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Review Article

V.M. Bekhterev - The Founder of Sexological Research in Russia (1857 - 1927)

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Abstract

For the first time, analyses the many-sided contributions of V. M. Bekhterev in establishing domestic sexology. Giving human sexuality the meaning-making value, V. M. Bekhterev studied its normal and pathological manifestations, considering them comprehensively, taking into account reflexology and socio-psychological aspects. The progressiveness of his views expressed in the formulation of the question about sexual health. There is traced a succession of views of V. M. Bekhterev in modern sexology.

Keywords: V. M. Bekhterev; Sexology; The Formation of Libido; Regulation of Sexuality; Sex Education; Sexuality and Public Health

In the early years of the twentieth century V.M. Bekhterev expressed the idea of a comprehensive, complex, interdisciplinary study of man. That is why the sexual sphere, as the most important in the phylogenetic process for the preservation of the species and in ontogenesis in terms of the formation of meaning and the organization of human existence, was included by V.M. Bekhterev into this program.

The beginning of the activity of V.M. Ankylosing spondylitis in the field of sexology falls at a time when it became clear that the condition for its development is to overcome the religious and mystical attitude to sexuality, the most severe resistance of the church and hypocrisy in public life.

If in ancient times the world seemed harmonious, combining bodily and spiritual beauty into one whole, then the world of the medieval Christian was deeply bifurcated and disharmonious: this is the world of God (spirit) and the world of the devil (flesh). Isn't the traumatic trace of this duality the cause of many psychological conflicts in modern man, especially in the sexual sphere? Back in the 14th century, the famous philosopher M. Montaigne wrote: "What is the guilt of the sexual act before people - so natural, so urgent and so justified, that everyone as one does not dare to talk about it without shame on their face and do not allow themselves to touch on this topic in serious and decent conversation? We are not afraid to say: kill, rob, betray, but this forbidden word gets stuck in our teeth".

V.M. Bekhterev emphasizes that "The questions of sexual life are not only not resolved, but even almost not investigated at all" (1891).

He begins to analyze sex life in a natural-historical vein, on the basis of reliably established facts, while he was critical of the work performed, as he said, by a deductive method and lacking sufficient scientific and experimental confirmation. This idea remains relevant today, in the era of evidence-based medicine.

It would not be an exaggeration to say that V.M. Bekhterev is the founder of the Russian school of sexology. From 1891 to 1928, the year of his death, we find numerous publications and minutes of speeches by Vladimir Mikhailovich, devoted to various aspects of, as they said

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at the time, the sexual issue. After the founding of the neuropsychiatric institute V.M. Bekhterev involved his like-minded colleagues, such as Professor L.M. Pussep, doctors M.S. Dobrotvorsky, N.L. Mislavsky, L.G. Orshansky, K.V. Shalabutov. These studies were pioneering for their time and covered a wide range of problems that modern sexology also develops.

Among them, the fundamental question of the role of sexes in the inheritance of traits and sexual dimorphism, which today are part of the structure of the most interesting modern evolutionary theory of sex, which has been developed since 1965 by V.A. Geodakyan.

The nature and patterns of sexuality were also investigated, its deviations in the form of "sexual perversion", physiological mechanisms of sexual arousal and their violation, treatment of sexual disorders.

The great importance of V.M. Bekhterev attached to ethical issues of sexual relations and the problem of improving sexual life.

Considering the work of V.M. Bekhterey, we see that he adhered to the point of view of the different contributions of males and females to the inheritance of traits and supported the conclusions of L.G. Orshansky that, according to the laws of heredity, "the father promotes variability," and "the mother seeks to preserve the middle type," which is the foundation of modern theory. Or another question about the fact that the pathological heredity of the father is progressive, while that of the mother is regressive [1-3]. This conclusion is associated in modern theory with the fact that pathological hereditary traits in boys are more often futuristic, while in girls they are atavistic. On the whole, V.M. Bekhterev saw the mechanism of evolution in the mutual relation of the two sexes. The modern evolutionary theory of sex considers the appearance of sexes and sexual reproduction during the development of life on Earth as the most economical way of exchanging information with the external environment, which ensures the survival and evolution of the human species.

Paying great attention to neurophysiological studies of sexual function, V.M. Bekhterev focused on the socio-psychological determinants of sexuality. At a time when the archaic concept of the innateness of sexual attraction dominated, and it was assumed that the body had a programmed sexual mechanism that could be triggered by sufficient sexual stimulation, V.M. Bekhterev was one of the first to express a remarkable idea about the importance of life experience for the formation of sexual desire [4-8]. Later, this idea was confirmed in the well-known experiments of G.F. Harlow (1971, 1969) on rhesus monkeys, and other researchers by observing "wild" children, i.e. children like Mowgli, as well as a detailed study of the psychosexual development of a person. Today we know that human sexuality, having biological prerequisites, can only be formed under conditions of adequate socialization, in the process of which certain critical periods of psychosexual development are of particular importance.

You can see that V.M. Bekhterev studied and was engaged in hypnotic treatment of such phenomena as masturbation, which at that time was considered a "bad habit", as well as "fear of impotence" [9-11], which we now call "neurosis of expectation of sexual failure." Only after World War II in the USA, thanks to the research of Alfred Kinsey, and in Russia - the work of Professor G.S. Vasilchenko, views on masturbation as one of the natural forms of sexual activity were established. At the same time, this phenomenon reveals clinical heterogeneity and is closely related to psychosexual development, which was shown in the works of the staff of our department (the department of sexology at St. Petersburg MAPO).

V.M. Bekhterev devoted himself to the problem of sexual "perversions" and their treatment. They were considered as a manifestation of pathological combination reflexes [12-19]. The research of our contemporaries has greatly expanded these concepts. In the development of paraphilic behavior, an essential role is played by the state of the psyche and the consequences of dysontogenesis of the psychosexual sphere, the interaction of which gives rise to a qualitatively new phenomenon in the form of one or another paraphilia. A modern complex treatment of paraphilias is proposed, which includes psychotherapeutic methods and methods of biological therapy, including psychotropic and hormonal (antiandrogens) drugs.

V.M. Bekhterev, as a talented organizer, in modern terms, took care of the therapeutic environment in psychiatric hospitals. He advocated female care for mentally ill men, believing that the presence of women in male wards was unlikely to have a significant effect on the

sexual arousal of patients, and viewed the perception of the dangers or dangers of female care as a prejudice. It was noticed that men are more restrained in the presence of women, including in a state of mental arousal. He spoke positively about the possibility of meeting male and female patients during entertainment and dance evenings in a psychiatric institution [20]. The development of the therapeutic environment in this direction has been fully embodied in the form of organization by Professor M.M. Kabanov at the Institute. V.M. Bekhterev in 1966, a rehabilitation psychiatric department of mixed gender. Then, for the first time in our country, male and female patients with psychotic conditions began to be accommodated in the same department. Together with our colleagues, we have developed a methodological basis for the functioning of such a department.

In addition, V.M. Bekhterev discussed the medical and legal issues of divorce due to the mental illness of one of the spouses [21,22].

Through all the works of V.M. Bekhterev and his colleagues devoted to the sexual issue, the idea of "sexual health improvement of people" is a common thread.

The fact that V.M. Bekhterev assesses sex life as a meaning-forming factor in human existence, as can be seen from the following statement: "Without sexual relations, life would lose that halo that makes it attractive and contributes to its improvement in the most direct way" (1910).

Even then V.M. Bekhterev is in solidarity with A. Forel in the opinion about the principle that regulates sexual relations - "sexual relations should not harm any of the partners." This principle lies at the basis of modern ideas about the norm in sexual relations: voluntariness and no harm to health.

Reflecting the ethical ideals of enlightened Russia at that time, Vladimir Mikhailovich strictly advocated family values, gender equality and the realization of sexual relations within the family. At the same time, he opposed the "mortification of the flesh", and emphasized - "use life".

From the point of view of health and public morality, he considered it necessary to regulate sex life. Therefore, he promoted sexual abstinence before marriage in order to prevent the spread of sexually transmitted diseases and to exclude unwanted pregnancies. In this sense, he ardently opposed prostitution and its regulation by the state. In prostitution, he saw the source of the spread of sexually transmitted diseases and humiliation of human dignity. The fight against prostitution should, in his opinion, consist not only in the destruction of brothel houses and all actions that support street debauchery, incl. pornography, but the elimination of the social and difficult economic conditions that encourage women to turn to prostitution [23-25]. Let us ask ourselves the question of how far our society has progressed in overcoming this problem.

Perhaps someone will object and say, this is life. Then we can quote from the speech of Emil Steiger when he was awarded a literary prize in 1966: "If people claim that the cesspool is an image of the true world, that pimps, prostitutes and drunkards are representatives of the true, unadorned world, then I ask: what circles do they revolve in?".

One cannot but agree with V.M. Bekhterev in the need to regulate sexual activity, and hence sexual behavior in order to prevent unwanted consequences [24]. In full growth this question has arisen since the spread of AIDS (a) in the world and in our country of the AIDS epidemic. But who in modern Russia deals with these problems, for example, AIDS prevention? These are not specialists who analyze human behavior - psychologists, sexologists, specialists from minor psychiatry. Infectious disease specialists are engaged in this, as if human behavior falls under their jurisdiction. Paradoxical! I would like to call - "Back - to V.M. Bekhterev! " And how can we protect our teenagers from early pregnancies, from sexual violence, from sexually transmitted diseases?! There are no proper government programs in the country.

Bekhterev's humanism manifested itself in the fact that he was against "an arrogant attitude towards a girl with an illegitimate child" and towards the "poor urning".

He advocated sex education, for the timely familiarization of children by parents and educators with the sexual issue and childbirth [23-26]. How modern it sounds! He writes a lot on this topic, not only in scientific, but also in popular publications. In Russia, this problem still remains unsolved and painful, which speaks of the archaic nature of public consciousness, immersed in mythological obscurantism.

Many of V.M. Bekhterev and his colleagues at that distant time, questions are still looking for their answer today.

Since the 1930s, there has been a lull in sexological research.

And only at the end of the 50s, during the period of the "thaw", research in this area began to be resumed. With the development of the rehabilitation concept and with its implementation within the walls of the Institute. V.M. Ankylosing spondylitis, the study of the sexual sphere of patients has become an important part of the scientific and rehabilitation process. The list of references contains some publications of the institute's employees of the past years, devoted to the sexological topic [27-43]. It is interesting, on the one hand, by the attention to human sexuality in connection with the solution of neuropsychiatric problems, and on the other hand, it shows the dynamics and versatility of approaches to them. This publication is mainly devoted to historical aspects, therefore the bibliographic list is limited to the eighties of the last century.

In subsequent years, within the framework of SPbNIPNI them. V.M. Ankylosing spondylitis, sexological research was traditionally carried out in the Department of Neuroses and Psychotherapy (headed by Prof. B.D.Karvasarsky), the Department of Adolescent Psychiatry (headed by Prof. A.E. Lichko, Prof. Y.V. Popov), the Department of Rehabilitation Therapy of the mentally ill (headed by Prof. M.M. Kabanov). Such problems as the role of the sexual sphere in neuroses, various aspects of homosexual attraction were solved, with the aim of rehabilitation, the psychosexual sphere of patients suffering from schizophrenic spectrum diseases and affective disorders was studied. The concept of the structural organization of sex-role behavior has been proposed and ideas about its accentuations have been developed, which made it possible to analyze in a new way gender-role behavior, psychological gender-role conflict, and more differentiated approach to its correction. All this enriched the context of psychological and socio-psychological characteristics included in the psychotherapeutic process [44].

In subsequent years, the center of sexological research was the Department of Sexology (headed by prof. Alekseev BE) of the St. Petersburg Medical Academy of Postgraduate Education (MAPO). The task of the department was to train certified sexologists, as well as sexological education of doctors, psychotherapists, psychologists. In Russia, since 1988, a separate specialty, doctor-sexologist, has been introduced. Currently, sexology is taught within the Department of Psychotherapy, Medical Psychology and Sexology of the Northwestern State Medical University named after I.I. Mechnikov, into which MAPO was transformed in 2014.

Modern sexology is not only an independent discipline, but a large interdisciplinary field of knowledge about a person. The development of the methodological apparatus of sexology has reached a high level - this applies to sexological examination, modern concepts and methods for assessing gender identity and sex-role behavior, the direction of sexual desire. Today, this apparatus serves not only sexology, but also deepening research in related fields: psychiatry, psychosomatic medicine, etc.

The question of sexuality as a factor in public health, raised by V.M. Bekhterev, has grown immeasurably over the past decades. Teams of scientists from developed countries are working on the development of the concept of sexual health.

Since the early 1980s, the AIDS (a) epidemic has dramatically changed the place and status of sexuality in the field of human health.

Never before in history has there been so much research into sexual behavior.

The idea of changing sexual behavior as the main route of protection against HIV infection sharply raised the question of public intervention in individual sexual behavior, which was considered to be a private matter.

62

For example, in 2000, WHO, together with the Pan American Health Organization and the World Sexological Association, the document "Promoting Sexual Health: Recommendations for Action" proposes a general model based on the prevention and treatment of a number of clinical syndromes and sexual problems.

In contrast to the WHO document, other documents adopted, for example, in the USA (2001) and in England (2001), whose title also sounds like sexual health, are much more focused on the negative consequences of sexual activity and on understanding sexuality as a source of problems that should be alleviated by social and health interventions. Both documents emphasize public health promotion measures (advocacy, information, behavior change). They present two models based on different principles of public and sexual health.

The United States is seeking to reduce risky sexual behavior, especially adolescent sexual activity, through a national education strategy. They call for abstinence.

In England, a strategy is being developed to reduce risks without affecting the factors that influence behavior itself. It is believed that the choice of behavior is a matter of the individual. Society only encourages informed choices to behave in a certain way in order to limit negative consequences.

This short excursion allows you to see different approaches to the idea of sexual health, the understanding of which is expanding and now includes not only the absence of sexual dysfunction, but also the absence of the negative consequences of sexual activity.

There is no single position! The discrepancies appear to be dictated by political and cultural differences, as well as diverse health systems. This again indirectly indicates the importance of the place that sexuality occupies in social relations and in the public health system.

However, a question arises. Is it fair to solve the problems of human sexuality in such alternative ways?

When we talk about the sexual behavior of a particular person, there can be no ready-made solution subordinate to a monosyllabic program. For one, for example, abstinence is the choice; for another, a protected sex life; personal attitudes and mental makeup of others do not accept precautions in sex, being in fact self-destructive behavior. This is sex in a drug state or a deliberate desire to infect HIV. Calls for sexual abstinence among adolescents are fully justified. However, a declaration of abstinence may be unrealistic to implement and unacceptable to many. At the same time, the cult of sex that has developed especially among young people provokes sexual intercourse among those who, for example, due to a delay in psychosexual development or a weak sexual constitution, could abstain and easily endure abstinence. Those, it is necessary to observe an individual approach in solving the problems of maintaining sexual health.

The individual clinical approach to sexual health is now being expanded in the developed Western countries towards education, epidemiology, economics and legislation. This is reflected in the creation of government programs aimed at promoting sexual health. The clinical aspect, in the sense of the relationship between the doctor and the patient, is only one of the forms of multifaceted influences within the framework of these programs.

The ideas of V.M. Ankylosing spondylitis on sexual health have passed the test of time. It remains to wait for our society and state to accept them.

Conclusion

For the first time, analyses the many-sided contributions of V. M. Bekhterev in establishing the sexology. Giving human sexuality the meaning-making value, V. M. Bekhterev studied its normal and pathological manifestations, considering them comprehensively, 6 into account reflexology and sociopsychological aspects. The progressiveness of his views expressed in the formulation of the question about sexual health. There is traced a succession of views of V. M. Bekhterev in modern sexology.

Future Directions and Implications

The legacy of V. M. Bekhterev serves as a model of scientific and humanistic attitude to human sexuality. In Russia, in 1988, a separate medical specialty "sexology" appeared. Specialists in different areas involved in patients with sexual disorders should have a general basic knowledge of sexology. This paradigm will allow us to approach the creation of an algorithm for step-by-step provision of care to sexological patients on a theoretical and organizational level.

Sexology acquires a preventive orientation. It helps to strengthen the family, reduce the negative consequences of sexual activity, and improve the quality of life in general. Important tasks that face sexology cause the need to introduce special programs on sexology in medical and pedagogical colleges, to develop sexological education of adolescents, to create schools for parents and future parents on sexual education of children.

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