- Folstein MF, Folstein SE, McHugh PR. 'Mini-mental state'. A practical method for grading the cognitive state of patients for the clinician. J Psychiatr Res 1975; 12: 189–98.
- 22 Sterne JAC, White IR, Carlin JB, Spratt M, Royston P, Kenward MG, et al. Multiple imputation for missing data in epidemiological and clinical research: potential and pitfalls. *BMJ* 2009; 338: b2393.
- **23** Livingston G, Sommerlad A, Orgeta V, Costafreda SG, Huntley J, Ames D, et al. Dementia prevention, intervention, and care. *Lancet* 2017; **390**: 2673–734.
- 24 Knopman DS, Roberts RO, Pankratz VS, Cha RH, Rocca WA, Mielke MM, et al. Incidence of dementia among participants and nonparticipants in a longitudinal study of cognitive aging. *Am J Epidemiol* 2014; **180**: 414–23.
- 25 Wong J, Motulsky A, Eguale T, Buckeridge DL, Abrahamowicz M, Tamblyn R. Treatment indications for antidepressants prescribed in primary care in Quebec, Canada, 2006–2015. JAMA 2016; 315: 2230.
- 26 Sautter JM, Thomas PA, Dupre ME, George LK. Socioeconomic status and the Black-White mortality crossover. Am J Public Health 2012; 102: 1566–71.
- 27 Aizer AA, Chen M-H, McCarthy EP, Mendu ML, Koo S, Wilhite TJ, et al. Marital status and survival in patients with cancer. J Clin Oncol 2013; 31: 3869–76.
- 28 Murphy M, Grundy E, Kalogirou S. The increase in marital status differences in mortality up to the oldest age in seven European countries, 1990–99. *Popul Stud (NY)* 2007; 61: 287–98.



psychiatry in literature

Arthur Schopenhauer and psychiatry after 200 years of publication of *The World as Will and Representation*

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This year we celebrate the 200th anniversary of publication of Arthur Schopenhauer's text: *The World as Will and Representation*, which may be as pertinent for contemporary psychiatrists as it has been for artists, scientists and writers.

Schopenhauer influenced by Plato, Kant and Hinduism, conceived the will as the whole universe and a blind imperative to exist. He conceived several levels of the will; (a) an unknowable primeval level; (b) the basic forces of nature (e.g. electricity, magnetism); (c) the Platonic ideas; (d) all the inorganic and organic phenomena; and (e) deliberate human actions as the pinnacle.

By 'representation' Schopenhauer meant the *knowledge* we humans, have of the will. As all living beings, we are naturally self-centred and selfish. Besides, the Veil of Maya (a Hindu myth) standing before us, does not allow the realisation of the unity of all phenomena. Consequently, Schopenhauer had a pessimistic view of collective being and did not develop a social project. But existential (individual) salvation is possible, as a sort of illumination or 'state of grace', by dissociating knowledge from desire thorough the disinterested contemplation of art and nature, and by realising the ubiquity of suffering and of endlessly desiring. These experiences may lead to a profound inner peace and to the appearance of compassion and asceticism, these last happening as an exclusively human capacity that he stated as the 'denial of the will'.

Schopenhauer anticipated in metaphysical terms the following issues of interest for current psychiatrists. (a) the notion of the blind and amoral will, as a precursor of some of the conceptualised features of the psychodynamic unconscious. Accordingly, he pioneered evolutionary psychology's contemporary analysis about the relationship between the genders, particularly the prominent impact of sexuality and reproduction on cognition. (b) The pervasive human tendency for self-ishness and insatiability and the value of compassion and asceticism. Redirecting these traits toward fair cooperation and healthy austerity may be considered as an ultimate goal of any comprehensive and educational psychotherapy. (c) Schopenhauer considered that we have a direct representation of the otherwise inapprehensible will, when one witnesses ones' body wishing something. I have argued elsewhere that this notion is a philosophical anticipation of the key concept of the *embodied mind* as discussed in contemporary cognitive sciences.

Schopenhauer's thought is formally absent in current psychiatric education, and it is even vilified. There are many reasons for such neglect: the philosopher's pessimism, his misogyny and his disinterest for a social project. I guess that the mistreatment of Schopenhauer's work mainly derives from approaching his texts from secondary sources or extracts out of context. The pertinence of the philosopher's work to contemporary culture in general and psychiatric education in particular can only be pondered when reading the original texts and placing them in their particular historical frame.

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