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## Transnational evolution of psychiatry and neurology: a European perspective from the enlightenment to the early 20th century

*A evolução transnacional da psiquiatria e neurologia: uma perspectiva europeia do iluminismo ao início do século XX*

*Evolución transnacional de la psiquiatría y la neurología: una perspectiva europea desde la Ilustración hasta principios del siglo XX*

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**ABSTRACT:**

This paper investigates the historical evolution of psychiatry and its interrelationship with neurology from the Enlightenment to the early 20th century. It examines the transnational development of these disciplines primarily across Europe, with particular emphasis on key regions such as France, Germany, Britain, Italy, Spain and Portugal, while also including some related remarks about Brazil. The objective is to elucidate how advancements in scientific knowledge, medical practices, and societal perceptions of mental illness have influenced the trajectories of psychiatry and neurology. This analysis is grounded in a diverse array of historical sources, including scholarly literature. It critically examines prominent figures, institutional dynamics, and shifts in societal norms to uncover the intricate interplay of cultural, political, and intellectual forces that have shaped the evolution of these fields. The study reveals a complex tapestry of influences - such as the humanization of treatment, significant scientific breakthroughs, and interdisciplinary collaboration - that have contributed to the development of psychiatry and neurology. Our research underscores the necessity of contextualizing the historical framework within which these disciplines emerged and evolved, thereby offering insights into contemporary practices and policies in mental health care and neurological understanding. Through this historical analysis, we illuminate the nuanced narrative of psychiatry and neurology, highlighting their transnational development and the various factors propelling their evolution. By comprehending the historical foundations of these disciplines, we can glean valuable insights into the challenges and opportunities confronting contemporary mental health care and neurological research, thereby informing future directions in the field.

**Keywords:** psychiatry, neurology, history, comparative analysis, cultural context



**RESUMO:**

Este artigo investiga a evolução histórica da psiquiatria e sua inter-relação com a neurologia desde a Ilustração até o início do século XX. Examina o desenvolvimento transnacional dessas disciplinas principalmente na Europa, com ênfase especial em regiões chave como França, Alemanha, Grã-Bretanha, Itália, Espanha e Portugal, incluindo também algumas observações relacionadas ao Brasil. O objetivo é elucidar como os avanços no conhecimento científico, nas práticas médicas e nas percepções sociais sobre as doenças mentais influenciaram as trajetórias da psiquiatria e da neurologia. Esta análise baseia-se em uma ampla gama de fontes históricas, incluindo literatura acadêmica. Examina criticamente figuras proeminentes, dinâmicas institucionais e mudanças nas normas sociais para desvendar a complexa interação das forças culturais, políticas e intelectuais que moldaram a evolução dessas áreas. O estudo revela um complexo conjunto de influências - como a humanização do tratamento, descobertas científicas significativas e a colaboração interdisciplinar - que contribuíram para o desenvolvimento da psiquiatria e da neurologia. Nossa pesquisa destaca a necessidade de contextualizar o quadro histórico no qual essas disciplinas emergiram e evoluíram, oferecendo assim insights sobre as práticas e políticas contemporâneas de cuidados com a saúde mental e a compreensão neurológica. Através dessa análise histórica, iluminamos a narrativa detalhada da psiquiatria e da neurologia, destacando seu desenvolvimento transnacional e os diversos fatores que impulsionaram sua evolução. Compreendendo as bases históricas dessas disciplinas, podemos obter valiosos insights sobre os desafios e as oportunidades que enfrentam os cuidados contemporâneos de saúde mental e a pesquisa neurológica, orientando assim as futuras direções no campo.

**Palavras-chave:** psiquiatria, neurologia, história, análise comparativa, contexto cultural

**RESUMEN:**

Este artículo investiga la evolución histórica de la psiquiatría y su interrelación con la neurología desde la Ilustración hasta principios del siglo XX. Examina el desarrollo transnacional de estas disciplinas principalmente en Europa, con especial énfasis en regiones clave como Francia, Alemania, Gran Bretaña, Italia, España y Portugal, incluyendo también algunos comentarios relacionados con Brasil. El objetivo es esclarecer cómo los avances en el conocimiento científico, las prácticas médicas y las percepciones sociales sobre las enfermedades mentales han influido en las

trayectorias de la psiquiatría y la neurología. Este análisis se basa en una amplia variedad de fuentes históricas, incluyendo literatura académica. Examina críticamente figuras prominentes, dinámicas institucionales y cambios en las normas sociales para descubrir la compleja interacción de las fuerzas culturales, políticas e intelectuales que han dado forma a la evolución de estos campos. El estudio revela un complejo conjunto de influencias, como la humanización del tratamiento, avances científicos significativos y la colaboración interdisciplinaria, que han contribuido al desarrollo de la psiquiatría y la neurología. Nuestra investigación subraya la necesidad de contextualizar el marco histórico en el que estas disciplinas surgieron y evolucionaron, ofreciendo así perspectivas sobre las prácticas y políticas contemporáneas en el cuidado de la salud mental y la comprensión neurológica. A través de este análisis histórico, iluminamos la narrativa detallada de la psiquiatría y la neurología, destacando su desarrollo transnacional y los diversos factores que impulsaron su evolución. Al comprender los fundamentos históricos de estas disciplinas, podemos obtener valiosos conocimientos sobre los desafíos y oportunidades que enfrentan los cuidados contemporáneos de salud mental y la investigación neurológica, orientando así futuras direcciones en el campo.

**Palabras clave:** psiquiatría, neurología, historia, análisis comparativo, contexto cultural

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## Introduction

This paper critically examines the transnational evolution of psychiatry and neurology in Europe, tracing their intertwined development from the Enlightenment to the early 20th century. Psychiatry's progression is analyzed through Shorter's paradigms - humanitarian, psychological, sociocultural, and biological - rooted in moral therapy, a practice emphasizing compassionate care and recognizing the social determinants of mental disorders. Shorter's framework identifies three pivotal stages in European mental health services: the establishment of therapeutic asylums, the mid-20th-century expansion of institutional care, and the transition to community-based care beginning in the 1970s [1, 2].

The development of psychiatry and neurology reflects a dynamic interplay of cultural, political, and intellectual influences. During the Enlightenment, figures such as Philippe Pinel in France and William Tuke in England revolutionized mental health care by advocating for asylum reform and

promoting compassionate treatment. These efforts marked a pivotal shift in societal approaches to mental illness. Building on this foundation, the 19th century saw psychiatry emerge as a distinct medical discipline, embracing a scientific framework centered on the brain's role in mental disorders. Concurrently, neurology evolved as a specialized field, driven by groundbreaking contributions from figures such as Jean-Martin Charcot in France, Moritz Heinrich Romberg in Germany, and John Hughlings Jackson in England, who advanced the understanding of neurological conditions and established clinical practices that continue to shape modern medicine.

The rise of biological psychiatry in the 19th and 20th centuries highlights the significant impact of clinical and laboratory observations. Kraepelin's classification systems, which form the basis for modern diagnostic tools, exemplify the growing integration of psychiatry and neurology. This integration is further evidenced by the contributions of pioneers such as Charcot and Alzheimer, whose groundbreaking work bridged the two fields and significantly advanced the understanding of mental health [3, 4].

Expanding on these foundations, this paper explores the regional evolution of psychiatric institutions, analyzing how cultural attitudes and governmental policies shaped mental health care systems across Europe [5]. The professionalization of psychiatry during the Enlightenment is also examined, emphasizing its connections to interdisciplinary trends that have continued to shape the field into the 20th and 21st centuries [6, 7].

A historical overview of neuroscience enhances this transnational perspective, highlighting early innovators who bridged psychiatry and neurology, thereby catalyzing major advancements in the field [8]. The intellectual development of psychotherapy is further traced, examining its conceptual evolution, practical applications, globalization, and cultural adaptation, alongside its intersections with psychiatry and neurology [9, 10]. Additionally, the transnational exchange of psychotherapeutic ideas in Europe fostered a dynamic blend of practices, influenced by local traditions, political pressures, and the legacies of wars and socio-political changes. This history highlights both the unique developments within each nation and the interconnected growth of psychotherapy across Europe [11].

The convergence of psychiatry and neurology has given rise to interdisciplinary fields such as neuropsychiatry, which explore the biological underpinnings of mental illness. This integration underscores the necessity of bridging these disciplines to develop a more holistic

understanding of complex conditions, thereby improving diagnosis and treatment. Significant progress in treatment approaches, exemplified by the introduction of moral therapy during the Enlightenment, further emphasized the importance of compassion and dignity in patient care. Advocates from France and England played a crucial role in embedding these principles into practice, laying the groundwork for modern therapeutic methods that prioritize humanity alongside medical efficacy.

The transnational landscape of psychiatry has significantly shifted in the latter half of the 20th century, with American psychiatry emerging as a dominant force, shaping both theoretical and clinical approaches worldwide [1, 4, 9]. Central to this transformation has been the Diagnostic and Statistical Manual of Mental Disorders (DSM), published by the American Psychiatric Association. Alongside the DSM, Cognitive Behavioral Therapy (CBT) has emerged as a central therapeutic approach within American psychiatry. This hegemony of American psychiatry, exemplified by the widespread influence of the DSM and CBT, has led to significant changes in how mental health care is approached worldwide. While it has fostered more structured, evidence-based practices, it has also raised critical questions about cultural diversity in diagnostic criteria, the reductionist nature of symptom-focused therapies, and the increasing medicalization of what were once seen as normal human experiences. These issues are particularly relevant in the context of global mental health, where cultural norms and expectations play a crucial role in shaping how mental health issues are understood and treated.

Through synthesizing these diverse perspectives, the paper offers a comprehensive analysis of the regional and transnational factors shaping European neuropsychiatry. Focusing on key nations such as France, Germany, Britain, Italy, Spain, and Portugal, with some issues raised about Brazil, it evaluates foundational Enlightenment ideas, the evolution of psychotherapeutic and neurological practices, and the transformative shifts of the 20th century, including community-based care and neurobiological advancements. Finally, it addresses enduring challenges such as stigma, disparities in access to care, and the ongoing need for multidisciplinary collaboration, highlighting the dynamic forces driving progress in mental health care.

### **French Psychiatry and Neurology Intersection**

The intersection of psychiatry and neurology in France has driven collaboration, innovation, and advancements in mental health.

Enlightenment ideals fostered humane, scientific approaches to mental illness, shaping modern psychiatry and neurology. Key institutions and figures are highlighted in updated literature [[1](#), [2](#), [9](#) - [17](#)], illustrated in [Figure 1](#).

### **Foundations from the 19th Century**

During the Enlightenment, French physicians reframed mental illness as a subject for scientific inquiry. Philippe Pinel, at Bicêtre Hospital, championed humane treatment, emphasizing observation and classification of mental disorders. His pivotal work, *Traité médico-philosophique sur l'aliénation mentale* (1801), laid the foundation for clinical psychiatry [[2](#)].

### **Psychotherapy and Neurological Insights**

France's intellectual openness spurred interest in psychological theories. Freud's concepts significantly influenced artistic and literary movements. However, psychoanalysis gained traction in France only post-World War II, largely due to Jacques Lacan, who reinterpreted Freudian ideas, emphasizing language, the unconscious, and symbolism. France presents an alternative origin story for psychotherapy, diverging from the narrative centered on Freud's psychoanalysis in Vienna. However, the emergence of psychotherapeutic practices can be traced back to the early 19th century with figures such as Philippe Pinel advocating for moral treatment. The cultural environment was shaped by hypnosis and trauma discourse, which facilitated the growth of psychotherapy throughout the 20th century. [[9](#), [11](#)]. Figures like Hippolyte Bernheim and Jean-Martin Charcot further advanced the field. Bernheim employed hypnosis for therapeutic suggestions, while Charcot, primarily diagnostic, studied hysteria as a nervous system pathology. Charcot's work at Salpêtrière Hospital, pivotal to neurology and psychiatry, inspired Freud and influenced Pierre Janet's focus on dissociation and trauma's role in nervous disorders [[12](#) - [14](#)].

### **Continued Evolution and Challenges**

Political and social upheavals, including the French Revolution, the Franco-Prussian War, and World War I, shaped evolving understandings of mental health. Philippe Pinel's reforms laid the groundwork for humane treatments, while Joseph Babinski's research on soldiers during World War I challenged hysteria's gendered diagnosis, marking a critical shift in psychiatric paradigms [[5](#), [13](#), [16](#)].

The 20th century saw biological psychiatry's rise through advancements in genetics, neurochemistry, and brain imaging. Psychoanalysis, led by

Lacan, coexisted with psychodynamic psychotherapy as psychopharmacology emerged. France played a pivotal role in psychopharmacology, with Henri Laborit, Jean Delay, and Pierre Deniker introducing chlorpromazine in the 1950s, revolutionizing schizophrenia treatment and psychiatric care [[16](#), [17](#)].

Despite challenges posed by centralized systems, language barriers, and the growing dominance of American psychiatry, France contributed significantly to psychiatric classifications, including Bouffée Délirante and chronic delusional psychoses. Post-World War II reforms focused on community-based care, although slower than those in Italy. French psychiatry remains influential globally, reflected in its contributions to modern classifications (DSM-5, ICD-11) and its innovative integration of psychopharmacology with psychotherapeutic practices [[4](#), [12](#), [17](#)].

### **German Psychiatry and Neurology Intersection**

The history of German psychiatry and neurology reflects a profound legacy shaped by scientific progress and philosophical inquiry. In the 19th century, influenced by Romantic mentalism and Naturphilosophie, psychiatry shifted from moralistic to biomedical perspectives, advancing institutional care and research through pioneers like Johann Christian Reil and Wilhelm Griesinger [[1](#) - [3](#), [9](#) - [11](#), [13](#), [14](#), [18](#) - [21](#)] [[Figure 2](#)].

### **Foundations from the 19th Century**

German psychiatry in the early 19th century embraced Enlightenment ideals and Romantic mentalism, fostering a scientific approach to mental illness. Reil, who coined "psychiatry," advocated integrated psychological and physiological treatments, forming modern psychiatric foundations [[3](#), [9](#), [14](#)]. Griesinger emphasized biological underpinnings of mental disorders, notably in *Pathology and Therapy of Psychic Disorders* (1845), integrating psychiatry into mainstream medicine and promoting institutionalized care [[2](#), [13](#), [19](#)].

Institutions like Berlin's Charité Hospital became hubs for modern psychiatric practice under Griesinger, where Carl Wernicke advanced neuroanatomy and aphasia studies [[20](#), [21](#)]. Similarly, Emil Sioli at the Frankfurt Asylum emphasized humane treatment, enabling Alois Alzheimer's groundbreaking research on Alzheimer's disease [[18](#)]. Wars, including the Franco-Prussian War (1870–71) and World War I, catalyzed studies on trauma-related disorders by figures like Karl Bonhoeffer and



Emil Kraepelin, cementing Germany's leadership in psychiatry and neurology [[14](#), [19](#)].

### **Psychotherapy and Neurological Insights**

Germany's intellectual tradition profoundly shaped psychoanalysis, the birthplace of Sigmund Freud and his revolutionary concepts [[3](#), [11](#), [14](#)]. Freud's drive theory and ego development inspired Carl Jung, Alfred Adler, and others, who expanded psychoanalytic theory. Despite setbacks during the Nazi era, Germany contributed to psychotherapy with innovations in hypnosis and materialist views of mental illness [[13](#), [14](#)].

German psychiatry integrated biological and psychosocial approaches, advancing neuroscience and psychiatric research. Modern German analysts, while maintaining Freudian foundations, have incorporated empirical research, balancing classical principles with contemporary clinical innovations [[11](#), [19](#)].

### **Continued Evolution and Challenges**

The Nazi regime (1933–1945) profoundly scarred German psychiatry, enforcing eugenics policies under figures like Ernst Rüdin and Hans Asperger. Rüdin, a key proponent, justified forced sterilization programs and oversaw the T4 euthanasia initiative, which killed approximately 200,000 individuals with mental illnesses or disabilities. Institutions were complicit, with patients subjected to lethal injections and gas chambers [[13](#), [14](#), [19](#) - [21](#)].

Notable psychiatrists, including Alfred Hoche (Freiburg), Max de Crinis (Cologne), and Carl Schneider (Heidelberg), supported or coordinated euthanasia operations. Werner Heyde, the T4 program's medical director, played a central role. Researchers like Julius Hallervorden and Viktor von Weizsäcker conducted brain studies on euthanasia victims, intertwining academic research with atrocities [[14](#), [18](#), [19](#), [21](#)].

Post-war reckoning led to ethical reforms emphasizing patient rights and humane treatment. Despite historical disruptions, Germany's psychiatry evolved, advancing neurobiological insights and holistic mental health approaches. However, the dark legacy of the Nazi era underscores the peril of aligning medicine with ideological extremism [[3](#), [11](#), [14](#), [18](#)].

## **British Psychiatry and Neurology Intersection**

The evolution of British psychiatry reflects a commitment to scientific progress, compassion, and patient-centered care, spanning from Enlightenment ideals to modern practices. This legacy has shaped psychiatric policy and practice while highlighting key institutions and influential figures [1 - 3, 6, 9 - 11, 22, 23], as summarized in [Figure 3](#).

## **Foundations from the 19th Century**

Enlightenment pioneers like William Cullen and Robert Whytt underscored the clinical importance of mental illness, establishing foundations for modern diagnostic methods [1, 6]. Inspired by Philippe Pinel's reforms in France, reformers such as William Tuke advanced moral therapy, promoting humane care. Institutions like the York Retreat and Bethlem Royal Hospital became critical centers for these practices [2, 6]. The 19th century also saw the rise of major institutions such as the Maudsley Hospital, which emerged as a hub for psychiatric research and training [2].

## **Psychotherapy and Neurological Insights**

The term "psychotherapy" gained prominence through figures like Walter Dendy and Daniel Tuke, with the York Retreat embodying ethical care models. Overcrowded asylums necessitated innovative therapies that combined moral principles with scientific advancements. Psychoanalysis later gained ground, notably after World War I, through David Eder and Bernard Hart, with the Tavistock Clinic emerging as a key training center [23]. Earlier, John Hughlings Jackson's groundbreaking research on epilepsy and brain function profoundly impacted both psychiatry and neurology [22].

Freudian psychoanalysis entered Britain gradually, facing initial skepticism. However, figures like Melanie Klein legitimized it, particularly in child psychology. The UK's historical narrative in psychotherapy is significantly marked by the contributions of the Tavistock Clinic and figures like John Bowlby and Donald Winnicott. Psychoanalysis became entwined with the concept of a liberal psyche following WWII, helping to shape the welfare state's psychological foundations [11, 23].

## **Continued Evolution and Challenges**

Post-World War I, institutions like the Maudsley Hospital, under leaders such as John Conolly and Henry Maudsley, became pivotal in advancing psychiatric care [2, 6]. The psychological toll of both World Wars emphasized the importance of trauma-informed care [22]. During the

interwar period, psychoanalysis gained traction, driven by Freud's influence and his followers [23].

The mid-20th century marked significant transformations, including the deinstitutionalization movement and the creation of the National Health Service (NHS) in 1948, which expanded access to mental health services. Key milestones included integrating mental hospitals into the NHS and founding the Royal College of Psychiatrists in 1971. Tracing its origins to 1841 as the Association of Medical Officers of Asylums and Hospitals for the Insane, the College symbolizes Britain's ongoing efforts to enhance psychiatric care [2, 6, 23].

### **Italian Psychiatry and Neurology Intersection**

Despite Italy's political divisions, its Renaissance legacy fostered advancements in psychiatry and neurology. The country's rich psychiatric history reflects innovation, resilience, and compassion, shaped by historical, cultural, and scientific developments. Italy has also emerged as a leader in critiquing mental health care systems that perpetuate exclusion and segregation. This evolution, highlighted by key figures and institutions, is summarized in [Figure 4](#) [2, 9, 11, 24 - 31].

### **Foundations from the 19th Century**

Italian psychiatry prioritized humane treatment during the Enlightenment, exemplified by Vincenzo Chiarugi and therapeutic asylums in Florence [2, 28]. The Risorgimento (1815–1871) spurred medical advancements despite socio-economic challenges, with Cesare Lombroso contributing significantly to psychiatry [31].

### **Psychotherapy and Neurological Insights**

In Italy, the professional landscape of clinical psychology saw the integration of psychoanalytic concepts, particularly through the influence of Freud's ideas introduced in the 1920s. This gradual assimilation has informed therapeutic practices in Italy, which are characterized by a mix of psychoanalytic tradition and local cultural practices [11, 25, 28]. Pioneering neuropsychiatry at the turn of the 20th century, Giovanni Mingazzini emphasized anatomical findings to link brain structures with psychiatric symptoms, laying a foundation at Sapienza University [9, 24, 30]. His successors, Sante De Sanctis and Ugo Cerletti, expanded this biological framework. De Sanctis (1929–1935) advanced child psychiatry and intellectual disability studies, adopting a biopsychosocial approach. Cerletti (1935–1948) revolutionized psychiatric treatment with

electroconvulsive therapy, highlighting the physiological underpinnings of mental health [24, 25, 28].

In 1971, the Società Italiana di Neurologia (SIN) congress formalized the separation of psychiatry and neurology, aligning neurology with internal medicine while psychiatry evolved with neuroimaging and genetic research [25, 29].

### **Continued Evolution and Challenges**

The Fascist regime (1922–1943) deeply influenced psychiatry, promoting eugenics and using psychiatric institutions for social control. Critics like Cesare Lombroso, with his theories on "born criminals," saw their ideas adapted to serve state ideology [28, 31].

Ugo Cerletti's 1938 introduction of electroconvulsive therapy marked a milestone in psychiatric treatment [24, 25]. Post-World War II, Italy transitioned to a republic in 1946, with psychiatry and neurology emerging as distinct fields. Radical reforms led by Franco Basaglia culminated in Law 180 (1978), mandating asylum closures and fostering community-based care, now a global model for deinstitutionalization and patient rights [28].

### **Spanish Psychiatry and Neurology Intersection**

Spain's evolution in psychiatry and neurology reflects the complex interplay of historical, cultural, and scientific influences. As a former global empire, Spain contributed significantly to these disciplines, with figures like Santiago Ramón y Cajal shaping modern neurology through groundbreaking research. His work continues to influence clinical practices and policies today, as summarized in [Figure 5](#) [2, 32 - 37]. This trajectory highlights key institutions, notable figures, and the challenges faced by the field.

### **Foundations from the 19th Century**

Spanish psychiatry traces its roots to early mental health facilities like the Hospital de los Inocentes (Valencia, 1404) and similar establishments in Zaragoza (1425) and Toledo (1480). Psychiatry emerged as a distinct medical field in the 19th century, reflecting European trends toward the medicalization of mental illness. During this time, Spanish physicians adopted and advanced mental health practices, influenced by European thinkers like Philippe Pinel, who incorporated insights from Spanish hospitals into his reforms in France [35]. Despite these developments, the

Spanish Civil War disrupted progress, stalling institutional and scientific growth [32].

### **Psychotherapy and Neurological Insights**

In Spain, studies on psychotherapy emphasize the rise of psychoanalytic concepts through Freud's influence on neuropsychiatrists during the 1920s and their dissemination by Emilio Mira y Lopes through a journal based in Barcelona [11]. Freud's theories, introduced in Spain during the early 20th century, inspired the establishment of the country's first psychoanalytic institute, led by Ángel Garma [35]. Philosopher José Ortega y Gasset popularized concepts like the unconscious, integrating psychoanalytic ideas into Spain's intellectual discourse [35].

Cajal's Nobel Prize-winning research on the nervous system laid the foundation for understanding psychiatric disorders, advancing both psychiatry and neurology. The "Spanish Neurological School," centered around Cajal, fostered significant clinical progress, with pioneers like Lluís Barraquer Roviralta conducting groundbreaking research in Barcelona [36, 37].

### **Continued Evolution and Challenges**

The Spanish Civil War (1936–1939) and Francisco Franco's regime (1939–1975) deeply impacted psychiatry [32]. The Second Republic's progressive reforms emphasized mental hygiene, early diagnosis, and rehabilitation, but Franco's dictatorship reversed these advances. Psychiatry became a tool for political repression, as dissenters were labeled mentally ill and institutionalized. Post-war policies prioritized custodial care over scientific progress, sidelining figures like Emilio Mira y López, who fled Spain, while others, such as Vallejo Nájera, aligned with Francoist ideology and hindered reform.

Following Franco's death in 1975, Spain implemented the Psychiatric Reformation Act, which emphasized community-based care and deinstitutionalization, integrating psychiatric services into the national healthcare system. This marked a shift toward modern mental health practices, addressing the challenges of Franco's oppressive legacy.

### **Brazilian Connections with Psychiatry and Europe**

Brazilian neurology and psychiatry were heavily influenced by European traditions, particularly from France and Germany, with additional ties to Portugal, rooted in shared cultural and linguistic heritage [Figure 6].

Academic interest in the history of Brazilian psychiatry has grown, focusing on its colonial roots, the transformative 19th and 20th centuries, and contemporary challenges and innovations [44 - 53].

### **The Emergence of the Asylum System**

Psychiatric care in Brazil initially relied on healers and priests. The establishment of the Pedro II Asylum in Rio de Janeiro in 1852, modeled after European institutions, marked a turning point. Despite its significance, issues like overcrowding underscored the tensions between scientific exploration and public welfare.

In the early 19th century, Brazilian psychiatry adopted French alienist principles but prioritized social over scientific concerns. The centralized monarchy and religious institutions shaped Brazil's asylum system. A partir da inauguração do Hospício Pedro II, iniciou-se a construção de diversos hospitais ao longo do século XIX. Em São Paulo, foi erguido o Hospício Provisório em 1852, seguido pelo Hospício do Juquery, em 1898. In Pernambuco, the Recife-Olinda Hospice, under the patronage of Visitação de Santa Isabel, was established in 1864, followed later by the Tamarineira Hospice. In the state of Pará, the Provisional Hospice was founded in 1873 in Belém, near the Lázarus Hospice. Meanwhile, in Bahia, the São João de Deus Asylum was inaugurated in Salvador in 1874 [51].

### **Transformations in Brazilian Psychiatry**

Early 20th-century reformers, including Juliano Moreira and Ulisses Pernambucano de Melo Sobrinho, improved care despite limited treatments [44]. The advent of psychotropic drugs marked significant progress but was accompanied by challenges, including privatization.

Inspired by international models, deinstitutionalization in the 1980s and 1990s promoted community-based care networks. However, these reforms faced political and ideological hurdles, especially during the Brazilian military dictatorship.

### **Collaboration and Progress**

Brazilian psychiatry's evolution highlights a journey of challenges, reforms, and international collaboration. Main milestones include the 1852 founding of the National Hospice for the Insane [48], the 1883 Chair of Mental and Nervous Diseases led by João Carlos Teixeira Brandão, and the 1912 Chair of Neurology established by Antônio Austregésilo Rodrigues de Lima later unfolded in the Institute of Psychiatry and Institute of Neurology of the



nowadays Federal University of Rio de Janeiro [46, 47, 52, 53]. These developments underscore the shared progress and enduring legacy of psychiatry and its links with neurology in Brazil.

## Conclusion

This paper explores the historical development of psychiatry and its intersection with neurology, focusing on their evolution in various European nations and their influence on Brazil. The Renaissance and Enlightenment periods provided fertile ground for advancements in science, medicine, and philosophy, laying the foundation for understanding mental health and its connection to brain function. These intellectual movements inspired the creation of the first asylums and introduced an institutional approach to mental health care. Simultaneously, growing advocacy for human rights and more compassionate treatment set the stage for transformative reforms in the centuries to follow.

In the 19th century, European countries spearheaded significant advancements in medical science, which fostered the recognition of mental illnesses as medical conditions. The widespread establishment of psychiatric hospitals during this period marked a pivotal shift from custodial care to structured medical models. These institutions also became platforms for early therapeutic interventions, such as ECT and insulin shock therapy, signaling a commitment to scientific approaches in treatment. However, the cultural and political climates of individual nations influenced the governance and development of these hospitals, leading to diverse approaches to mental health care across Europe.

The early 20th century brought further transformation, driven by Freud's psychoanalytic theory, which originated in Europe and revolutionized the understanding of the human psyche. At the same time, European researchers were at the forefront of developing psychotropic medications, such as chlorpromazine, which greatly enhanced treatment efficacy. These advancements, coupled with increased awareness and advocacy for mental health, catalyzed significant reforms across the continent to address the growing burden of mental illnesses.

By the mid-20th century, psychiatry in Europe had evolved to integrate psychodynamic theories with the advancing field of biological psychiatry. This period also saw the rise of deinstitutionalization, a landmark shift in mental health care, as many European nations transitioned from large-scale asylums to community-based care systems. The publication of the

DSM provided a shared diagnostic framework, which was often adapted to reflect regional needs. Concurrently, the "golden age" of psychopharmacology and the emergence of CBT expanded the range of therapeutic options, enriching mental health care practices throughout Europe.

In recent decades, Europe has suffered extraordinary progress in neuroscience, which has profoundly influenced psychiatry and neurology. Advances such as functional magnetic resonance imaging (fMRI) and a deeper understanding of neurobiological mechanisms have paved the way for targeted and personalized treatments. The convergence of these fields has not only enhanced the understanding of mental health disorders but also positioned European researchers as some of the main leaders in these innovations.

Globalization has further shaped psychiatry by influencing diagnostic systems, treatment methods, care delivery, and the preservation of regional traditions. Despite these achievements, challenges such as resource constraints, persistent stigma, and systemic inequalities continue to impede equitable access to mental health care. Each nation's unique historical and cultural context plays a critical role in shaping current practices, impacting the integration of services and the formulation of public health strategies. Moving forward, addressing these disparities while building on Europe's rich legacy of innovation in psychiatry and neurology will be essential to creating patient-centered, multidimensional care systems.

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## References

- 1. Shorter E. A history of psychiatry: from the era of the asylum to the age of Prozac. Hoboken: John Wiley & Sons; 1997.
- 2. Shorter E. The historical development of mental health services in Europe. In: Knapp M, McDaid D, Mossialos E, Thornicroft G, editors. Mental health policy and practice across Europe. Maidenhead: Open University Press; 2006. p. 15-33.
- 3. Gach J. Biological psychiatry in the nineteenth and twentieth centuries. In: Wallace ER, Gach J, editors. History of psychiatry and





medical psychology. Boston: Springer; 2008. p. 381-418.  
[https://doi.org/10.1007/978-0-387-34708-0\\_12](https://doi.org/10.1007/978-0-387-34708-0_12)

4. Shorter E. The history of nosology and the rise of the Diagnostic and Statistical Manual of Mental Disorders. *Dialogues Clin Neurosci.* 2015;17(1):59-67.  
<https://doi.org/10.31887/dcns.2015.17.1/eshorter> PMID:25987864  
PMCID:PMC4421901
5. Le Bonhomme F, Le Bras A. Psychiatric institutions in Europe, nineteenth and twentieth century. Paris: Digital Encyclopedia of European History; 2021.  
<https://ehne.fr/en/encyclopedia/themes/political-europe/control-and-discipline/psychiatric-institutions-in-europe-nineteenth-and-twentieth-century>
6. Kendler KS, Tabb K, Wright J. The emergence of psychiatry: 1650-1850. *Am J Psychiatry.* 2022;179(5):329-35.  
<https://doi.org/10.1176/appi.ajp.21060614> PMID:35331024
7. Sánchez-Marcos F. Historiography of the 20th and 21st Centuries. [place unknown]: Culturahistorica.org; 2020.  
<http://culturahistorica.org/historiography/historiography-of-the-19th-and-20th-centuries/>
8. Tandon PN, Chandra PS. Evolution of neurosciences: a historical review with brief biographies of some of its selected pioneers. *Neurol India.* 2022;70 Suppl 1:S1-113.  
[https://journals.lww.com/neur/citation/2022/70001/evolution\\_of\\_neurosciences\\_a\\_historical\\_review.1.aspx](https://journals.lww.com/neur/citation/2022/70001/evolution_of_neurosciences_a_historical_review.1.aspx)
9. Buchanan RD, Haslam N. Psychotherapy. In: Sternberg RJ, Pickren WE, editors. *The Cambridge handbook of the intellectual history of psychology.* Cambridge: Cambridge University Press; 2019. p. 468-94. <https://doi.org/10.1017/9781108290876.019>
10. Marks S. Psychotherapy in Europe. *Hist Human Sci.* 2018;31(4):3-12. <https://doi.org/10.1177/0952695118808411>  
PMID:30595623 - PMCID:PMC6297894

11. Marks S. Psychotherapy in Europe. *Hist Human Sci.* 2018;31(4):3-12. <https://doi.org/10.1177/0952695118808411> PMID:30595623 - PMCID:PMC6297894
12. Crocq MA. French perspectives on psychiatric classification. *Dialogues Clin Neurosci.* 2015;17(1):51-7. <https://doi.org/10.31887/dcns.2015.17.1/macrocq> PMID:25987863 PMCID:PMC4421900
13. Gomes MM, Engelhardt E. Hysteria to conversion disorders: Babinski's contributions. *Arq Neuropsiquiatr.* 2014;72(4):318-21. <https://doi.org/10.1590/0004-282x20130229> PMID:24760098
14. Gomes MM, Mendlowicz MV, Nardi AE. Psychiatric nosological historiography - Part I: until the rise and fall of psychodynamic theory. *Debates Psiquiatr.* 2023;13:1-25. <https://doi.org/10.25118/2763-9037.2023.v13.1031>
15. Gomes MM, Mendlowicz MV, Nardi AE. Psychiatric nosological historiography - Part II: psychopharmacology and somatogenic perspectives. *Debates Psiquiatr.* 2023;13:1-15. <https://doi.org/10.25118/2763-9037.2023.v13.1032>
16. Pichot P. The history of psychiatry as a medical speciality. In: Gelder M, Andreasen N, Lopez-Ibor J, Geddes J. *New Oxford textbook of psychiatry.* 2nd ed. Oxford: Oxford University Press; 2009. p. 17-27. <https://doi.org/10.1093/med/9780199696758.003.0005>
17. Kunz E. Henri Laborit and the inhibition of action. *Dialogues Clin Neurosci.* 2014;16(1):113-7. <https://doi.org/10.31887/dcns.2014.16.1/ekunz> PMID:24733976 PMCID:PMC3984888
18. Chase R. *The making of modern psychiatry.* Berlin: Logos Verlag; 2018. <https://doi.org/10.30819/4718>
19. Gaebel W, Zielasek J, Müller U. Psychiatry in Germany. *Int Psychiatry.* 2007;4(3):61-3. PMID:31507898 - PMCID:PMC6734760
20. Karenberg A, Fangerau H, Steinmetz H, Berlit P, Grond M. Historical review: a short history of German neurology - from its

origins to the 1940s. *Neurol Res Pract.* 2019;1:14.  
<https://doi.org/10.1186/s42466-019-0019-z> PMID:33324880  
 PMCID:PMC7650065

- 21. Lindert J, Stein Y, Guggenheim H, Jaakkola JJK, Strous RD. How ethics failed — the role of psychiatrists and physicians in nazi programs from exclusion to extermination, 1933–1945. *Public Health Rev.* 2012;34:8. <https://doi.org/10.1007/BF03391660>
- 22. Rose FC. Chapter 39: an historical overview of British neurology. *Handb Clin Neurol.* 2010;95:613-28.  
[https://doi.org/10.1016/s0072-9752\(08\)02139-8](https://doi.org/10.1016/s0072-9752(08)02139-8) PMID:19892142
- 23. Royal College of Psychiatrists. Through the decades: a deep dive through 75 years of NHS history. London: Royal College of Psychiatrists; 2023. <https://www.rcpsych.ac.uk/news-and-features/blogs/detail/history-archives-and-library-blog/2023/07/05/through-the-decades-a-deep-dive-into-nhs-history>
- 24. Coccanari de' Fornari MA, Iannitelli A, Biondi M. Storia della Clinica Psichiatrica della Sapienza Università di Roma nel Policlinico Umberto I. *Riv Psichiatr.* 2017;52(1):1-8.  
<https://doi.org/10.1708/2631.27048> PMID:28287191
- 25. Gomes MM. História da neurologia mundial e seus protagonistas. Rio de Janeiro: Letra Capital; 2021. Escola Neurológica Italiana e a Universidade de Roma La Sapienza; p. 103-10.
- 26. Gomes MM. Luigi Luciani (1840-1919) - the Italian Claude Bernard with German shaping, and his studies on the cerebellum with projections to nowadays. *Rev Bras Neurol.* 2019;55(3):33-7  
<https://doi.org/10.46979/rbn.v55i3.29774>
- 27. Federico A. Italian neurology: past, present and future. *Funct Neurol.* 2011;26(2):73-6. PMID:21729588 - PMCID:PMC3814448
- 28. Fiorillo A, Ventriglio A. The legacy of Italian psychiatry. *Int Rev Psychiatry.* 2018;30(2):118-9.  
<https://doi.org/10.1080/09540261.2018.1435771> PMID:29757028

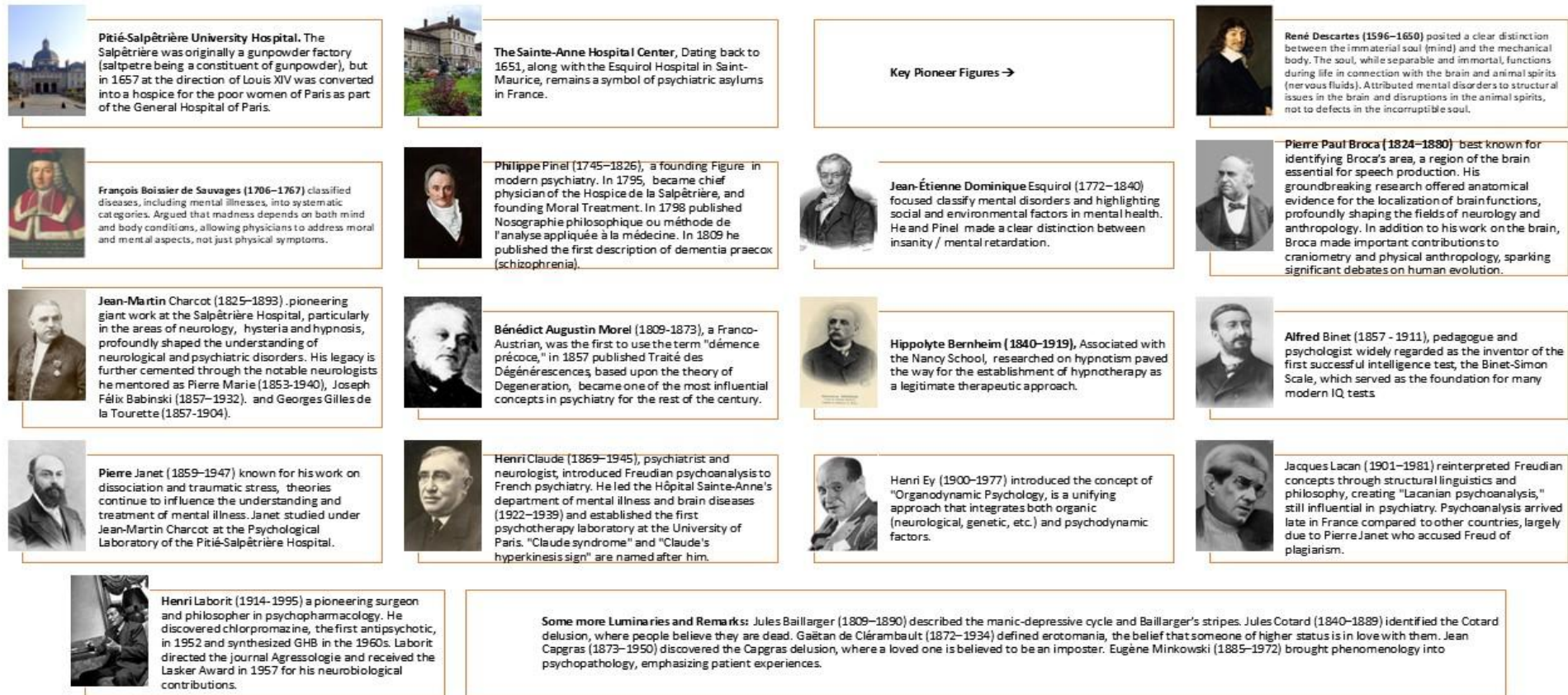
29. Bentivoglio M, Mazzarello P. Chapter 44: history of neurology in Italy. *Handb Clin Neurol*. 2010;95:719-35.  
[https://doi.org/10.1016/s0072-9752\(08\)02144-1](https://doi.org/10.1016/s0072-9752(08)02144-1) PMID:19892147
30. Gomes MM. Jean-Alexandre Barré (1880-1967): his detection sign of subtle paresis due to pyramidal deficit (1919) and his work in line with that of Giovanni Mingazzini (1859-1929). *Neurol Sci*. 2019;40(12):2665-9. <https://doi.org/10.1007/s10072-019-03988-z> PMID:31338617
31. Orlandi F. Reassessing the legacy of Cesare Lombroso. In: Ruberg W, Bergers L, Dirven P, Martínez SS. *Forensic cultures in modern Europe*. Manchester: Manchester University Press; 2023. p. 147-68. <https://doi.org/10.7765/9781526172358.00011>
32. Huertas R. Spanish psychiatry: the Second Republic, the Civil War, and the Aftermath. *Int J Ment Health*. 2006;35(4):54-65.  
<https://doi.org/10.2753/IMH0020-7411350407>
33. Ristol EGA, Martín JGA. Giné y Partagás (1836-1903), precursor de la neurología en España. *Neurosci Hist*. 2015;3(1):19-29.  
[https://nah.sen.es/vmfiles/abstract/NAHV3N1201519\\_29ES.pdf](https://nah.sen.es/vmfiles/abstract/NAHV3N1201519_29ES.pdf)
34. Alarcón RD, Lolas F, Mari JJ, Lázaro J, Baca-Baldomero E. Latin American and Spanish-speaking perspectives on the challenges of global psychiatry. *Braz J Psychiatry*. 2020;42(1):77-86.  
<https://doi.org/10.1590/1516-4446-2018-0397> PMID:31269096  
PMCID:PMC6986483
35. Rivera JLG. Psychiatry in Spain. *Psychiatr Times*. 2002:34.  
<https://luisderivera.com/wp-content/uploads/2012/02/2002-PSYCHIATRY-IN-SPAIN.pdf>
36. Castro F. Cajal and the Spanish neurological school: neuroscience would have been a different story without them. *Front Cell Neurosci*. 2019;13:187.  
<https://doi.org/10.3389/fncel.2019.00187> PMID:31178695  
PMCID:PMC6542961
37. Barraquer Bordas L. The history of Spanish clinical neurology in Barcelona 1881-1949. *J Hist Neurosci*. 1993;2(3):203-15.  
<https://doi.org/10.1080/09647049309525568> PMID:11618456

38. Barata L. Professor Egas Moniz - The portuguese nobel prize in medicine and physiology. Lisboa: Faculdade de Medicina da Universidade de Lisboa; 2019.  
<https://www.medicina.ulisboa.pt/en/newsfmul-artigo/93/professor-egas-moniz-portuguese-nobel-prize-medicine-and-physiology>
39. Gama Marques J, Bento A. Júlio de Matos (1856-1922): cem anos após a sua morte. Rev Port Psiquiatr Saude Ment. 2021;7(3):92-3. <https://doi.org/10.51338/rppsm.2021.v7.i3.214>
40. Palha A, Marques-Teixeira J. The emergence of psychiatry in Portugal: from its roots to now. Int Rev Psychiatry. 2012;24(4):334-40. <https://doi.org/10.3109/09540261.2012.695279>  
PMID:22950773
41. Pereira JMM. A psiquiatria em Portugal: protagonistas e história conceptual (1884-1924) [tese]. Coimbra: Universidade de Coimbra, 2015. <https://hdl.handle.net/10316/29514>
42. Jacobina RR. Médicos de Portugal sob olhar de Juliano Moreira historiador. Rev Fontes Documentais. 2020;3:648-67.  
<https://periodicos.ufba.br/index.php/RFD/article/view/57717/31209>
43. Miranda CS, Grilo FJA, Pinho JMBC. Classicismo nos hospitais da misericórdia e da beneficência na segunda metade do século XIX: trânsito entre Brasil e Portugal. ARTis ON. 2015;(1):231-7.  
<https://doi.org/10.37935/aion.v0i1.30>
44. Miranda-Sá Jr. LS. Breve histórico da psiquiatria no Brasil: do período colonial à atualidade. Rev Psiquiatr Rio Gd Sul. 2007;29(2):156-8. <https://doi.org/10.1590/S0101-81082007000200005>
45. Oda AMGR, Dalgalarrodo P. O início da assistência aos alienados no Brasil ou importância e necessidade de estudar a história da psiquiatria. Rev Latinoam Psicopatol Fundam. 2004;7(1):128-41. <https://doi.org/10.1590/1415-47142004001012>
46. Gomes MM, Cavalcanti JL. The brazilian neurology centenary (1912-2012) and the common origin of the fields of Neurology and Psychiatry. Arq Neuropsiquiatr. 2013;71(1):63-5.

<https://doi.org/10.1590/s0004-282x2013000100014>

PMID:23338164

- 47. Gomes MM, Engelhardt E. Historical sketches of the beginnings of the academic "Mental and Nervous Diseases" in Brazil, and European influences. *Arq Neuropsiquiatr*. 2013;71(8):562-5. <https://doi.org/10.1590/0004-282x20130095> PMID:23982017
- 48. Casa de Oswaldo Cruz. *Dicionário Histórico-Biográfico das Ciências da Saúde no Brasil (1832-1970): Hospício de Pedro II*. Rio de Janeiro: Casa de Oswaldo Cruz; 2024. <https://dichistoriasaude.coc.fiocruz.br/>
- 49. Instituto Municipal de Assistência à Saúde Nise da Silveira. *Base de dados história e loucura*. Rio de Janeiro: Instituto Municipal de Assistência à Saúde Nise da Silveira; [citado em 23 de dezembro de 2024]. <http://historiaeloucura.gov.br/index.php/instituto-municipal-de-assistencia-saude-nise-da-silveira>
- 50. Oliveira PHFD. O tratamento dos alienados na América Latina: a recepção dos preceitos alienistas no além-mar. *Bilros*. 2018;6(12): 262-81. <https://www.arca.fiocruz.br/handle/icict/58535>
- 51. Piccinini WJ. Notas para uma história da psiquiatria na América Latina. *Psychiatry on Line Brazil*. 2010;15(4). [www.polbr.med.br/ano10/wal0410.php#:~:text=As%20primeiras%20c](http://www.polbr.med.br/ano10/wal0410.php#:~:text=As%20primeiras%20c)
- 52. Venâncio AT. Ciência psiquiátrica e política assistencial: a criação do Instituto de Psiquiatria da Universidade do Brasil. *Hist Cienc Saude Manguinhos*. 2003;10(3):883-900. <https://doi.org/10.1590/s0104-59702003000300005> PMID:14994710
- 53. Biblioteca Virtual em Saúde, História e Patrimônio Cultural das Ciências e da Saúde. *Profissionais que atuaram no Hospital Nacional dos Alienados*. Rio de Janeiro: Biblioteca Virtual em Saúde; [citado em 23 de dezembro de 2024]. <https://hpcs.bvsalud.org/vhl/temas/historia-saberes-psi/galeria-de-personagens/>



**Figure 1.** Main Institutions, Key Leading Figures and Contexts from France  
Drawing mainly from Wikipedia's public domain images and related basic biographical data

# Transnational evolution of psychiatry and neurology



**Figure 2.** Main Institutions, Key Leading Figures and Contexts from Germany Psychiatry  
Drawing mainly from Wikipedia's public domain images and related basic biographical data





**Figure 3.** Main Institutions, Key Leading Figures and Contexts from Britain  
Drawing mainly from Wikipedia's public domain images and related basic biographical data

# Transnational evolution of psychiatry and neurology



**The Santa Maria della Pietà institution (1548)** primarily served pilgrims during the Holy Year of 1550 before specializing in aiding the poor, vagabonds, and especially caring for the mentally ill. Over the centuries, it moved to various locations, most recent structure built in Monte Mario. It has been the main psychiatric hospital in Rome until its closure in 1999



**The Mombello Psychiatric Hospital (1878)** was the largest asylum in Italy with multiple buildings located as to form a small village. It is located in Linate, in the administrative district of Monza and Brianza, Lombard Province. It was the last psychiatric hospital to be closed after the approval of the Legge Basaglia in 1978.



**The Clinic of Nervous and Mental Diseases at the University of Rome**, established in 1871, holds historical ties to the Risorgimento, the Italian unification movement. - reflecting the intellectual and societal changes of the time. Image adapted from <https://web.uniroma1.it/neuroscienze/chi-siamo>

## Key Pioneer Figures →



**Vincenzo Chiarugi (1759–1820)** significantly contributed to moral treatment. As director of Santa Dorotea hospital (1785-1788), he banned the use of chains for psychiatric patients. In 1788, he became the physician director of Bonifacio Hospital, where he adapted a wing to better serve patients and implemented new humanitarian regulations in 1789.



**Cesare Lombroso (1835–1909)** criminologist, physician, and psychiatrist, best known as a founder of criminal anthropology for identification in somatic features of the degenerative stigmata of criminals. While controversial, Lombroso's work contributed to the understanding of the biological and psychological factors underlying criminality.



**Camillo Golgi (1843–1926)** pioneered contributions to the study of the nervous system. Studied medicine at the University of Pavia under Cesare Lombroso's guidance. Developed the black reaction staining technique, which revolutionized neuroscience (1873). Shared the Nobel Prize in Physiology or Medicine with Cajal (1906).



**Leonardo Bianchi (1849–1927)**, a neuropathologist, politician, and author, gained acclaim for his research on brain functions and neurological disorders, particularly focusing on the frontal lobe, where his experiments provided significant insights into cerebral functions.



**Augusto Tambruni (1848–1919)** modernized psychiatric care and advanced scientific research. He directed the San Lazzaro asylum in Reggio Emilia, shaped Italy's psychiatric legislation, and fostered collaboration through the "Rivista sperimentale di freniatria" journal. Made contributions to forensic psychiatry and mental health treatment.



**Enrico Morselli (1852–1929)**, psychiatrist and parapsychologist, promoter of the Italian positivist school of neuropsychiatry. Directed the asylum of Macerata and later the psychiatric clinics of the universities of Turin and Genoa. Participated in the founding of several journals as Rivista sperimentale di freniatria, Rivista di filosofia scientifica, Rivista di patologia nervosa e mentale.



**Eugenio Tanzi (1856–1934)**, pioneered biological psychiatry. He founded the Rivista di Patologia Nervosa e Mentale and authored the influential Trattato delle malattie mentali. A supporter of Cajal's neuron theory, he significantly advanced neuropsychology and psychiatry in Italy through teaching and research.



**Giovanni Mingazzini (1859–1929)** prominent Italian neurologist and psychiatrist - father of modern Roman neurology. Made significant contributions to clinical practice and education, notably at the S. Maria della Pietà psychiatric hospital and the Laboratory of Neuropathology. Was instrumental in establishing the Italian Society of Neurology. At Sapienza University, shaped the curriculum for future neurologists and psychiatrists.




**Sante De Sanctis (1862–1935)** worked at the pathological anatomy lab of Santa Maria della Pietà under Giovanni Mingazzini. Influenced Italian psychology and pediatric psychiatry, published works on dream psychology that impacted Freud, established a chair in experimental psychology, organized the 5th International Congress of Psychology in 1905, and founded Italy's first pediatric psychiatry ward and kindergarten for disabled children.



**Ugo Cerletti (1877–1963)** the third in a lineage of neuropsychiatrists, succeeding Giovanni Mingazzini and Sante De Sanctis as Chair of the Department of Mental and Neurological Diseases at the University of Rome La Sapienza. Renowned for inventing ECT, which he began testing on humans in the 1930s.



**Franco Basaglia (1924–1980)** psychiatrist who is best known for his advocacy of psychiatric reform and his role in the closure of psychiatric hospitals in Italy. He championed the rights of psychiatric patients and promoted community-based mental health care, influencing psychiatric practices worldwide.

 **Figure 4.** Main Institutions, Key Leading Figures and Contexts from Italy  
Drawing mainly from Wikipedia's public domain images and related basic biographical data



**Juan Giné y Partagás (1836–1903)** was a physician and writer who graduated from the University of Barcelona and earned his doctorate in Madrid. A pioneer in organic psychiatry, he organized the first psychiatry congress in Barcelona (1883) and co-founded the **Barcelona Medical Institute**, contributing to neurology.



**José María Esquerdo Zaragoza (1842–1912)**, a reformer in psychiatric care, Esquerdo advocated for more humane treatment of patients with mental illnesses. He founded the **Esquerdo Sanatorium**, which became a model psychiatric institution in Spain.



**Luís Simarro Lacabra (1851–1921)** a neurologist who studied medicine in Valencia and Madrid, eventually directing the **Santa Isabel asylum in Leganés** by 1877. After training in Paris with Charcot, returned to Madrid (1885), open a private practice, became Spain's first professor of experimental psychology in 1902, influenced by German psychiatry. Is renowned for improving Golgi's silver chromate technique.



**Santiago Ramón y Cajal (1852–1934)**, the father of modern neuroscience. Shared the Nobel Prize in Physiology or Medicine with Cajal (1906) for his work on the structure of the nervous system. His discovery of the neuron as the fundamental unit of the nervous system revolutionized the field. Other great Spanish histologists were **Pío del Río Hortega (1882-1945)** and **Rafael Lorente de Nó (1902–1990)**



**Lluís Barraquer Roviralta (1855–1928)** founded the first neurology clinic in Spain in 1882. Known as the father of modern Spanish neurology. **Lluís Barraquer Ferré (1887–1959)** was the son and disciple of Roviralta, he solidified clinical practice, teaching, and research at the Hospital de la Santa Cruz y San Pablo in Barcelona. He was also the founder and the Spanish Society of Neurology 1st president .



**Gonzalo Rodríguez Lafora (1886–1971)** was a renowned neurologist and psychiatrist, a disciple of Ramón y Cajal. Known for discovering inclusion bodies in Lafora disease (1911), he published 200 papers in neurology and psychiatry. Lafora acknowledged Lewy's discovery of Lewy bodies, naming them before Trétiakoff.



**Antonio Vallejo-Nájera (1889–1960)** a prominent psychiatrist known for advocating eugenics and linking Marxism to intellectual disability. He conducted controversial experiments on Republican prisoners, contributing to the removal of around 30,000 children from leftist families during Franco's regime and shaping post-war psychiatric practices in Spain.



**José Germain Cebrián (1897–1986)** psychologist and physician made significant contributions to psychology and neurology. Directed the Institute of Professional Guidance (1931), founded the Spanish Society of Psychology (1952), and edited *Archivos de Neurobiología* (1929–1936). His expertise in neuropsychiatry led to a long collaboration with Lafora at the Neuropathic Institute. Photo adapted.



**Juan José López Ibor (1906-1991)** psychiatrist and educator known for his contributions to medical education and psychiatric research. Founded the *Sociedad Española de Psiquiatría*, served as the first chair of psychiatry at the Universidad de Salamanca. In 1966, presided over the IV World Congress of Psychiatry in Madrid. His practices during the dictatorship were controversial, particularly his use of ECT and lobotomies on homosexual patients.

**Some more Luminaires and Remarks:** Bartolomé Llopis (1905–1966) studied nutrition's role in psychiatric conditions, ensuring his patients in Madrid had privileged diets despite wartime shortages. Wenceslao López Albo (1889–1944) advocated for mental health reforms, focusing on outpatient care and rehabilitation. Emilio Mira y Lopez, head of the Republican army's psychiatric services, became a major figure in exile. François Tosquelles (1912–1999), after fleeing to France, helped develop institutional psychotherapy. Similarly, Angel Garma (1904–1993), a founder of psychoanalysis in Argentina, influenced psychiatric practice abroad.



**Figure 5.** Key Leading Figures Pioneering Psychiatry in Spain: Exemplars of the Field  
Drawing mainly from Wikipedia's public domain images and related basic biographical data



**Figure 6.** Key Institutions, Leading Figures, and Contexts in Portuguese Psychiatry

This collection highlights the key institutions, prominent figures, and historical contexts that have shaped Portuguese psychiatry. It includes public domain visuals and biographical information from sources such as Wikipedia, with references [38 - 43] offering further insights into their contributions and the global impact of Portuguese psychiatry in transatlantic exchanges.

This set emphasizes the role of these figures in shaping psychiatric thought, institutional development, and connections to Brazil and neurology. The evolution of psychiatry and neurology in Portugal has been profoundly influenced by the country's historical, social, and political contexts, particularly during the authoritarian Estado Novo regime (1933–1974), when psychiatry was often intertwined with political repression.