twentieth centuries a highly problematic field of enquiry, since reliable historical analysis was, in her opinion, hindered by both prejudice and anachronism, having underplayed or completely disregarded how these institutions had been the principal means by which to care

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for society’s most vulnerable individuals during that historical era. Scull, on the other hand, following a more sociological approach, argued that the history of psychiatry should portray psychiatrists, asylums and patients in their sociological milieu, inasmuch as it was impossible to understand the perception and conceptualisation of mental illness, as well as the psychiatric profession itself, without duly examining the ideology, professional interests, changing social structures and the shifting forms of power in a particular historical context. Nevertheless, he also recognised the dangers of a historiography that considered the perception of alienation as a social construction tout court or that demonised the psychiatric profession.

Furthermore, as Marijke Gijswijk and Harry Oosterhuis have pointed out, the political framework of a particular historical moment and the societal conditions of a nation must also be taken into account when writing the history of psychiatry. The development and institutionalisation of the psychiatric profession after the French Revolution, for example, was associated with the rise of the bourgeoisie and the ideational ferment of the Enlightenment. In consequence of these watershed factors, and until the first-half of the twentieth century, the profession and its institutions served two key functions: first, a medical one, i.e. the welfare and treatment of patients and secondly, a socio-political one relating to the ultimate goal of freeing society from the social and economic burden represented by the population of the mentally ill. How these two functions influenced each other varied from place to place, since they were intrinsically connected to a country’s political and ideological environment.

In regard to the history of Portuguese psychiatry, it is impossible to write on the evolution of this medical discipline and practice without referring to the political background as it existed at the end of the nineteenth and early twentieth centuries. Thus, at the beginning of the twentieth century, Portuguese anti-monarchists were highly influenced by Comte’s positivism: they held the belief that humanity would henceforth participate in the so-called third stage of socio-political evolution, one that would be dominated by the establishment of a scientific-secular faith. In short, they believed that the new era of social organisation and development would be securely founded on scientific knowledge. Consequently, pedagogy and psychiatry became two of the sciences to which the First Portuguese Republic gave particular attention after its establishment (following the overthrow of the Portuguese monarchy) in 1910.

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4 Scull, Social Order / Mental Disorder, p.8.

5 Marijke Gijswijt, Harry Oosterhuis, Psychiatric Cultures Compared: Psychiatry and Mental Health Care in the Twentieth Century – Comparisons and Approaches (Amsterdam: Amsterdam University Press, 2005), pp. 17–18.
The former was rightly considered to be indispensable to the attainment of the Republic’s ideals and to develop the citizenry’s civic sense, moral character, intellectual and cultural maturity and physical health\(^6\), while the latter, devoted to brain research (the locus of mind and consciousness), would provide the relevant knowledge necessary to better understand the nature of social organisation and human behaviour. In this context, the historian of psychiatry, as it has developed in Portugal, must consider the contributions made by the following Portuguese doctors and psychiatrists: Júlio de Matos (1856–1922), Miguel Bombarda (1851–1910) and Egas Moniz (1874–1955), who were actively involved in the so-called Republican conspiracy and subsequent revolution of 1910. It should be noted that, after the establishment of the Republican government, the abovementioned medical professionals, indeed the medical class in general, became an influential presence in the Portuguese Parliament\(^7\). Notwithstanding the fact that only minor changes occurred in terms of psychiatric care per se during the first decades of the twentieth century, the years of the First Portuguese Republic (1910-1926) were a fertile period with respect to the institutionalisation and development of the psychiatric profession. Indeed, following the establishment of the Portuguese Republic, the Provisional Government established a constitution in 1911 which guaranteed the right to health care for all citizens\(^8\). Nonetheless, psychiatry was still only lectured in free courses at the beginning of the twentieth century. In fact, it was only on 22 February 1911, as a result of a significant reform vis-à-vis medical training and teaching, that the chairs of neurology, psychiatry and forensic psychiatry were officially recognised as a regular part of the curriculum of the Portuguese Faculties of Medicine\(^9\). On 11 May 1911, a law regulating the hospitalisation of psychiatric patients was approved. This document authorised the government to establish seven new psychiatric asylums and ten agricultural colonies with a view to the treatment of the insane\(^10\).

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Aims of this Doctoral Dissertation

The life and work of the Portuguese psychiatrist Luís Cebola, the author of a wide-ranging literary output, as well as clinical director of Casa de Saúde do Telhal (CST) for thirty-eight years, has hitherto not been the object of extensive historical research. Indeed, he is barely mentioned in Barahona Fernandes’s work on the history of Portuguese psychiatry. However, several studies on Luís Cebola have been prepared by historians whose work is closely linked to the Ordem Hospital de S. João de Deus (OHSJD), i.e., the religious brotherhood administering the psychiatric hospital where Cebola was clinical director for thirty-eight years. A monograph about Cebola was published in 2009 by the Centro de Estudos Interdisciplinares do Século XX (CEIS20), written by Aires Gameiro, Augusto Moutinho Borges, Ana Mateus Cardoso and Fernando de Oliveira — Um Republicano no Convento [A Republican in the Monastery]. This monograph includes Gameiro’s personal view of Cebola’s character, since both Gameiro and Cebola knew each other while the latter was clinical director of the CST. The four authors refer in particular the scarce documentation available in both the archives of the psychiatric hospital and those of the religious brotherhood. Moreover, the authors address the issue as to why Cebola, as well as the CST, have been hitherto largely neglected by scholars working on aspects of the history of Portuguese psychiatry. They further highlight the need to carry out in future a more detailed analysis and study of Cebola’s life and work. Subsequently, Gameiro separately published a paper concerning Cebola in which he addresses topics similar to those examined in the aforementioned monograph: “Evocação de um médico esquecido, o Dr. Luís Cebola pioneiro da Ocupação Ergoterápica na Casa de Saúde do Telhal, da Ordem Hospital de São João de Deus” [Evocation of a Forgotten Physician, Doctor Luís Cebola: a Pioneer in Ergotheraphy at the Casa de Saúde do Telhal, a Psychiatric Hospital Affiliated with the Ordem Hospital de São João de Deus]. Both publications have proved to be useful while preparing this doctoral project, and represent a valuable starting point for my own research insofar as they offer a global view of Cebola’s personality, as well as provide insights into fundamental features of his work as clinical director of the CST.

13 Gameiro et al., “Um Republicano no Convento”.
The aim of my doctoral research is to prepare a biography of Luís Cebola with particular emphasis given to his ideological position and the specific features of his clinical practice. Additionally, I intend to explore the medical perception of mental illness and treatment protocols as seen in the first half of the twentieth century. To adequately do so, I have chosen the clinical director of CST as my case study. This doctoral project represents, therefore, a pioneering study on this nearly forgotten medical figure and his contributions to the development of Portuguese psychiatry. My doctoral research also addresses the issue of the popularisation of science and medicine as evidenced in his literary work. In addition, while focusing mainly on his personal experience as clinical director of the CST and on his conceptualisation of mental illness, my research also seeks to characterise the relationship between mental patient and psychiatrist as generally practised during the first half of the twentieth century in Portugal. Additionally, my research seeks to integrate Cebola’s conceptualisations and clinical praxis (including his treatment protocols for mental illness), as practised at the CST, in light of the broader developments of Portuguese and international psychiatry during the same historical period.

Luís Cebola seems to have been largely ignored by his peers during his lifetime, and as previously mentioned, he is barely referred to in historical studies published to date despite his having been the clinical director of one of the few psychiatric hospitals functioning in Portugal during the first half of the twentieth century. A detailed study of his life and work will therefore contribute to the historian's understanding of the mechanisms by which peer recognition of fellow professionals occurs, as well as the processes by which a scientific idea, method, or theory become part of a disciplinary canon. My research project also seeks to increase historical knowledge with respect to the community of Portuguese psychiatrists during the decades of Cebola’s professional activity and the important role that community played in the institutionalisation and development of the profession in Portugal. As stated above, it will explore Portuguese developments in psychiatry through the case study of Cebola and the CST; conversely, it will examine the influence which contemporary advances in psychiatry, as understood and practised in Europe, had upon the Portuguese context.

This doctoral dissertation ultimately seeks to elucidate the reasons why Luís Cebola has not hitherto been recognised as a medical figure on a par with the pantheon of other, much better-known contemporaries of his, who, in contrast to Cebola, presently comprise the academic discourse and heroic narrative informing the history of psychiatry in Portugal. Thus, I seek to restore Cebola’s contributions to their rightful place within this history. The study of
such a marginalised figure will ultimately result in a more complete understanding of the history of psychiatry in Portugal in general.

Luís Cebola: Between Historiography and Biography

In his introduction to “The History and Poetics of Scientific Biography” (2007), the editor Thomas Söderqvist refers to what he calls the “paradoxical status” of scientific biography in the context of the history of science. In his view, scientific biographies constitute a vast, reader-friendly corpus of publications on the one hand, having a significant impact on the public understanding of scientific culture and practices, yet, on the other hand, they are rarely mentioned in historiographical discussions of science, medicine and technology. Nevertheless, the author remarks that this schism between historiographical study and biography has in fact undergone a significant evolution over the past twenty years\(^\text{15}\). For example, Mary Terall, in her paper "Biography as Cultural History of Science," emphasises that although biography as a genre focuses on the particulars of an individual life, it also allows the historian to examine and integrate the life of the scientist within a broader social context. In this way, it is possible to increase our historical understanding concerning the role played by science – as a professional practice and a multi-disciplinary domain – in the development of the scientist’s personality, as well as its impact on the society and culture of a specific historical epoch\(^\text{16}\). Mary Jo Nye, in her appraisal of scientific biographies entitled “Scientific Biography: History of Science by Another Means?,” argues in turn that many scientific biographies in fact explore and address issues relating to moral conduct and public virtue as well as focus on scientific processes and achievements, which, in her opinion, encourages the writing of more compelling narratives which not only permit a more complete understanding of scientific culture in general but also more complexly portray the scientist's ambitions, passions, motivations, disappointments and moral choices. Ultimately, such narratives may even serve to expand the historians of science's readership\(^\text{17}\). Finally, Söderqvist explores in his chapter entitled “What is the Use of Writing Lives of Recent Scientists?” seven usages of scientific biography as a genre. Amongst those usages, two of them seem of major relevance as a framework to the preparation of this doctoral dissertation, namely, the use of biographical narrative as a tool to understand the origin and


construction of scientific knowledge and the establishment of a contextual narrative of scientific practice. According to the author, biography permits the writing of narratives on the history of science which reveal the larger cultural, social and political contexts at work. Furthermore, Söderqvist argues that the origin and construction of scientific knowledge and practices should be understood not primarily with reference to the broader cultural circumstances but mainly with reference to individual circumstances (motivations, ambitions, ideas, feelings, personal experiences and experimental practices). Thus, biography as a genre may help to better understand the scientific persona and the scientific endeavour.

The choice of a largely neglected historical figure, as a case study for this doctoral dissertation, allows for the expansion of research topics in the area of the history of medicine, more specifically in the field of the evolution of the perception of mental illness and clinical practices in Portugal during the first half of the twentieth century. Additionally, Luís Cebola’s twenty-three literary publications are extremely rich documents, since they reveal the interconnectedness of medical-scientific themes and literary and socio-political concerns. During his lifetime, Cebola published seven literary volumes focusing mainly on psychiatric themes, six poetry anthologies, six volumes focusing on socio-political and historical analyses, two philosophical essays, a travel book and an autobiography. Both his autobiographical memoir, Memórias de Este e do Outro Mundo (1957), and his main work on psychiatry, Psiquiatria Clínica e Forense (1940), had two editions during his lifetime. Following his retirement from medical practice, Luís Cebola continued to write and publish. His books, based on the clinical and psychological analysis of his patients, portray madness in a way that moves beyond a simple symptomatological enumeration. Empathetic to the mental state of his patients, in parallel with his strong socio-political rhetoric (of a Republican-inspired, propagandistic nature), Cebola’s literary works comprise an invaluable document which deepens our understanding of the social and clinical perception of mental illness during the first half of the twentieth century.

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A brief clinical portrait of Luís Cebola and of the CST

José Luís Rodrigues Cebola was born in Alcochete on 5 September 1876\(^{19}\). From 1899 to 1906 he studied medicine at the Escola Médico-Cirúrgica de Lisboa\(^{20}\). This School had been created in 1836 (replacing the earlier Escola Régia de Cirurgia established in the Hospital Real de S. José in 1825 by King John VI (D. João VI), and occupied the premises of a convent situated near the Hospital de S. José\(^{21}\).

Luís Cebola prepared his final dissertation [his “tese inaugural”], *A Mentalidade dos Epilépticos* [The Epileptics’ Mind], while working at the Hospital de Rilhafoles (the first state-run psychiatric hospital created in Portugal), under the supervision of Professor Miguel Bombarda (1851–1910)\(^{22}\). Miguel Bombarda had been appointed director of this hospital in 1892 by the Portuguese House of Commons and was also the Regent Professor of Physiology and Histology at the Escola Médico-Cirúrgica de Lisboa from 1883\(^{23}\). Cebola’s work in Rilhafoles consisted in the analysis (in terms of appearance and content) of works of art produced by epileptic patients with a view to discovering an underlying psychopathological law\(^{24}\).

According to Gameiro *et al.*, Luís Cebola was nominated clinical director of the Casa de Saúde do Telhal on 2 January 1911 by the Governo Provisório da República Portuguesa [Provisional Government of the Portuguese Republic], since he was deemed to be politically aligned with the tenets of the new Republic and therefore an apt candidate to work in this religious institution caring for the mentally ill\(^{25}\). Luís Cebola himself stated in his abovementioned autobiographical memoir that it was his friend, the statesman Afonso Costa (1871–1937), then Head of the Republican Government, who invited him to accept this position. He claims to have accepted the invitation because he was a firm supporter of the new political regime and considered it a way for him to be of service to his country\(^{26}\). He would

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\(^{19}\) Lisboa, AHCUCUL [Arquivo Histórico do Museu de Ciência da Universidade de Lisboa], Processo Individual de José Luiz Rodrigues Cebola Junior, s. d., Cx. 1541.


remain the clinical director of this institution for the next thirty-eight years, retiring only on 28 February 1949\textsuperscript{27}.

The CST, also known as Manicómio do Telhal or Casa do Sagrado Coração de Jesus, affiliated with the religious brotherhood the Ordem Hospitaleira de S. João de Deus (OHSJD), began to function as an insane asylum in 1893. It was built on a farm in Sintra which had been purchased by Bento Menni, an Italian member of the OHSJ\textsuperscript{28}. The aim of this brotherhood was to create a hospital which exemplified the humanitarian and spiritual vision of their patron saint, S. João de Deus. Significantly, their policy was to keep abreast of, and use, the most up-to-date international developments (both theoretical and technical innovations) in the fields of medicine and psychiatry\textsuperscript{29}.

On 15 October 1911, Afonso Costa, then a delegate of the recently instituted political regime, visited the CST. He authorised the religious brotherhood to continue their work as male nurses on condition that they stopped using clerical uniforms and that the institution be subjected to detailed inspections carried out by government representatives\textsuperscript{30}. Concomitantly, between October 1910 and April 1911, the Portuguese Republican government abolished all references to Catholicism in public matters; on 20 April 1911, a decree was passed officially separating church and state. Under this law, the Catholic Church’s patrimony became government property\textsuperscript{31}. However, owing to the fact that Bento Menni had bought the farm under his own name (and therefore could not be considered property belonging to the brotherhood), the republican government could not claim rights over this hospital\textsuperscript{32}.

It should be noted that when the CST opened, there were only two psychiatric hospitals in Portugal: the Hospital de Rilhafoles in Lisbon and the Hospital do Conde de Ferreira in Porto. The former had begun to function on 13 December 1848. It occupied the premises of the old São Vicente de Paula Convent. Until then, mental patients had been hospitalised at the Hospital Real de Todos os Santos (a general hospital) located in the Rossio district of the city. Following its demolition in the aftermath of the 1755 earthquake, patients were transferred to


\textsuperscript{29} Hospitalidade, Crónica Trimestral dos Irmãos de São João de Deus em Portugal, vol. 1, (Sintra: Editorial Hospitalidade, 1936), p. 21.

\textsuperscript{30} Ilustração Portugueza – Carlos Malheiro Dias (dir.), Edição semanal do jornal “O Século”, Lisboa, 24 de Outubro de 1910, 244, p. 522.

\textsuperscript{31} Ramos, A Segunda Fundação (1890–1926), p. 407.

\textsuperscript{32} Lavajo, Ordem Hospitaleira De S. João de Deus em Portugal 1892–2002, p. 92.
the nursing facilities of S. Teotónio and Santa Eufémia at the Hospital de S. José. The medical care was very poor in these nursing facilities as a result of the dearth of specialised medical staff and also to the overall poor quality of the facilities themselves.33.

In the northern Portuguese city of Porto, the precarious conditions with regard to the care and treatment of mental patients were similar to those seen in the capital. Until 1883, when the first psychiatric hospital was created – the Hospital Conde de Ferreira – the mentally ill were hospitalised in a general hospital. Its first director, António Maria de Sena, published the hitherto most extensive study concerning the medical care of the insane – *Os alienados em Portugal: História e Estatística* [The Mentally Ill in Portugal: History and Statistics] (1884)34.

In consequence of World War I, there emerged a great number of military men needing psychiatric and clinical care. The CST was subsequently selected by the Ministry of War to become a military asylum. This was an important moment for the CST, since payments made by the government enabled the improvement of the existing buildings, as well as the construction of new ones35. During the 30’s, the CST would again be chosen by the Portuguese Military as a health-care institution for their members requiring psychiatric treatment36.

In 1936, a Nursing School was founded at the CST37. Nurses’ education was supervised by Meira de Carvalho, who was hired as a general practitioner there in 193138. Luís Cebola stated that he himself was responsible for suggesting the creation of this Nursing School to the hospital administration in 1925 in order to improve the OHSJD nurses’ scientific knowledge in the areas of anatomy, physiology, minor surgery procedures, pharmacology, hygiene and psychopathology39. Concurrently, a course on psychiatry was also given to the future nurses of the OHSJD by Luís Cebola himself40. This private Nursing School became an

35 Lavajo, *Ordem Hospitaleira*, p. 113.
38 Cebola, Memórias de Este e do Outro Mundo, p.31; Luís Cebola, “Evolução terapêutica na Casa de Saúde do Telhal” in Gameiro (dir.), *Casa de Saúde do Telhal*, p. 222.
Concluding Remarks

In practical terms, my research will be based on the analysis of his multifaceted bibliography, complemented mainly by documentation regarding his clinical practice found at the Museu São João de Deus – Psiquiatria e História and the Casa de Saúde do Telhal. Additional information will be taken from contemporary medical periodicals, such as *Medicina Contemporânea* [Contemporary Medicine], *Anais Portugueses de Psiquiatria* [Portuguese Annals of Psychiatry] and *Jornal do Médico* [The Physician’s Gazette], among others.

A scientific and ideological biography of Luís Cebola, based fundamentally on the analysis of his published works, will permit a more complete critically and conceptually informed understanding of the relationship between medical-scientific knowledge and the *polis*, e.g., the permeability of clinical ideas to multiple social and discursive contexts as, for example, their thematic and rhetorical appropriation by way of literary device and political discourse (and vice-versa, i.e., the adoption of literary characters and themes as metaphors for diseases and the recourse to political ideologies as a way to explain natural phenomena or scientific theories). Furthermore, the elucidation of the rhetorical devices by which Cebola presents himself (as scientist, clinician and citizen) to his readers enables the historian to adduce a mental framework or set of (often only) implied or understated premises underlying the perception and self-perception of the psychiatrist and the man of science during the first half of the twentieth century in Portugal.

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42 Carvalho, “Memória Histórica sobre a Escola de Enfermagem”, p. 233.