

‘Barbed-wire disease’ during the First World War

By Matthew Stibbe ~National Library of Medicine



132nd Infantry in front-line

trench, Forges, October 3, 1918

[National Library of Medicine #101447994](#)

Even before the guns fell silent in Northern France and Belgium on November 11, 1918, the prevalence of mental disturbance among young men who experienced artillery bombardment and combat in the trenches of the western front was grabbing the attention of the international

scientific community. What became known as ‘shell shock’ had a major impact on the way medical experts viewed the consequences of modern warfare for the future of their profession—and for the future of humanity in general. Many turned to the theories of the Viennese founder of psychoanalysis, Sigmund Freud (1856–1939)—especially after the latter introduced the concept of the ‘death instinct’ or Thanatos as the antipode to the ‘sex instinct’ or Eros in his influential essays [*Beyond the Pleasure Principle*](#) (1920) and [*Civilization and its Discontents*](#) (1930). The Berlin sexologist Magnus Hirschfeld (1868–1935), a leading advocate of Freud’s theories, argued in his two-volume study [*The Sexual History of the World War*](#) (1929–30) that an unacknowledged sadomasochism lay at the heart of modern society’s acceptance of state-sponsored violence and war, and predicted worse things to come in the realm of international politics.

DIE STACHELDRAHT-KRANKHEIT

BEITRÄGE ZUR PSYCHOLOGIE
DES KRIEGSGEFANGENEN

VON DR. MED. A. L. VISCHER IN BASEL



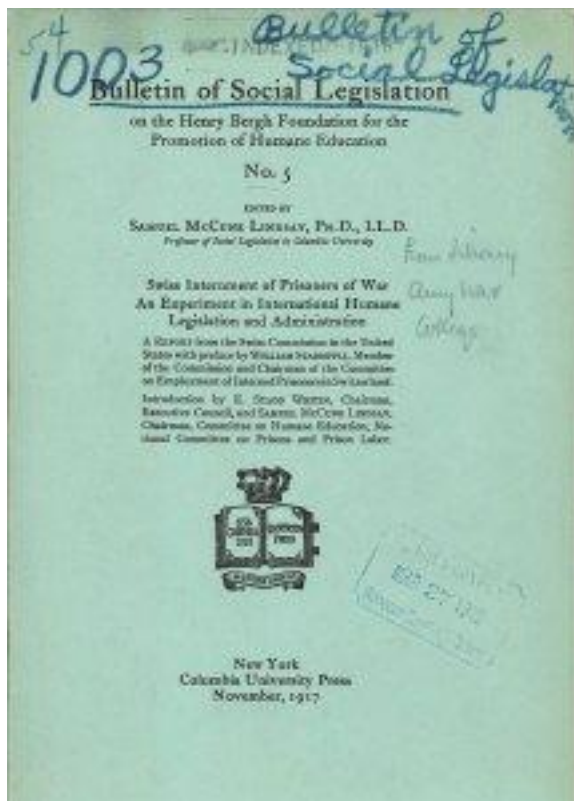
Heft 5

RASCHER & C^{IE}, VERLAG, ZÜRICH 1918



One observer of the impact of the [First World War](#) on the human condition who chose not to follow Freud was the Swiss physician [Adolf Lukas Vischer](#) (1884–1974). In 1918 Vischer published a remarkable account in German of the psychological harm done to young men through the modern phenomenon of wartime captivity in POW and internment camps. The name of the book was *Die Stacheldrahtkrankheit*, and an English translation—titled [Barbed-Wire Disease](#)—soon followed in 1919. It was a chance conversation I had at a conference in the UK in September 2018, that first drew my attention to the potential link between ‘barbed-wire disease’ and the history of medicine during the First World War more generally. Eight months later I found myself, as a fortunate recipient of a Michael E. DeBaakey Fellowship and with a fast approaching deadline to finish a book-length study of civilian internment in the years 1914–1920, on a two-week research trip from Sheffield, England, to Bethesda, Maryland.

Vischer, I already knew, was no stranger to the physical and emotional traumas of modern war. A native of Basel, in the German-speaking part of Switzerland, he had travelled to Serbia in November 1912, at the height of the first Balkan War, to carry out field surgery on behalf of the Red Cross. His experiences, written up in a report published in 1913, contained all the usual stereotypes of that period about the alleged ‘savagery’ of the Balkan peoples. The officers he encountered, he said, were no different to the rank-and-file soldiers. They all had the same brutal, primitive approach to warfare, because they came from the same peasant backgrounds and had the same antiquated tribal customs.



Swiss Internment of Prisoners of War: An Experiment in International Humane Legislation and Administration, 1917
[National Library of Medicine #101200179](#)

During the First World War, however, Vischer's interest shifted to the medical condition of men held in military and civilian captivity. Switzerland itself agreed from 1916 to intern officers and men from both sides who had experienced severe physical injuries. But Vischer's observations of them indicated that those who had been in enemy captivity for extended periods—two years or more—were also suffering from a particular kind of mental illness characterized by disinterest in life beyond the camp, restlessness and an inability to concentrate. His curiosity was heightened when he also witnessed similar symptoms among European and Indian POWs in Turkish captivity during an inspection tour with the Red Cross in Asia Minor in 1916–17, and again among German civilian internees on the Isle of Man and prisoners held in military and civilian camps on the British mainland when he acted as special attaché to the Swiss Legation in London in 1917–18. This brought Vischer to the conclusion that what was already being dubbed 'barbed-wire disease' in some of the camp newspapers was a universal human response to being held behind barbed wire for prolonged stretches of time. It was not confined to a pathological minority within camp communities, but was something common to all (long-term) inmates. Furthermore, it was not eased or worsened by peculiarities in the educational, class, ethnic or religious background of any particular group of prisoners; rather, its sole cause was the fact of living behind barbed wire itself, and the degree of severity depended primarily on the duration of captivity, not on experiences prior to capture.



German prisoners near

Malancourt, September 28, 1918

[National Library of Medicine #101447984](#)

This is what Vischer's own writings told me. But what I learned from two weeks of delving into the rich holdings of the History of Medicine Division of the National Library of Medicine (NLM) was how to historicize these writings, in other words, how and where to place them within the broader cultural production of knowledge about the relationship between mental health and total institutions like prisons, armies, and POW camps in the modern era. Vischer's attempt to universalize and medicalize the captive phenomenon had profound but not always positive effects for other kinds of knowledge. 'Barbed-wire disease' was not his own term, but

by appropriating and medicalizing it, he also took control of its cultural meaning. He did so in a way that was certainly not intended to dehumanize the prisoners, or reduce them to ‘abnormal’ types governed by ‘deviant’ neurological impulses. In fact, he was very careful to distinguish between war prisoners and criminals. He compared the former to late nineteenth- and early twentieth-century polar explorers, heroic men navigating an unexplored, monotonous and hostile terrain. The camp, like the Arctic or Antarctic wilderness, was simply unsuitable for habitation by any human, at least for periods of more than a few months.



Le Cafard, 1918

[National Library of Medicine #43731280R](#)

However, the universalization of ‘barbed-wire disease’ also ran the risk of obliterating more local and specific ways of understanding, and resisting, melancholia as experienced in total institutions. The French, for instance, already had their own term—*cafard*—which they saw as a form of spiritual home-sickness to be fought against and overcome, rather than as a medical condition that could only be treated, if at all, by release back into civilian life. Vischer’s book was never translated into French. In Britain, he clashed with humanitarian groups [like the Quakers](#), who insisted that voluntary work—for instance arts and crafts—could help to alleviate the symptoms of depression caused by wartime captivity. And in the U.S. prison reformers and even those involved in the administration of jails, penitentiaries and ‘houses of correction’ were—for obvious reasons—more interested in studies that did not shy away from drawing direct parallels between the more severe forms of psychosis suffered in POW or internment camps and what was, and still is, colloquially known as going ‘stir-crazy’.



U.S. Army Base Hospital Number

7, Tours, France: Chaplain taking addresses of German prisoners to inform families, ca. 1918
[National Library of Medicine #101396311](#)

For all of these reasons, ‘barbed-wire disease’ as a catch-all term did not come to enjoy the same level of acceptance in medical or neurological circles as ‘shell shock’. It did not help that Vischer himself made a permanent career switch towards gerontology from 1920 onwards. As far as I am aware, he did not seek to answer critics of his book in any follow-up studies of prison camps or the post-release experiences of POWs.

My findings at the NLM have nonetheless allowed me to write the most comprehensive cultural history of the ‘barbed-wire disease’ phenomenon to date, and for that I am very grateful. My book *Civilian Internment during the First World War: A European and Global History* was published by Palgrave MacMillan on December 4, 2019, and I have donated a copy to the NLM to help make it publicly-available as a result of publicly-supported research. Those interested in Vischer and ‘barbed-wire disease’ should look in particular at the relevant sections of chapter 5.

[Matthew Stibbe](#) is Professor of Modern European History at Sheffield Hallam University. He has published widely in the field of First World War studies and modern German history, and his books include *British Civilian Internees in Germany: The Ruhleben Camp, 1914-18* (2008) and *Women in the Third Reich* (2003). Professor Stibbe was an NLM Michael E. DeBakey Fellow in the History of Medicine in 2019.