

Obituary

Erich Lindemann 1900–1974

Professor Erich Lindemann, formerly of Harvard University and lately working at Stanford University in Palo Alto, California, died there on November 16th, 1974. With his passing our field lost one of its pioneers, possibly the most important and imaginative founder of the emerging discipline of Social and Community Psychiatry.

Erich Lindemann was born in Witten, Germany in 1900 and studied psychology, medicine and neurology at Marburg, Giessen and Heidelberg before emigrating to the United States in 1927.

He spent his first eight years in this country at the University of Iowa, where he worked as a clinician and did research in hypnosis and abreactive techniques, and was one of the first to study the use of sodium amytal interviews in psychotherapy.

In 1935 Dr. Lindemann accepted an appointment at the Massachusetts General Hospital and Harvard University School of Medicine, where he spent the major part of his fruitful career until his retirement in 1965. There he undertook psychoanalytic training and contributed many studies on psychophysiological disorders, including collaborative work with Professor Walter J. Cannon on homeostasis. During this period he also cultivated cross-disciplinary interests and contacts with other behavioral scientists. Ever alert to research and clinical opportunities he studied the effects on patients and their families of a fire disaster in 1943, in a classic paper entitled, "Symptomatology and Management of Acute Grief".¹ His

also was the first detailed documentation of the familial and social impact on a patient's course of ulcerative colitis, another classic study published in 1950.²

In 1948 Dr. Lindemann established the Wellesley project, a preventive community-wide mental health program utilizing professional and non-professional mental health workers which became a basic model for community mental health centers. In 1954 he became chairman of Psychiatry at the Massachusetts General Hospital and initiated studies on the psychosocial consequences of urban renewal, especially of the breaking up of neighborhood social networks and the enforced relocation of people. These findings have become guideposts no urban planner can ignore.

But all these contributions are dwarfed somehow by Lindemann the clinician and clinician-teacher. Those of us who were privileged to have been his students will remember him first of all as a superb teacher, a charming and skillful lecturer and group leader, and as an outstanding interviewer even before large audiences.

His gifts as a teacher and clinical supervisor sustained him during his last years of painful and debilitating illness and benefitted many young colleagues. In this he was not only an educator, but a model of how to live with courage and dignity in the face of irreversible adversity. He was supported in this as he was through much of his life by Mrs. Lindemann and their family, to whom we extend our condolences and with whom we share the memory of a great man.

S. Fleck

1 Symptomatology and Management of Acute Grief. *Am. J. Psych.* 101: 141-148, 1944

2 Modification in the Course of Ulcerative Colitis in Relationship to Changes in Life Situations and Reactive Patterns. *Proc. AARNMD.* 29: 706-723, 1950.