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World War I and Trauma

Although the aftermath of war is typically observed in the number of casualties and mass destruction of nations, the resulting consequences on the bodies and minds of those fighting have proven to be just as devastating. Post Traumatic Stress Disorder, a mental health condition characterized by difficulty recovering from a horrifying or distressing experience, is a common psychological result of experiencing war, affecting nearly 7.7 million American adults today who have lived through or fought in deadly conflicts. Throughout history, the disease itself has had a troubling and convoluted past in which doctors and psychologists failed to realize its true effects on those suffering from it. Although post traumatic stress disorder was once seen as a physical side effect and sign of weakness in those returning from battle, medical advances and further studies brought about by the first World War have allowed doctors to more clearly examine the debilitating effects of the harrowing disease.

The first recorded mention of PTSD-like symptoms was in 2100 B.C., in the Sumerian “Epic of Gilgamesh”. In this story widely regarded as one of the first known pieces of literature, the main character Gilgamesh observes the death of a close friend named Enkidu and subsequently experiences nightmares and horrific visions. Similar themes were later explored in ancient Greece when Herodotus recounted a story about the Battle of Marathon in 400 B.C. in which an Athenian man named Epizelus is blinded during battle despite not being struck or hindered by any physical ailment. As a result of the event, Epizelus was described as seeing “a

gigantic warrior, with a huge beard, which shaded all his shield, stood over against him; but the ghostly semblance passed him by, and slew the man at his side.” Although these tales were written thousands of years before many of the modern world’s major conflicts and medical breakthroughs, both main characters suffer from common effects of PTSD due to an experience in which they are haunted by for the rest of their lives.

The next crucial step in society’s perception of the disease came during the 19th century in the times of the Civil War and Industrial Revolution. The advent of the Civil War on American soil brought with it devastation across the country, dividing the nation into two sides and killing the greatest number of Americans in U.S. war history. As a result, doctors began to notice psychological and physiological effects of the war on patients across the country, likely caused by some form of PTSD. After observing symptoms such as homesickness, anxiety, restlessness, and a desire to be in solitude, American doctors were able to relate their findings to similar observations in Europe from Swiss physician Dr. Johannes Hofer and Austrian physician Josef Leopold Auenbrugger, who had called these cases a result of a disease called “nostalgia”. One American doctor in particular named Dr. Jacob Mendez Da Costa observed cardiovascular trends among patients suffering from nostalgia and determined that the increased psychological stimulation affected the rest of the body in a disease called “Soldier’s Heart”. Both of these PTSD-like medical conditions were observed among Civil War vets and further studied during the Industrial Revolution. Even though the revolution was not a war, the increase in railway accidents saw survivors experience the same symptoms associated with nostalgia and soldier’s heart. Believed to be caused by microscopic lesions of the nervous system, this new wave of psychological hysteria led to “railway spine” and “railway brain” being used to describe trauma-related experiences.

As the world shifted into the 20th century and began World War I, the definition of trauma induced disorders continued to be shaped by the physical injuries that supposedly caused them. Coined by Charles Myers in the medical journal *The Lancet*, the term “shell shock” encompassed the array of side effects of soldiers leaving the battlefield and returning to a somewhat normal life. Myers called it shell shock since he observed common symptoms such as anxiety, nightmares, loss of memory, and loss of other senses in soldiers who were exposed to concussive explosions of shells within battleground trenches. As the term spread and became popular among all Americans, doctors across the country accepted it but began to realize that patients would check into hospitals with similar ailments but no prior history of exposure to exploding shells. As a result, the perception of shell shock changed in American culture from a physical disease caused by battle to a mental weakness caused by fear and “poor character”. Rather than treating struggling soldiers in frontline hospitals with other recovering soldiers to boost their morale and recovery time like they would before, doctors now began to use more forceful and intimidating tactics to cure traumatic responses. As described in Lewis Yealland’s 1918 report *Hysterical Disorders of Warfare*, patients would be subjected to brutal treatments such as electric shock treatment until they “behaved like the hero [he] expected them to be.” Even years after the war, American people and doctors alike maintained this viewpoint and shunned those who had returned from war as a shell of their former selves.

Although the discoveries made during World War I were falsely based and detrimental to patients dealing with trauma at the time, they proved to be critical stepping stones towards discoveries made during World War II and the Vietnam War. By increasing the awareness of post-war mental struggles, doors were opened for doctors to examine patients following these traumatic experiences. For example, in 1941, clinician Abram Kardiner published his book

entitled *The Traumatic Neuroses of War* describing his observations made while working at a veteran's hospital in the 1920's. Rather than seeing shell shock as a weakness in the patient, he observed the chronic and tragic effects of the disease as a form of "physioneurosis", a disease that greatly affects the body and mind over time. This realization would allow for better treatment and recovery efforts for veterans returning home after World War II, eventually leading to the American Psychiatric Association adding "gross stress reaction" to its manual of mental disorders. Because of this, the Vietnam War of the 1960s and early 1970s saw more veterans be recognized as dealing with this "post traumatic stress disorder" and be properly treated for it. This was also in large part due to the increased advocacy by the veterans themselves as the American people became more aware of the brutality of war.

In today's modern society, Post Traumatic Stress Disorder is observed and recognized in the survivors of many traumatic events, ranging from sexual assault to sudden loss to war experience. Due to increased public support and advances in psychology and research, doctors are now able to treat patients accordingly with necessary therapies and medicine. Even though World War I introduced unsafe treatments and incorrect assumptions about the disease, the overall increase in awareness allowed doctors to study patients and truly understand how PTSD could be cured.

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