UNIVERSITY COLLEGE LONDON

University of London

EXAMINATION FOR INTERNAL STUDENTS

For the following qualifications:-

B.Sc. B.Sc. (Intercal)

Hist. of Medic. C21: Madness and Society

COURSE CODE

: HMEDC021

UNIT VALUE

: 0.50

DATE

: 02-MAY-02

TIME

: 14.30

TIME ALLOWED

: 3 hours

02-C0743-3-70

THREE HOURS

Please answer ANY **THREE** questions

- 1. How did classical medicine as well as classical drama both represent and explain madness?
- 2. 'The gradual secularisation of suicide and its nature was a humane medical triumph over harsh Christian views of sin'. Discuss, with historical examples.
- 3. How far did madness as against diabolism or possession figure in the explanations for the scale of European witchcraft between the sixteenth and early eighteenth centuries?
- 4. How might eighteenth-century Enlightenment medical writings and medical practices regarding mental 'illness' be seen as the foundation of modern psychiatry?
- 5. 'The asylum in both its early and later history was always the best hope for the mentally disturbed of all social classes'. Debate this proposal.
- 6. Debate the claim that the varieties of psychiatric 'female malady' rest on historically exaggerated accounts of gender-specific mental illnesses and distresses.
- 7. Explain how medico-legal disputes shaped the criminal insanity plea from the late eighteenth century onwards.
- 8. Write a critical review of Edward Shorter's A History of Psychiatry.
- 9. What was psychoanalysis and what were its central ideas about human consciousness?
- 10. Of the 'patients' who have figured in any part of the course (such as John Perceval or *Hamlet* or Judge D-P Schreber or Nijinsky) whom do you judge as most ill-treated or misdiagnosed and why?
- 11. Why were the medical arguments over shellshock and war neuroses so intense?
- 12. 'By caricaturing the faults and the models of illness used by orthodox psychiatry, the anti-psychiatry movement ended up as a lost opportunity for patients and for medical reform'. Discuss with special reference to R D Laing and Thomas Szasz.

END OF PAPER