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The Invisible Cure: Warm Compresses and Psychiatric Abuse in the Era of Non-Restraint (1880–1900s)

March 1901 unfolded as an unexpected storm within the Russian psychiatric community. An anonymous physician, fearful of being recognized by his colleagues, submitted a shocking account to the newspaper *Volzhskii vestnik*. He recounted a story of the brutal use of warm wet compresses on “restless patients” at one of the most advanced institutions in the empire – the Kazan District Hospital. The controversy surrounding what soon became known as the “Kazan Bethlem” marked the first moment in Russian medical history in which questions of power, violence, and psychiatric authority collided. Around 1900, warm moist wrappings became a central therapeutic and disciplinary intervention in many psychiatric institutions across Western and Eastern Europe. They were used to calm agitated patients and to support minor surgical procedures. In the 1900s, prominent German psychiatrists such as Albrecht Paetz (1851–1922), Clemens Neisser (1861–1940), and others engaged in intense debates about the therapeutic value of the new procedure. In Russia, however, the practice became the focus of an ethical scandal that erupted at the Kazan hospital. While the material and discursive history of “bed rest” has been examined in detail by scholars of Western European psychiatry (Ankele 2009; Ankele and Majerus 2020; Braslow 2023), the closely related practice of warm wraps has remained largely absent from historical analysis. This treatment method became a cornerstone of European psychiatric practice for several decades. It not only divided international psychiatric communities into advocates and critics, but also became a focal point in debates about the future of clinical psychiatry and its institutional transformation in the emancipating era of non-restraint. I aim to examine the ethical foundations and use of warm moist wraps in German and Russian professional settings. In doing so, I address the following question: how did these wrappings spread and gain legitimacy across such different psychiatric landscapes? What can they reveal about the entangled relationship between psychiatrists’ therapeutic ideals and hidden forms of everyday violence?