
(A) Psychiatric science has developed around the idea of “insanity” understood as a malformation of the individual human personality. E. Kraepelin’s “naturalistic and systematic” nosography was organized with the idea of “purity” of clinical types. The “entities” he established were the set of deviations of each mental illness’s symptoms and its evolution into an autonomous species. The two major entities identified by Kraepelin (‘manic-depressive psychoses’, today known as ‘bipolar disorder’, and ‘dementia praecox’, today schizophrenia), in isolation and opposition to each other, remain the most typical and purest forms of mental pathology. Such typicality and purity can only arise from the human constitution and their “endogenous” nature.

K. Kolle published a lecture of his on “Endogenous Psychoses: The Delphic Oracle of Psychiatry” (1954) 1 defending Kraepelin’s “nosology” (questioned by the psycho-dynamic school and by the effectiveness of treatments) and pointing out that no “progress” of psychiatric science has undermined the monolithic strength of Kraepelin’s entities. Ey says: (a) he does not agree with the negative “satisfaction” from thinking about something believed to be a mystery (what Kolle calls ‘the Delphic Oracle of Psychiatry’), (b) however he does agree with Kraepelin and Kolle that the great psychoses (if we like, the “true” Psychoses) since they are rooted in the person (being ‘endogenous’) are more rigid and solid forms than many contemporaries think.

The notion of ‘endogenous’ in the German clinical school, echoed in France in the concept of ‘constitutional psychoses’ (Dupré, de Fleury, A. Delmas), is a notion that represents an indisputable and empirical truth: that every chronic psychosis is a way of organizing the personality. However, this anthropological root of all “true insanity” cannot be made into a mystery.

(B) Psychiatry has taken a stand against the prejudice of finding a natural cause for insanity (against the Demonology that refused to see mental illness as a physical illness and against all those who have thought that insanity must be a disease of the soul, unrelated to somatic pathology). J. Wyrsch described this development magnificently in the first part of his book “History and significance of endogenous Psychoses”. 2 Wyrsch says that doctors and, in popular language, poets, have always felt the need to distinguish pure or authentic insanity (“endogenous”, like Ophelia’s schizophrenia) from symptomatic insanity (“exogenous”, like King Lear’s).

On the one hand, classifications by ‘somaticists’ and ‘psychists’ rejected the idea of a single psychosis (the Einheitspsychose of H. Neumann) while psychiatric science adopted the idea of autonomous species (entities) as the basis of true mental illnesses. On the other hand, the classical system of organic psychiatry of Griesinger assumed that mental pathology cannot be reduced to a purely somatic disorder but is necessarily ‘rooted’ in a fundamental vitiation of the psychic being.

Different conceptions of psychic life ("substance", Aristotelian form, life principle, etc.) all concur in defining and classifying forms of insanity as pathological modalities of human freedom. And Wyrsch concludes that in endogenous psychoses (as forms of mental illnesses in which the psychic being is structurally deformed) the essential feature is alteration of the Self.

In chapter VI, Wyrsch provides an exegesis of the word “Self”, indicating that the Self as subject and agent of a psychic experience must not be confused with the Self as person, as the historical construction of the person’s own system of values. Ey says that he cannot entirely agree with the author’s analysis, which is aimed at separating the impure from the pure, “exogenous” experience from “endogenous” experience. For Wyrsch, as for Gruhle, K and K. Schneider, the essence of endogenous experience is that it is a “sui generis” form of internal experience.

In schizophrenia the fundamental disorder is of the “Ich-Merkmal”, a pathological modification of the Person (a “Spaltung”) which raises the possibility of creating a world of one’s own (Eigenwelt). In manic-depressive psychosis, the basic endogenous disorder affects the “Stimmung” layer (mood, spirits, or better: the vital experience that involves a range of basic feelings).

In Wyrsch’s view: (a) the concept of endogenous psychosis is an absolute necessity: a disturbance arising from within the individual without the possibility of considering an “etiology” or predisposition; (b) the hierarchical structure of psychic life implies a mood layer (Seele) and a properly spiritual layer (Geist). He understands Schizophrenia to be essentially an alienation of the spirit, while Manic-depression is basically an attitude of mood, and both are resistant to any explanation.

Ey says there is an empirical content in the notion of “endogenous psychosis” that must be defined.

(1) A Psychosis is said to be endogenous when it is the clinical manifestation of an internal organization of the person. This accentuates the biopsychological constitution of the individual, in which genotype structure is important. Thus psychosis is not merely an accident, since it is ‘tied’ to the patient’s life history. Psychosis is essentially rooted in an alteration of the Person. This notion is consistent because it is necessarily directed at the internal organization of the person (as against the extension and superficiality of the notion of neurotic reaction, which would make psychiatry into a kind of external pathology).

(2) Ey thinks that the usefulness of the concept of endogenous psychosis is the idea of pathology of the personality, so long as the classification of mental pathology into endogenous and exogenous illnesses is abandoned. The natural frontier for the solid construction of mental pathology is to affirm that all psychoses are profoundly “endogenous” (because they never depend purely and simply on a toxo-infectious state, nor on a pathogenic situation), but also to state that some psychoses are essentially characterized by the destructuring of consciousness (cf Ey H Estudios Psiquiátricos Volume II - Buenos Aires: Polemos; 2008) and others by the disorganization and morbid reorganization of the system of personality (here may be applied the intuitions of the concept of endogenous psychosis).
Differentiating between these two major forms of mental pathology, one must, on the one hand, avoid including manic-depressive episodes in the latter group and, on the other hand, add neuroses to the illnesses of the person. This new perspective conserves the essence of classical clinical teaching and casts off some of its “congenital” weaknesses.

Wyrsch’s analyses are adapted to this scheme. Wyrsch indicates that the manic-depressive disorder of the Stimmung is a “lesser” disorder than that of Schizophrenia. Ey says that the temporo-ethical destructuring of consciousness in manic-depression is like a first stage of destructuring of consciousness, that is, the organization of the present field of the experience of sensibility, and that manic-depressive episodes are part of what he describes as ‘acute psychoses’.

Schizophrenia, in contrast, although it also implies a form of destructuring of consciousness, is essentially a deformation of the Person, and in this sense is the prototype of all ‘chronic’ mental illnesses.

Finally, Ey says that the concept of ‘endogenous’ must be retained insofar as it matches reality, but it should be reviewed so that it is not applied blindly, as though when we say ‘endogenous’ we are speaking of a mystery, like the Delphic Oracle of Psychiatry. He concludes that, in his view, ‘it is more of a “Gordian knot” that one must have the courage to cut.’

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