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Commentary

Demonic possession by Jean Lhermitte

Possession diabolique par Jean Lhermitte

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ABSTRACT

The name of the French neurologist and psychiatrist Jean Lhermitte (1877–1959) is most often associated with the sign he described back in 1927 in three patients with multiple sclerosis. We are reporting unpublished handwritten notes by Jean Lhermitte about 'demonic possession', which date from the 1950s. Drawing from his experiences in neuropsychiatry, Lhermitte gathered notable case reviews as well as individual case histories. For him, cases of demonic possession are of a psychiatric nature with social background exerting a strong influence. Like Freud did earlier, Lhermitte believes that the majority of those possessed people have been subjected to sexual trauma with scruples, often linked to religion. Demonic possession cases were not so rare in the 1950s but their number has nowadays declined substantially with the development of modern psychiatry.

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RÉSUMÉ

Le nom de Jean Lhermitte (1877–1959), neurologue et psychiatre français, est le plus souvent associé au signe qu'il a décrit en 1927 chez trois patients atteints de sclérose en plaques. Nous rapportons des notes manuscrites inédites (en possession privée) de Jean Lhermitte sur la « possession diabolique » datant des années 1950. Fort de son expérience en neuropsychiatrie, Lhermitte a rassemblé cet ensemble de cas individuels. Selon lui, les cas de possession démoniaque sont de nature psychiatrique mais avec d'étroits liens avec le milieu socioculturel. Tout comme Freud, Lhermitte pense que la majorité de ces gens « possédés » ont été soumis à un traumatisme sexuel avec des réticences à en parler souvent liées à la religion. Ces cas de possession diabolique n'étaient pas si rares dans les années 1950, mais leur nombre a aujourd'hui fortement diminué avec le développement de la prise en charge psychiatrique.

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The name of the French neurologist and psychiatrist Jean Lhermitte (1877–1959) is most often associated with the sign he described back in 1927 in three patients with multiple sclerosis. In the 20th century, he was the only second-generation student of Charcot to excel in both fields of psychiatry and neurology. Two of Charcot's most famous students, Déjerine and Babinski, attempted to assume this dual vocation but instead remained great neurologists providing brilliant contributions to mental health [1,2]. Lhermitte studied neurology under Pierre Marie supervision, the

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http://dx.doi.org/10.1016/j.encep.2017.03.001 0013-7006/© 2017 L'Encéphale, Paris. latter being one of Charcot's students. Lhermitte was a major actor of catholic neuropsychiatry in the interwar period. His scientific accomplishments behold a religious part of key interest, even more impressive by the fact it is tainted neither by proselytism nor apologetics. As a laboratory leader at Salpêtrière Hospital in 1911, he contributed to welcome centres for psychoneurosis soldiers during WW1. Editor of "L'hygiène mentale" (1928) and co-editor of "L'Encéphale" (1931), he was a key member of the Saint Luc medical catholic society.

In 1931, the "Etudes Carmélitaines" are re-launched by Bruno de Jésus Marie from a pre-war mysticism journal, which was hardly getting attention. Lhermitte contributed to the "Etudes Carmélitaines", in which he notably published in 1933 a paper named

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"Origine et mécanismes des hallucinations". Lhermitte there indicated that he decided to focus on this intricate subject because being a catholic physician, he was accustomed to meet theologians, e.g. at the "Journées Carmélitaines" in 1953. This journal's point was to confront mysticism to modern data from psychology and psychiatry. There was a renewal of catholic believes about mysticism occurring in the 30s while psychiatrists were debating about hallucinations (which were Lhermitte's favourite topic). Links between psychiatry and mysticism were the top ranking subjects of catholic scientific journals at that time. Lhermitte had strong influencing position on mysticism and demonopathy in this period, as much as Laignel-Lavastine, de Greeff, Odier or Parcheminey had. Lhermitte held a conference about religious matters such as possession and mysticism at the religious psychology meeting in Avon in 1935. He was close to Joseph de Tonquédec (1868-1962). This official member of the Society of Jésus was the exorcist of Paris diocese from 1924 to 1962. Unlike his precursors, de Tonquédec was trained in psychiatry and one of his inspirational figures was Babinski. Following Freud's point of view, he believed that seizures can occur by reminiscent souvenirs. He used to refer patients to Lhermitte when he was confident that a neuropsychiatrist would be of some help to them. Though Lhermitte would never leave either his strict discipline or his neuropsychiatric point of view, he would always keep a religious influence in mind [3].

We are reporting handwritten notes by Jean Lhermitte about 'demonic possession' (Fig. 1) [4], which date from the 1950s and were obtained through his son François, also former French neurologist. Drawing from his experiences in neuropsychiatry, Lhermitte gathered notable case reviews as well as individual case histories. Charcot is never named in the paper but his underlying influence can still be felt.

Lhermitte suggests that the personality of the possessed person appears to be transformed, as if penetrated by a new personality which overlays their real personality. In his notes, the physiognomy, behaviour and language of the sick person were changed, and the patient run counter to his previous state. The possessed person was invaded by another soul. At times, the demon clung to them, "it was like a large dragon-like beast lying upon me", at times there were even visual hallucinations of God. One patient displayed incoherent thought patterns, "the doctors are the Pope's envoys", she said to Lhermitte. One patient declared, "I want to roll around on the floor like hysterical people". Some had terrifying and mystical dreams with visions of the Virgin Mary or Saint Theresa. Some of Lhermitte 'possessed' patients reported that God was calling them into the priesthood or to martyrdom. The idea of demonic forces predates the development of Christianity. Nevertheless, Christian Doctrine would give the demon's personality a more concrete dimension.

Lhermitte specifies that a distinction should be drawn between demonic possession and 'paroxysmal fits of possession' such as epilepsy or Charcot's syndrome. According to him, during hysteria, there is a great deal of mental plasticity, which enables the person's apparent transformation. The theatrical aspect of the crisis is all the more excessive if a large audience is watching them.

Lhermitte then reported cases of demonic possession. The first one is a sexually assaulted 15-year-old nun. She felt fragmented and entranced by evil spirits. While exorcisms were being performed, she would start dancing and adopted dramatic poses similar to those observed Salpêtrière Hospital in Charcot's time. Another nun was sexually obsessed. The obsession of the demon haunted her spirit, she could no longer bear the sight of a crucifix. She wrote these words: "Oh Satan, my master, I give my whole self to you forever". There was sexual repression here with misgivings due to terror related to sins of the flesh. Anxiety increased given that the patient was marked by a fervent faith. Another 31-year-old woman, raped by her father at the age of 13, desired a religious vocation. She

experienced full enjoyment on seeing the Head Sister whom she believed to be Christ. "... the demon must be there", she said. However, at the same time she wanted to devote herself to a mystical life and believed that she was in communication with Christ. Lhermitte reported on this case as he mixes mysticism and demonopathy.

In these cases, exorcism was of course in vain, since it was related to a psychiatric disorder. Lhermitte specifies that these cases shared common links: confusion of the mind, illusions, hallucinations and absence of criticism. Alongside these cases, Lhermitte identified the "lucid" form of possession still referred to as "demonopathic delusions" [5]. These patients are not affected by attacks or seizures, nor do they enter into a trance, but instead remain in a lucid state. They are aware of what is happening inside them. Here, Lhermitte takes the case of Father Surin, the exorcist of Loudun Ursulines, who has a split personality. Indeed, the patient reports that "thoughts know what they are thinking" which therefore gives rise to the illusion of a spirit of duality, the understanding of thoughts. It is assumed that he is insane.

Lhermitte notes that long before the idea of possession invaded his spirit, the patient had already experienced very significant modifications to his inner life. Then this feeling intensified and took over his conscience, the subject therefore worried and wondered if he were the puppet of a force coming from outside his personality. For Lhermitte, a 'secondary' pathological personality is added to the 'primary' personality and the conflict between those two results in mental disturbance. According to him, this secondary personality is composed of motor, sensorimotor and ideo-verbal elements. Lhermitte summarizes the pathogenesis as follows: the physical and mental whole is accompanied by auditory, verbal and psychomotor hallucinations, visual kinesthesis, intrusions from outside the automatism of thought and memory, and actions. The personality is split. However, not all patients suffering from a split personality are demon possessed. The possessed person is often "dispossessed", there are oscillations between two poles, God and the evil spirit. Lhermitte points out that "exorcism, owing to the strong impression it makes, may have a negative impact on the nervous system which is already disturbed. It is also a powerful mean of suggestion and a weak person may risk developing morbid habits".

Lhermitte reminds us that unquestioned belief to the words of mystic or possessed persons is leading to aberrations. These shows can be found in each falsely possessed subject of Loudun (17th century) as for Marthe Brossier or Marie-Thérèse, who claimed to have seen the Demon under the form of a gorilla or another uncommon animal. But Marie-Thérèse was only literally giving the same speech as in Bernadette's Holy Virgin vision. Lhermitte indicates that each pathologic mysticism is linked to an erotic element [6]. The present cases follow the same rule. In the 1890s, "the Salpêtrière hospital was the proper place to exorcise possessed people and banish demons" [7]. But in the shadow of Janet, we can foresee a disciple more respectful of the master Charcot. Pierre Janet was a "modern confessor" who absolved adultery and erotic thoughts, considered as pathogen secrets and original sin of his patients. At that time, Freud was plunged into the depths of demonology treaties. In 1897, he wrote to Fliess: "all my new theories about hysteria are already well known (...) and similar to our foreign body theory and conscience's split". He reminded that "all the enlightened minds are already well convinced that possession is nothing else than simple mental disease" [8]. Freud's point of view varied along his successive scientific publications from a conception of the devil as retained desires of sexuality to a fatherly substitute, which he describes over multiples forms. Lhermitte believed it could be depraved thoughts that were opposing chastity. Janet positioned himself as a disciple of Charcot's retrospective medical theory, but after the master's death, he would not publicly expose possession.

According to Lhermitte, cooperation between physician and theologian is necessary. Therefore, it is not surprising to see the

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