‘CARVING NATURE AT THE JOINTS’:
The Dream of a Perfect Classification
Of Mental Illness

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It is indisputable today that, despite honest efforts, we are still unable to categorize quite a vast number of cases within the frame of the known forms in the system.

(Emil Kraepelin, 1910)\(^1\)

This is a paper on the ancient and ongoing effort to define and classify mental illness. ‘Carving Nature at the Joints’, is a modern paraphrase of Plato’s image for the dialectical mode of making classifications, ‘To have the power, conversely, to cut up a composition, form by form according to its natural joints and not to try to hack through any part as a bad butcher might.’\(^2\) Sometime in the 1960’s, the distinguished psychologist Paul Meehl began to use this phrase to characterize the quest for the ideal classification of mental illnesses.\(^3\) The centuries before and the decades since have seen many schemas arise, many disappear, and many remain as geological agglomerates with still newer schemas. All observers agree that we have not achieved anything approaching an ideal, let alone perfect way of classifying. The current ongoing revision of the fourth Diagnostic and Statistical Manual (DSM IV) of the American Psychiatric Association, supposed to culminate in the fifth edition, has been beset by considerable controversy, as has each previous revision.\(^4\)

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\(^1\) Cited in Trede et al. 2005, a paper that is a major contribution to the history of psychiatric classification.

\(^2\) Phaedrus 265B–266C; see also Plato’s Sophist 298D. Translations are from the translation and edition of Steven Scully (2003).

\(^3\) Waller 2006; Meehl 1995.

\(^4\) For a philosophically based critique, see, among others, R. Cooper 2004. For a good overview of the current debate, see Frances 2010 and the entire issue in which this is published, especially the replies to Allen Frances by Hannah Decker (23–25); S. Nasser Ghaemi
It has been even difficult to get agreement on whether or not to use the term ‘mental illness’ or the term ‘mental disorder.’ There is fierce disagreement on the question of whether or not some or most of current major diagnostic entities actually exist, are found ‘in nature,’ or are jerry-rigged constructions.

I first take up literary texts that have been cited in discussions of psychiatric and psychological classification. I examine in detail Plato’s *Phaedrus* to exemplify some spoken and unspoken assumptions in any attempt at classifying ‘madness.’ I then list and detail seven factors that persistently constrain psychiatric classifications.

Next I list and detail a number of the perennial and persistent problems besetting the enterprise of classification, from antiquity onwards. I draw brief examples and illustrations from classical antiquity, Revolutionary France, late nineteenth-century and early twentieth-century German psychiatry, and contemporary disputes within American psychiatry and between psychiatry and the ‘allied’ (often at odds with each other) mental health professions.

While there are important differences between contemporary psychiatric methods of classification and those developed in Greek and Roman antiquity, there has been an amazing degree of continuity and similarity from late antiquity (e.g. beginning in the Byzantine era) until roughly the late eighteenth and early twentieth century. This continuity can be seen qualitatively in the way each schema developed relied heavily on one or two striking symptoms that the patient exhibited. There was also astonishing continuity in the vocabulary of mental illness, though there was over the centuries considerable fluctuation in exactly what was designated by the same word, e.g. mania. Each era had its own plethora of classificatory schemas, and theoretical framework in which the classification was embedded. Frameworks could be amalgamated in interesting ways, such as a theological framework combining with a medical humoral framework to yield the aphorism: *gaudet Diabolus in melancholico humore* (‘the Devil revels to find a person with a melancholic humoral predominance’). What began to

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(33–35) and Joseph Pierre (9–11). Frances takes a kind of ‘agnostic position’ on the question of the actual existence of our currently defined classes of mental disorder, while Ghaemi (in part using Hippocratic texts) argues for the veracity of some of our major diagnostic categories. The National Institute of Mental Health group is arguing for discarding the entire DSM enterprise and is developing a totally different schema, now called ‘Research Domain Criteria.’ See Insel et al. 2010. This NIMH schema has aroused considerable controversy, scientific and political.