

## JOURNAL INTERVIEW 17

# Conversation with Dr Pierre Fouquet

*Dr Pierre Fouquet has been a member of the Haut Comité d'Étude et d'Information sur l'Alcoolisme for over 30 years and is founder and President of La Société Française d'Alcoologie. He has the considerable distinction as a civilian to be a Chevalier de la Légion d'Honneur.*

**BJA:** *How did your interest in psychiatry and then alcohol-problems develop?*

**PF:** As far as I remember I always wanted to do psychiatry. One of my earlier memories was while doing the baccalaureat in philosophy (as you know there is also the baccalaureat in science and in maths). At that time, 16 years old, I would say to myself that the cleverest people are those who can understand both the body and the mind. To possess both a knowledge of medicine and of the mind would be the true study of humanity. I remember writing to a now very old Journal, the *Annales Medico-Psychologiques* to ask for a sample. I can't remember much more about that as I think my enthusiasm for what I read waned. I did my medical training with some difficulty, working as a student supervisor in a college at the same time. At the end, in 1936, I re-found my initial direction and was an intern in the Psychiatric Hospitals of the Seine. When I finished I had reached the stage of Chef du Clinique. But I did not want to work in an asylum somewhere in the provinces. So I took a post in 1942 in a brand new service, Le Service de Prophylaxie Mentale, which meant for the first time we were going to do psychiatry outside the hospital. With two colleagues I set up a psychiatric service in the TB centres, which we called Consultations D'Hygiène Mentale. The TB physicians took a dim view of us. They put us in a corner behind the X-Ray equipment or somewhere—these strange people dealing with mad folk. But we were pioneers, we wanted to bring psychiatry out of the hospitals, pull down the asylums and so on. In 1946 I was sent for 6 months to the U.S.A. to see what American psychiatry was like and when I came back I felt it was too grim to just have an administrative job, organizing things and no contact with patients—it was a job with the Département de la Seine. I

hesitated a lot. The psychiatric hospitals did not interest me. But through a friend I was put in touch with a little private clinic with 13 beds for neurotics. Very rapidly I got interested in alcoholics. My previous training had been very bad. When I was a registrar attached to the Police Department's Service for the Insane, each Friday my chief presented a patient—some crazy chap brought in from the street for us to decide if he should be hospitalized. Naturally occasionally there were alcoholics. My chief would say: "okay, you, how many do you drink?"—"er, er"—"three litres?"—"er, er"—"Five litres?"—"Non, Monsieur le Commissaire".—"I am NOT the Commissaire".—"Right, Monsieur le Commissaire".—It was frightful.

At that time I knew a Doctor Le Coq who had found before the war that TB abscesses resistant to sulphonamides sometimes resolved in response to intravenous ethanol, and that patients who were alcoholics were helped out of their addiction at the same time. I had expressed interest in his work and he sent me some of my first referrals. I was surprised to find I was able to make good contact with these people they called alcoholics, with their reputation for being difficult, aggressive, untrustworthy, etc. So I began to look after alcoholics. At the time very few doctors did so. Most rejected or were afraid of the alcoholic. I felt alright treating them. I got in contact with the abstainers groups such as the Croix d'Or, Vie Libre who helped in aftercare and rehabilitation.

In 1951 I had the chance to go to the World Health Organization Conference in Copenhagen. WHO asked the Ministry if there was anyone who could attend. It was a revelation to me that there were people there who had a different perspective on alcoholism than the one we had been taught. Hearing Jellinek helped me realize there was a

whole world of experiences that alcoholics had in common. My friend and teacher—Professor Henri Ey—my boss—had an influence on me in stimulating me to try to conceptualize, put some order into the confusion. But Henri Ey had an aversion to alcoholics—he had told me that “alcoholics don’t exist—in my service there are none”. Perhaps he meant that behind the symptom of alcohol there was always a neurosis, a psychosis or a perversion with alcohol just as an epiphenomenon. But there he was wrong, I think. We used to argue a lot!

I began to have a few successes and soon I had very many referrals. At that time in Paris there was no private practice in psychiatry—just the asylums. I stayed on various Commissions and in 1954 joined the Haut Committée d’Étude et d’Information sur l’Alcoolisme, at the time of its creation by Pierre Mendes France.

BJA: *What was the story of Mendes France and the glass of milk?*

PF: Mendes France was President du Conseil and a most interesting person. He often stood much above the usual level of politics, a remarkable man. He was profoundly convinced that it was necessary for the Government to do something about what he called—even although the expression is now obsolete—the fight against alcoholism. He had the idea of inviting certain top medical people, including Monsieur Debray who was a very eminent Professor of Paediatrics to form a Haut Committée with a base in the offices of the Prime Minister, well placed to advise Government. Mendes France was quite a figure. He had made an impact in French relations with the Tunisians and so on—a controversial man—he only stayed in power some 90 days. The day he wanted the creation of the Haut Committee voted in, he asked an attendant in the Parliament to put down a glass of milk in front of him at the Tribune as he began his speech about alcoholism. It was a sort of provocation!

BJA: *How was it in those days at the Haut Committée with representatives of the alcohol production industry and doctors, working side by side?*

PF: There were also representatives from the various ministries—health, education, justice, agriculture, transport, etc.—but very few doctors because there were none at the time with an interest in the subject. Debray himself, the Chairman, said that he knew nothing about alcoholism, but he had a

great reputation having reformed the whole system of medical education in France and he regarded alcoholism as a scourge. For him the job of the Committee should be to inform the public, put research in motion and to suggest to Government legislation aimed at controlling the problem. It was not a particularly medical matter except for the research. Alcoholism had always been considered by doctors to be a social problem, not their problem. The pressure to sell alcoholic drinks seemed so overwhelming doctors felt that there was nothing to be done. Alcoholics were seen as difficult people, untrustworthy, twisted, so although it might be a medico-social problem, it was up to the Government to do something about it. And as for psychiatrists, they had no interest at all.

BJA: *Did Henri Ey’s view of psychiatry as the ‘pathologie de la liberté’ have an application to your views of alcoholism at the time?*

PF: Henri was primarily a teacher. Before the war there was no formal teaching in psychiatry outside Paris where there was only his Chair. Psychiatry was not seen as important. Ey created his system of organo-dynamism based on the work of the neurologist Hughlings Jackson. He proposed a hierarchical ordering of psychic life—a balancing of positive and negative aspects.

BJA: *Did that influence your conceptions of alcoholism?*

PF: I was a special pupil of Ey. Perhaps I too have the fault of wanting to be too systematic. I like clinical work but I also like theory. I tried to give a definition of alcoholism<sup>1</sup> and as you know, later a definition of alcoholology.<sup>2</sup>

BJA: *Did Jellinek visit you in France?*

PF: I met him prior to the Copenhagen conference in 1951 and he asked me if I would like to give a paper there. It was illuminating for me. Jellinek was a remarkable man, very intelligent. The conference was to be held at Copenhagen in homage to Jacobsen who had developed Antabuse in 1946. I was asked to lead a therapy section with Jules Massermann (known for his work on experimental models of neurosis in cats). I presented my classification of alcoholism and Jellinek seemed impressed.

BJA: *I believe Ledermann was not at that meeting?*

PF: No, Sulley Ledermann's involvement was different. He was one of those absolutely elite 'polytechnique' graduates, highly gifted young students. He could have gone into anything he wanted. Polytechnicians have an aura but can be out of touch with life. By the way he was a talented musician. He rather drifted into demography, and began examining mortality statistics comparing France and other European countries. He saw there was an excess male mortality in France which could only be explained it seemed by the enormous French alcohol consumption. I met him at a conference in Istanbul and we became close friends. His work was mathematical demography. It lacked definitions. He worked quite alone. He was astonished to learn about the human aspects of the problem as a clinician sees them. Sadly he died young in 1965 or 1966 of painful cancer. It was a privilege to have known him.

BJA: *You worked for the World Health Organization?*

PF: Archer and Eva Tongue of ICAA played an important role in Europe. At the conferences they organized, we realized that national differences existed. WHO included alcohol and drugs in their programmes—a frequently debated matter at the committees I went to where alcoholism was seen as a drug dependence like other drug dependencies.

BJA: *What was the most important result for you of the WHO interest in alcohol?*

PF: At the time in France, as I have said, alcoholism was not taken seriously. There were a few young, crazy psychiatrists who took an interest. WHO funded research, published monographs, and helped a body of scientific work to emerge. This gave an air of respectability to the field. In particular this was thanks to Madame Joy Moser.

BJA: *Did you play a role in resuscitating your Comité Nationale de Défense contre l'Alcoolisme?*

PF: Not really. The Comité Nationale was founded over 100 years ago, partly as a result of the post mortem on the conduct of troops during the siege of Paris in 1870. The ravaging of the vineyards by a fungus in the 1850's and by phylloxera in the 1870's had contributed to a massive increase in the consumption of spirits. The Comité Nationale

was founded by among others, Louis Pasteur himself and Claude Bernard (the physiologist). Its great success was the prohibition of absinthe. By 1945 it was more or less defunct although since 1911 passers-by on the Boulevard St Germain had been offered the choice at its shop window of a pink sugary liver or a grey-green liver. Dr Perrin from Nantes in 1950 published a book *Alcoholism* which included a survey of the opinions of 1657 doctors. This helped to stimulate action and the re-awakening of the Comité Nationale.

BJA: *Do you have a view on what might have been the important influences on consumption in France since the war and in particular its fall in recent years?*

PF: Well, after the war, the first railways to run were loaded with plonk and by 1950 we could see the problem was beginning once again. But there was a gradual awakening of interest in the subject and a willingness to take action. The discovery of disulfiram had given new hope to doctors and patients; there were the abstainers' and former drinkers' groups, the Croix d'Or, Croix Bleu, Vie Libre and later Alcoholics Anonymous; there was the law of 1954 allowing compulsory treatment of 'dangerous alcoholics'; there was the work of the Haut Comité; there was greater discussion among doctors—for example—the chief text for psychiatrists, the *Encyclopédie Médico-Psychologique* for the first time had a section (by me) on 'The Alcoholic Neuroses'; in 1960 there was the law on 'Sector Psychiatry' permitting expansion of psychiatry into the community; in 1970 under the influence of Dr Le Go, Chief Medical Advisor to the Railways (SNCF), a Government circular encouraged the setting up of centres for the prevention of alcoholism (the Centres d'Hygiène Alimentaire) and GPs and gastroenterologists began working in these centres (some psychiatrists woke up for the first time at that point and said, "Why GPs and gastroenterologists?"). Another figure was Dr Haas, a gastroenterologist who transformed his Paris GI clinic into a Service d'Alcoolologie.

BJA: *But the expansion of treatment facilities surely could not account for the fall since the 1970's in national consumption?*

PF: It's a mystery why since 1972 consumption, especially consumption of wine, has fallen and continues to fall. People say that the efforts of the Haut Comité and the abstainers groups have

contributed. It is hard to demonstrate. Four or five years ago there was the start of the same phenomenon, fall in wine consumption, in Italy, God knows there has been little in the way of the fight against alcoholism there. The tastes of the French people have changed. Now for example, among young recruits to the Army, half are water-drinkers. Of the others, some drink beer and some wine. There was of course the rumour that the Army put bromide into the soldiers' plonk! There has been the shift to 'Saturday night drinking'; and also among the young the view that alcohol is a drug like any other and to take alcohol is foolish or unfashionable. We do not know the exact causes of these changes.

BJA: *How important were the road safety campaigns?*

PF: The Haut Committée was involved in education in schools, in the media, poster campaigns, etc. Perhaps that had an impact. At one time we had perhaps the worst record for road accidents in Europe after Austria. It was shown that 40% of accidents involved excessive drinking either of the driver or of the victim. We had precise data on that. Specific campaigns were conducted in factories, in the armed forces, on the roads. That all played a role probably.

BJA: *Can we talk about the Société Française d'Alcoologie of which you were the founder and still are President.*

PF: It has over 400 regular members: 60% are doctors and 40% are from other disciplines, including psychologists, administrators, lawyers, judges and others. For the tenth anniversary of the Society there will be an International Conference in December 1988 in Paris. In addition to the text book of Alcoologie<sup>3</sup> and our historical compilation, *Le*

*Roman de l'Alcool*<sup>4</sup> [the story of alcohol] we are publishing soon a *Dictionnaire de L'Alcoologie*. As you see my work is now the work of an old man—books, committees, being President of this and President of that! Clinical work is tiring now, it takes a lot out of you. All individual therapy of alcoholics involves an intense empathy, you give out a lot. It is a very different attitude than that of the analyst, for example. I was analyzed, it helped me I think in modifying my attitudes to alcoholics. With alcoholics the therapist has to talk a lot, be warm, say what they themselves cannot say—that is one of the driving forces of therapy. And also I have been giving seminars to medical students and psychiatrists. It's different now than in 1958 when some colleagues and I for two years running planned a teaching day and absolutely nobody turned up! But in 1970, I did the same thing under Professor Ey's sponsorship at the Psychiatric Hospital of St Anne and that was a huge success and now we even have a post-graduate diploma in Alcoologie!

#### Editor's Notes and References

1. Alcoolites, Alcooloses, Somalcoooloses.
2. *Alcoholology*: A discipline devoted to everything in the world which is connected with ethyl alcohol: its production, storage, distribution, consumption both normal and pathological, with the implications of this phenomenon, its causes and consequences, whether at the collective level—national and international, social, economic and legal, or at the level of the individual—spiritual, psychological and physical. This independent discipline borrows the knowledge, with which it works, from the principal human sciences, economic, legal and medical, finding its own laws by the impetus of its evolution.
3. MALKA, R., FOUQUET, P. & VACHONFRANCE, G. (1986) *Alcoologie* 2nd edn (Paris, Masson).
4. FOUQUET, P. & DE BORDE, M. (1986) *Le Roman de l'Alcool* (Paris, Seghers).

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