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Mike Williams set off on a hunting trip into the swamps of North Florida where it was thought he met a gruesome fate in the jaws of hungry allogators, except that's not what happened at all.

And after the uncovering of a secret love triangle, the truth would finally be revealed.

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Hey, weirdos, I'm Ash.

And I'm Alayna, and this is Morbid.

It's Morbid in the morning, it's Morbid in the morning.

And I apologize, I am sick, so.

You bitch.

I might sneeze all over you or cough all over you.

That's nasty.

But yeah.

That can be taken out in the post-editing process.

It can.

Just know that I sneezed and coughed all over you, but we took it out.

But yeah, so I'm trying to muster up my strength and energy right now, because this is a pretty wild case that we're going to be talking about.

It's not one case.

It's a man's career is what I should say.

We're going to be covering Walter Jackson Freeman, the father of the transorbital lobotomy.

That little thing.

That guy.

That little lobotomy.

Yeah.

He's something.

A monster.

He's something.

We're going to do this in two parts, because I do want to talk about the Rosemary Kennedy lobotomy.

That is so tragic.

That is a, I mean, reading about that rocked my world.

I remember, I actually didn't know about that until maybe I would say like five or six years ago when there was like some Kennedy special on the history channel.

I never knew that.

And when they started going into it, I was like, oh my God.

Oh, it's horrific because they did to that woman.

It's horrific.

Exactly.

And then to think that that really wasn't that long ago.

No, it really wasn't in the grand scheme of things.

That's nuts.

And that her own, it was her own father who really, really fucked her over there.

But I mean, it was both our parents, but we'll get into that in part two.

I want to start part two with that and like give it, it's due.

Yeah.

Because it's quite a story and it's quite a lengthy story and it needs its own kind of moment there.

Definitely.

But we are going to begin by talking about Dr. Freeman himself and explaining where he came from, how he even came into this, like what his intentions at first were.

Okay.

All that fun stuff.

Because it seems like they got lost down the road.

They certainly did.

Yeah.

I don't know a lot about his origin story, so I'm excited to hear.

When you hear about him in the beginning, it feels like, and you're just kind of hopeful that it's true that he had these like grand and somewhat pure intentions at one point.

I think they were lost in this thing where he believed, in a time where they believed like talk therapy was the only way to get through mental illness.

He believed that it was physical, like medical intervention that was the only way to get.

Both were wrong and both were right.

Because both of them were standing, both sides were sitting there standing in the, this is the only way.

And it's not, it's a mixture of both.

As we know now, we still haven't perfected it.

It's very much a mixture of both, but each of them were saying, no, no, no, my way is the only way.

So his intentions in the beginning where he wanted to cure mental illness.

Okay.

But my goodness, did he go about it the wrong way?

Yeah.

And he just kept going, even through his failures, which his failures weren't like failing at, you know, you know, creating something entertaining or something and you just keep working at it until you do it right.

You're failing at human beings.

Like you're ruining human beings lives with your failures.

So it's like, you can't keep doing this, but he kept doing it at the expense of so many people.

That's the thing he's just like onto the next one.

Okay.

On to the next one.

And that's when he goes into evil villain territory.

It's like, you start with these intentions, but my goodness, did they get lost along the way?

So when Portuguese neurologist, Egas Moniz developed the lobotomy because a lot of people

confuse that Dr. Freeman was the one who created the lobotomy.

He didn't.

Okay.

He created the transorbital lobotomy, which is a totally different procedure.

Egas Moniz was the one who created the lobotomy.

They also called it a leucotomy, but we know it now as a lobotomy.

It was in 1935 and it was just a super crude surgery that was developed as a blanket treatment for mental illness.

It involved drilling into the skull and like literally just scrambling the neural connections to the frontal lobe.

Yeah.

And they just thought like, yeah, that'll fix it.

Yeah.

Just egg beat that person's brain and that'll do.

And the thing is, all of these ideas have a basis in like reality and you're like, you just followed that in a logical and more like normal way.

You could have got somewhere, I think, but you followed it down this wild path of just let's scramble the connections.

It's like, you didn't think of anything more refined here?

Because that's the thing.

When you think about it, you're like, yeah, scrambling them will help like, I don't know about that.

I don't think that's going to do much.

So less than a decade later after Egas Moniz created the lobotomy, American neurologist Walter Jackson Freeman refined question mark, the procedure to develop a non-surgical procedure because that was obviously a very surgical procedure.

This one could be performed in a doctor's office.

That's terrifying.

And this is what he called the transorbital lobotomy.

And how is that not surgical?

Well, Freeman's procedure involved inserting a medical instrument very similar to an ice pick into the patient's orbital socket to eyeball, sever, like right next to the eyeball, it would go in and it would be used to sever the neural connections without requiring surgery, hospital stays or long recovery times.

It was advertised as guick, easy and a painless solution to everything.

Painless?

Yeah.

They advertised this thing into your eye.

They were like, oh, don't worry.

We'll numb you up.

It's fine.

What?

And if you look at patients like afterwards, their eyes are all black, obviously.

Of course.

It's intense.

That's awful.

And he said it could cure general lethargy, occasional depression, schizophrenia, violent, aggressive behavior, everything on the spectrum.

And they basically made the procedure a go-to solution for very complex psychological issues that have affected countless people for countless centuries.

They were like, oh, we figured it out.

And unfortunately, while the procedure was slightly effective for a very small number of those who received a lobotomy, it was used indiscriminately, often without consideration for the increasingly disastrous outcomes that were happening.

They were just like, oh, this one will be fine.

You know what?

Forget that one.

We're going to move on to the next and this will be better.

Sometimes patients were as young as four or five years old.

Are you kidding?

Yes.

Oh my God.

Whose parents I'm like, yeah.

So the question becomes, was Dr.

Freeman an indiscriminate egomaniac or was he just blinded to what he had really done and was looking to be the person to fix it all?

I don't know yet.

I think it's a good mix of both.

I think he is evil villain territory for sure.

And I think it began as something different and it turned into something fucking awful.

I feel like, I mean, that kind of happens with a lot of villains.

It's true

And it's, it's unforgivable the way he just kept going.

That's the problem here.

When he realized like this is not working where he just kept going.

He kept hiding results.

He was just moving forward like it wasn't this awful thing.

So let's talk about who Walter Freeman is.

Lizzie Walter Freeman, Walter Jackson Freeman, Jr.

was born on November 14th, 1895 in Philadelphia.

I think that makes him a Scorpio.

So there you go.

So he was the first of seven children born to Walter Freeman,

Sr. and Corinne Keen Freeman.

Walter's maternal grandfather was Williams, was William Keen,

who was a veteran of the Union army who served in the American Civil War War.

And was the country's first brain surgeon.

Oh, shit.

So he came from some very medical background.

Walter's earliest years, he was sick a lot, like practically from the moment he was born. Oh, wow.

When the boy was only 14 months old, William Keen, his grandfather, was called on by his parents to quote excise 30 enlarged lymph nodes from one side of the baby's neck.

Yeah, which this procedure ended up causing permanent paralysis of the trapezius and sternomastoid muscles.

Oh, yeah.

So they just took his lymph nodes out on that side?

Yeah. OK.

Yeah, enlarged lymph nodes.

Yeah. Yeah.

Now, in the years after that, Walter was dealing with a wide array of common and also uncommon illnesses at the time.

He got diphtheria, measles, scarlet fever, mumps.

He had repeated bouts of tonsillitis and eventually did a tonsillectomy.

So he was sick a lot.

It sounds like he had some kind of like autoimmune disease.

It sounded like there was definitely something more wrong.

But in the late 19th century,

Philadelphia was a hub for progressive ideas in science and medicine and a lot of influential people in those fields lived there.

So Walter grew up surrounded by doctors and surgeons who encouraged him,

like very much encouraged his inquisitive nature,

because he immediately was like he was around it all the time.

His grandfather, who he really liked, was a brain surgeon.

So he was like, what's this all about?

And he ended up earning the nickname Little Walter YY.

Little Walter YY, that's adorable.

Because he was always asking, like, why, why, why does this work?

How does that work?

He was the original Y.

Yeah, he really was.

He was the one who started it.

But I mean, it was all basically just ensuring

that he was going to go right into medicine,

like his father and his grandfather.

Now, as a student, Walter was stellar.

He was super into academics.

He was great at it, but he was less interested in, unless in tune with was things that little boys his age were, quote, unquote, supposed to be interested in.

OK, like sports and girls and all that stuff,

which I find like just I'm like that they it's always presented as like, oh, that's his weirdness.

And it's like the supposed to be interested in part,

it should be really a red flag sized here because it's like

a kid doesn't need to be into sports and girls to be a normal kid.

No, it's not like let's not do that.

But of course, this made him a little bit of an outsider at school,

especially where the time period, the time period, for sure.

And at home, it was kind of a mixed bladder for him.

Because according to writer Jack L.

High, Walter contentedly assumed the Victorian role of the distant

but dominant oldest brother.

So he was distant with his siblings.

He acted like the boss and he was also pretty distant with his own father.

His father was not like a lovey-dovey type.

OK, Walter remembered him as, quote, shy, socially awkward

and a humorless father, who's an example,

taught his son to regard emotional expression as something strange and frightening.

I feel like that was pretty typical of the time, unfortunately.

While Walter's father seemed very uncomfortable in his role as like caregiver,

like he just didn't seem to be able to function in that.

Not a warm fuzzy.

Corinne Keen Freeman, the mom, took the complete opposite approach $% \left\{ 1\right\} =\left\{ 1\right\}$

and made a very consistent effort to involve herself in her children's lives,

be there emotionally.

She was pretty much shut out of her husband's life

because he was working all the time.

And so she was kind of also on the receiving end of just being neglected.

So she knew what it felt like.

But she reveled in motherhood, like reveled in it.

She went to all her children's events and activities around the city.

She was there.

She would bring them places.

She was always with them.

She would arrange little vacations with them.

She would bring them to like nearby resorts

and places like Jamestown, Gloucester, Cape May, all kinds of places, just them.

She sounds rad.

And yeah.

And it's like so unlike their relationship,

which was pretty tense and strained with their father,

their mother was kind of their like their refuge.

Yeah. She became their like oasis

where they could talk about their emotions very freely with her.

That's good.

She didn't make them sound strange like she would listen.

At least they had that, you know.

Exactly.

And but of all her children, Walter was still the hardest to reach according to her.

Like he was very aloof.

Distant either.

Very much took after the father.

OK.

And actually, Corinne described her Walter as the cat that walks by himself.

Oh, that's what she that was one of his nicknames.

What a sweet way to describe it, though.

She's like, he's just a little kitty that walks by himself alone time.

And if there was any figure that loomed very large over young Walter's life,

it was his grandfather, William Keen, the first brain surgeon.

Unlike his father, who again, very much like struggled to relate to others,

which I'm like, I think he probably had some stuff going on of himself by the sounds of it.

Yeah.

Because it sounds like he has some like issues like socially

and also just like emotionally, like I don't even because I don't find

I didn't find anything about him being like aggressive and violent or anything like that.

He was just like awkward and didn't know how to deal with that.

OK.

So like, I think you needed a little bit of like, you know, help dealing with that as well.

Right.

But yeah, he he did not.

And also, his father didn't like attention.

So he did his work.

He was also a doctor.

But he did not like attention from the public about it.

He didn't want to just do his work and he wanted to get through it.

And he was very uncomfortable with being showered with any kind of attention.

And that's funny, because it seems like his son didn't end up the same way.

Well, because Walter's grandfather, William Keen,

reveled in accolades and attention because he had a pristine,

very stellar reputation in science.

Like you said, the first brain surgeon.

And he was he was great.

So it's like he loved it.

So it's totally opposite.

And Walter definitely was drawn more to that side.

And by the time Walter was like an early, early in his teens, Keen's work

in neurology had actually earned him a level of fame that many scientists never see.

He was a role model to Walter, like his intellectual prowess or his social

like his ability to be like socially aware and socially comfortable.

Because Walter was still very socially awkward at this point.

He was taking after his father, but he was looking up to his grandfather.

And in time, Walter became his grandfather's favorite grandchild,

really, because I think he saw that he was going to follow after him.

But he also saw him as somebody as like, I need to kind of show him the ropes kind of thing.

And they spent a lot of time together during Walter's formative years as an adolescent.

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Now in 1912, Walter enrolled in his freshman year at Yale University.

Oh, shit.

Yeah.

Rory Gilmore.

There you go.

And unfortunately, he found that he was like a little ill-prepared.

Really?

The amount of work and the rigor that was expected of students.

Rory felt the same.

Exactly.

He was Rory Gilmore.

Exactly.

And he actually recalled later, in prep school,

a daily stint of 30 lines of Greek translation was standard.

Jesus.

In college, it was 30 pages.

And I was like, I'm ill-prepared for that.

I'm ill-prepared for the prep school part of that.

For real?

I'm ill-prepared for the prep school.

Yeah.

Now he said the jump from geometry and algebra to calculus was equally baffling.

And I also agree with that.

Fuck calculus.

Yeah.

I never had to do calculus, but my friends did.

And I was like, yeah, no, that's not for me, Doug.

It's a lot.

But Walter struggled considerably during his first year,

and he barely passed his classes.

But he also was matriculating at 16 years old,

which was an achievement in and of itself.

So we have to give him that.

But at 16, the rigor was a little too hard.

It's like, yeah, we can understand that.

That checks.

Yeah.

And also, he's immature at this point.

16-year-old boy is not ready for college.

But Walter's immaturity and social awkwardness ultimately led to a college experience

that he later described as very lonely, intimidating, and not a good time at all.

That's sad.

Pretty miserable.

During his sophomore and junior years at Yale,

Walter continued to struggle in all aspects, socially, academically.

He tried and repeatedly failed to settle on a major

that he could at least enjoy doing.

Like he just wasn't finding his place.

Because again, he's 16, that's hard.

And it was right at the beginning of his senior year

that Walter actually contracted typhoid and was hospitalized for a long period.

And that's when he began to talk about going into the medical field.

Despite his father's insistence that he avoid medicine.

Really?

Because his father was like, it is a very demanding, intense career.

Right.

Walter kept coming back to the idea of being a doctor.

And he saw it as he was like, I think this is a good career.

You get a good life out of it.

Definitely.

It sets you up if you're good at it.

And he did have a big interest in poetry as well.

But he was looking at it as this is much more of a viable career than poetry.

Especially for the time.

Yeah, exactly.

Now, as Jack L. High notes, typhoid had stolen half of Freeman's senior year,

but in return, it had given him an opportunity to ponder his future.

Following his graduation from Yale in 1916,

he enrolled at the University of Chicago and began to study medicine.

So unlike his time at Yale, during, you know,

where he was really struggling to find his place and his passions.

It's almost like when you have to do like your prerequisites.

Yeah.

It's like that Yale was his prerequisites.

Walter acclimated very guickly to medical school.

He found that he loved it.

He had a real big aptitude for formulas.

He loved laboratory work.

He just found his place.

Yeah.

Now, after two semesters at the University of Chicago,

he transferred to the medical school at the University of Pennsylvania in Philadelphia.

And many of his fellow students struggled in their first year,

but he was like impressing all his instructors.

He was super committed to the hard work.

Yeah.

He was very interested in it, very good at it.

They were very impressed by him.

And the summer after his first year at the University of Pennsylvania,

he returned to Chicago for summer studies.

And that's when he started his fascination with the human brain.

Particularly, he became very interested in the intersection

between medicine and psychiatry.

Okav.

He was very interested in that part.

And it was by his third year in medical school,

his studies had come to occupy literally all his time.

He was becoming his father.

He was fully committed.

And he said, medicine held my interest to the point

where I excluded many other things, he later said.

That's not healthy.

In fact, I was barely aware of my family.

Do not recall what they were doing

or where they were during this period.

That's really sad when you break that down.

And so he was very engrossed in his studies,

but he also just really wanted to start his career.

He was like, I loved studying,

but I was just ready to take the step out of the nest.

He really didn't like doing internships.

Like he kind of resented it

and thought he was above it a little bit.

I could see that.

especially where his grandfather is, who he is.

He's like, do you know who I am?

Yeah.

He's like, I don't need an internship.

He referred to it as scutwork.

And the unglamorous day-to-day work of collecting samples

and filling out paperwork was just not something he wanted to do.

Listen, we all got to start as an apprentice.

We all do.

We all do.

Even in a hair salon, you got to do it.

There you go.

Now during this period,

Freeman was developing certain characteristic traits

that were kind of undesirable,

but would end up being pretty relevant or prominent,

I should say, during his entire professional life.

Yeah, your face told me they weren't going to be great traits.

Yeah.

So El-Hai wrote,

Freeman eventually realized that as an intern,

he was supposed to be a member of a hospital team.

And the role of team player was never one that Freeman filled well.

Hmm.

So despite studying under some of the literally

most highly regarded surgeons in the field,

he's like, I'm better.

He would rather work by himself in the lab

or just standing at an operating table for hours.

Wow.

Just focusing on something.

Which I can't, it's an undesirable trait for sure

to not be a team player.

But I understand that some people just,

it's hard for some people.

It just is.

I'm not a great team player.

Like I'm just not.

And it is an undesirable trait.

And one, but it's one that you should work on.

Well, that's the thing.

So I was going to say, I know that about you,

that it's not your favorite thing to do.

But when it comes down to it,

I've seen you be able to do it.

Exactly.

So, and you have to be able to,

because life is a collaborative effort.

That's the thing.

And a lot of, you don't need to change yourself.

I never believe in changing those kind of parts about yourself.

Like you don't need to just become a different person.

No.

Because I won't.

So that's just the way it is.

You know, like if you're not very excited about team

building things, like that's not going to change.

But like you said, you just have to like,

you have to just go with it sometimes.

And you're going to see,

I think sometimes it helps to see when something

pans out from a team effort.

Definitely.

You look at it and you go, okay,

you know what, I couldn't have done that by myself.

That needed everybody's hands in it.

That's the thing.

Like different viewpoints make the world go round, you know?

It's like sometimes it is better to do things by yourself.

And sometimes people are allowed to do that.

Yeah, of course.

Like sometimes you're going to be like really focused

and you'll be able to get the job done.

But then other times, like you said,

someone will see something you maybe didn't see

and they can show you that.

And especially in the science and medicine.

Right.

Multiple points of view and multiple people looking at a thing

is what makes you discover things that you never would have.

So following his graduation from medical school in 1923,

Walter went to Paris and he began postgraduate studies

in clinical neurology,

funded by an American field service scholarship

that he had won with the help of his grandfather.

Won.

So over a long period of time studying at,

I'm going to play this pronunciation

because I will butcher it and I don't want to.

That was beautiful.

Yeah, you did it.

That place.

You done did it.

Walter dove much deeper into his studies of psychiatry and neurology and he was working with patients that he described as, quote,

old women worn out in the struggle of life

and not ready to take the leap into eternity.

Oh, shit.

Never felt more seen in my life.

Damn.

I was going to say, damn.

We're all just like, well, shit.

Pour it out for us.

So Walter spent months in France working with patients

that struggled to pay for medical treatment

and he was working as an intern

and was also studying the brains of animals

and honing his skills in the lab.

Okay.

His time in Europe was cut short though

in the late spring of 1924.

What did he contract?

Well, I know you would think,

but no, he received a telegram from his grandfather

letting him know that he'd secured a job for Walter

as a senior medical officer in charge of laboratories

at St. Elizabeth's Hospital.

I'm feeling like grandpa's pulling a little too many strings here.

Pulling some strings.

Is Walter, Walter's a nepo baby.

He's a nepo baby.

Wow.

I will say though, it looks like Walter did do the job.

Like he, he put in some work and he was good at it.

Like he was good at his, the studies portion of it.

Yeah.

It's not like he was like this shitty guy

that his grandpa was just like shoving through these hoops.

But he was definitely getting escorted through all the doors $% \left\{ 1\right\} =\left\{ 1\right$

that were opening for him.

The some nepo babies are talented.

Exactly.

But this was a psychiatrist hospital in Washington, DC.

Okav.

And he was going to be a senior medical officer

in charge of that laboratory.

Got it.

So by the time that Walter joined the staff at St. Elizabeth's,

Americans were well into a psychiatric crisis

that would eventually transform the mental health field

and treatment for psychiatric disorders.

Between 1903 and 1933, American psychiatric hospitals more than doubled in size.

Some had thousands of patients.

Which is far too many.

A lot of this was due to the large number of American men returning home from fighting in World War II and deep psychological trauma.

But it also corresponded with a pretty significant rise in the number of physical and psychological diseases like syphilis, alcoholism.

These were becoming more and more prevalent. The problem was though that diagnosing an illness and housing a patient were not the same as treating the illness. Right.

You know, just diagnosing it and sticking them in a room is not treating the illness.

Not fixing anything.

So a lot of patients received inpatient treatment that would be very barbaric by today's standards. Truly it should be by any standards, but it wasn't. And these patients were what inspired Walter to have a feeling he described as, quote, a weird mixture of fear, disgust, and shame. Yeah.

So this is why I say, like, I think he looked at it and said this is gross.

And we need to do something about it.

But then he was gross with what he did about it.

So it's like, you know, it just didn't go.

You watch it and you're like, that could have been a good story. Yeah.

But it's not.

It's like you just went the wrong, you took the wrong path, my friend. Oh, and it sounds like he was just like overconfident in certain abilities.

Yeah.

He really thought he had it.

He really did.

Now, Walter was not a wholly unsympathetic man, like I've been trying to say in the beginning at least. Sure.

The lack of treatment and the horrid state of squalor in which parents, patients were forced to live,

quote, aroused rejection rather than sympathy or interest.

In fact, the thing that basically drove him

professionally was a desire to advance

the field of neurology and psychology

in a way that chronically mentally ill patients

could eventually be treated and go on to live productive

fulfilling lives.

That was his idea.

Right.

He was like, I don't want to stick them in a place

and let them rot.

That's not my idea.

That's not my care.

That's just like prison.

His whole idea here was I want them to go on

to live a fulfilling life.

That was the idea, but my goodness, it got lost.

So Freeman's son, Walter Freeman III, told PBS later,

he was repelled by what he saw.

He saw the nature of illness not as something

that required sympathy, but as something that required action.

Do something.

He wanted to solve the problems of psychiatry

and he wanted to do it fast.

And that's where the problem lies, I think.

There's certain things that can't go on a fast track.

I think it was his need to get it done,

his need to be the one who did it,

his need to be the one that did it now.

And it's like, if that wasn't there,

I think there would have been a lot more nuance

to what he was doing and it wouldn't have turned out

the way it did, but he just wanted to crash through

and be the one who fixed it all.

And it's like, you could have if you just took the time

and the patience and the care.

But while his motives may have been to advance his career,

like in some way, and there were parts of it

that were to reinforce his ego, essentially.

Yeah, self-centered.

There was part of him, like we're saying,

that didn't want to see people suffer unnecessarily.

Of course.

So it was a lot of things.

It was amalgamation of reasons.

And especially if he could be the one to do something about it.

But as far as Walter could see it,

mental illness had a negative effect on society as well,

because he said it removed otherwise very capable individuals

from the workforce and made them a burden to themselves.

And according to him, a burden to others.

He wrote, I looked around me at the hundreds of patients $% \left(1\right) =\left(1\right) \left(1\right) \left($

and thought, what a waste of manpower and women power.

Which is kind of a dark way of looking at it.

It's a pretty dark way of looking at it.

For the time period, I suppose that's a very like,

just black and white way of looking at it.

Like you could be working and you're not.

It's very sterile.

I don't like the idea of calling these people a burden to others.

No.

It's like, you know what I mean?

Like that takes away any of the care

that you put into your previous statements

of like, you don't want to see people suffer unnecessarily.

Like all that stuff, like I want them to live fulfilling lives.

I want them to be happy.

Like stop there.

I want them to be able to work if they want to work.

Like sure.

But to call them a burden on others and say like, you know,

like they're a waste of manpower.

It's like, ooh, like you went too far.

That's putting a lot on that.

And now you've taken kind of the, any of the care out of it.

But by the early 1930s, he had spent years studying schizophrenia and other chronic mental illnesses and concluded that such afflictions were organic and not societal or environmental.

So he figured they could only be solved through medical procedures.

There are subscriptions for everything these days,

from streaming services to fitness programs, this, that,

and the other thing.

Sometimes it really feels impossible to keep tabs $% \left\{ \mathbf{k}^{\prime }\right\} =\mathbf{k}^{\prime }$

on what you're actually paying for every month.

And that is why I am such a huge fan of Rocket Money.

Rocket Money is a personal finance app that finds and cancels your unwanted subscriptions, monitors your spending,

and helps you lower your bills all in one place.

Most people think that they're spending like \$80 on their subscriptions.

When in reality, the number is closer to \$200.

When you're signed up for so many things,

like streaming services you used to watch one show for,

or free trials for delivery that you don't use,

it is so easy to lose track of what you're paying for.

With Rocket Money, you can easily cancel the ones you don't want

with just the press of a button.

No more long hold times or annoying emails with customer service.

Rocket Money does all the work for you.

Rocket Money can even negotiate to lower your bills for you by up to 20%.

All you have to do is take a picture of your bill,

and Rocket Money takes care of the rest.

Rocket Money also lets you monitor all your expenses in one place,

recommends custom budgets based on your past spending,

and they'll even send you notifications when you've reached your spending limits.

Whoa! With over 3 million users and counting,

Rocket Money customers have saved an average of \$720 a year.

You know what you could do with that money?

So much fun stuff.

Stop wasting money on things you don't use,

cancel your unwanted subscriptions, and manage your money.

Are you one of the millions of Americans affected by changes in your insurance status or loss of Medicaid?

GoodRx is here to help with easy prescription savings

and straightforward guidance for navigating changes in coverage.

With GoodRx, you can instantly find discounts

and save up to 80% on retail prescription prices.

And GoodRx is totally free and simple to use.

All you need to do is search for your prescription on the GoodRx website or app,

and show your discount at the pharmacy counter.

It is literally that easy.

GoodRx is accepted at all the major pharmacies in your neighborhood,

including CVS, Kroger, Walgreens, Rite Aid, Vons, Walmart, Sims Club, and many more.

And remember, GoodRx doesn't just work for new prescriptions,

it can help you save big on all your refills too.

I freaking love GoodRx and I find discounts on GoodRx

all the time.

GoodRx has saved me a whole bunch of money,

and I am truly thankful to them for that.

So to start saving on prescriptions,

regardless of your coverage status, check GoodRx.

Go to goodrx.com slash morbid.

That's goodrx.com slash morbid.

GoodRx is not insurance.

Despite those feelings,

he had to entertain the nation's growing interest in psychoanalysis

in order to succeed in the hospital and university settings

that he was really drawn to work in.

Right.

Because this was around the time when it was really booming that,

like psychoanalysis, like Freud, all that stuff was like,

that was what everybody was looking at,

not looking at the medical portion of it at all.

And he's only wanting to look at the medical portion.

If they could only join forces and talk to each other.

Now, while most scientists and psychologists

focus their attention on the pathology of behaviors,

Walter was really one of the few voices

that were advocating for medical explanation and solution for the symptoms.

By the mid-1930s, his routine had him waking up at 4 a.m.

He began the day with writing,

then he would split his time between private practice,

his work at the hospital labs,

and a teaching position at George Washington University,

and working as a member of the Mental Health Commission

of the District of Columbia.

Wow, that was every day.

It's an overloaded plate right there.

Yeah. it was.

During this period, his work was focused on charting activity in the brain

by injecting patients with Thorotrast,

which was a colloidal thorium dioxide

that would show up in X-rays

and allow the neurologist to identify certain problem areas.

Now that is really fucking cool.

Very interesting, but Thoroclast was actually banned in the 1950s.

So at the time, they did not know.

But in the 1950s in the United States, it was banned

because studies found exposure intravascularly to this solution

causes liver tumors,

and inhaling thorium dust can create pancreatic and lung cancer as well.

Oh, shit.

Unfortunately, even though it was banned,

the effects can be super long-lasting

and can be time-release.

They sometimes don't show up for decades,

like 30 to 40 years after you've been exposed.

Isn't it scary that there's a lot of compounds and chemicals like that? So scary.

Pretty gnarly the things that we used and thought we understood in medicine and then only find out it's more dangerous than the ailment it's being used to detect.

So scary.

And I feel like that happened kind of more often than not.

Oh, it happened a lot because it was all exploration.

So it was like they didn't know.

Now, although he had been steadily increasing

his reputation in medical circles around the country,

he knew that his ambitions were greater

than one person could manage alone.

So he was suddenly sitting there saying,

okay, I need to work with a team.

I have to be a little bit of a team player here.

Fortunately, Freeman's ideal partner arrived

at George Washington University in 1935.

Hey, yo.

He was a young neurosurgeon named James Winston Watts.

And like Walter.

James Watts came from a pretty prestigious medical family.

He had quickly risen to the top of the faculty

at the University of Pennsylvania Hospital

and then he had transferred to Washington D.C. as well.

But also like Freeman.

Watts believed in psychosurgery,

which is what is now known as neurosurgery.

It was known before as psychosurgery.

And he believed that was the key to treating

and eradicating mental illness.

So they were on the same wavelength together.

Now the meeting of these two,

what would be pioneers in neuroscience,

coincided with a growing scientific interest

in the function of the frontal lobes of the brain.

So they were on the right path.

They certainly were.

Because in fact, in the 1930s and 40s,

the frontal lobe was considered

to be the most important part of the brain

throughout your lifespan.

Not just in childhood development.

People believed any injury to the front lobe in adulthood even could be a problem for ethical behavior, control, willpower.

But research, particularly D.O. Hebb's paper from 1945, which was called Man's Front Lobes, a critical review.

They later began to see through research

that the front lobes are very important to development.

And they are vital for building a framework

of intelligence, skill building.

But once you're developed, that's kind of it.

Right. They don't play as huge a role anymore.

Not to say they don't play any role.

That's just not as big as one's thought.

So he said large frontal lobe lesions in children

were very much something to worry about $% \left(1\right) =\left(1\right) \left(1\right)$

or keep an eye on.

But in adults, they didn't super affect IQ

or ability to make ethical, moral decisions

to the extent that could be considered the sole issue.

Do you know what part of the brain does?

No. Okay.

I did not look into that.

But remember, we're in the era where they believe this is the most important thing about the brain,

the frontal lobes.

We know different now that there's many different things that come together to do that.

Mm-hmm.

But back then, frontal lobe was it, regardless of your age.

Frontal lobe or boss.

Truly

So in their earliest work together,

Freeman and Watts conducted experiments

that not only confirmed their belief

about the function of the frontal lobes.

but also what could happen

when that section of the brain became impaired.

They wrote, with an intact brain,

an individual is able to foresee,

to forecast the results of certain activities.

But when the frontal lobes were damaged

or removed surgically, they said,

the person affected shows a lack of initiative

and a tendency to procrastinate.

Under such conditions,

the patient suffers a loss of self-consciousness

and becomes indifferent to the opinions of others.

Okay.

Interesting.

That is interesting.

While they may have been at the forefront of their field,

Freeman and Watts weren't alone in exploring the ways

in which the brain could be surgically altered

to correct undesirable behavior.

Because in 1935.

Igus Moniz, who we talked about at the top,

a Portuguese neurosurgeon had been experimenting

with a procedure he called the leukotomy.

No.

A neurosurgical procedure he believed

could definitely cure certain mental illnesses

and other maladies

by basically severing the pathways

to the frontal lobes of the brain.

In a procedure that would eventually become known

as the prefrontal lobotomy,

he drilled holes into the sides or top of the skull

to allow access to the frontal lobes.

And then he used a scalpel to cut nerve fibers.

This is giving me a headache.

And he believed sometimes,

if I think too much about having a brain,

it freaks my brain out.

Yeah, I can understand that.

You know what I mean?

Because you're really not supposed to think about it.

Yeah.

Just supposed to be there.

Yeah.

But he believed that the surgery would force the brain

to develop new neural pathways

and more beneficial emotional responses.

So if you sever those ties,

it's like forcing a river another way, you know?

Which I can see where that thought does come from.

If you build the dam,

it's going to have to go a different way, you know?

Now, although Walter was skeptical of Moniz's theory,

that simply severing the connection would cause the brain to regrow healthier connections, he couldn't argue with the Portuguese neurosurgeons published results claiming five and six patients were cured of their affliction through lobotomies. Some years later, Moniz would clarify that only about 35% of his patients were cured, while another 35% showed some improvement. Yeah.

Also, he rarely followed up with patients beyond a few weeks after their surgeries. So if there were any negative effects from the surgeries, he wouldn't have heard about them and he definitely wouldn't have included them in his research. Fantastic.

So we're going to go with that's a way less number than even 35%.

Yeah, sounds ethical.

So frustrated by American medical industry's increasing interest and reliance in psychoanalysis over medical treatment for mental illnesses, Freeman and Watts began considering how the leucotomy could be used in the United States.

So they finally got their chance to experiment with the technique in the fall of 1936.

They did this on a patient who was a 63-year-old housewife named Alice Hammett.

She had come to them seeking help with her anxiety. Oh no.

Now by her own report,

Alice had suffered from anxiety,

anxiety, insomnia and depression

for as long as she could remember.

That's like really sad.

She had been hospitalized for nervous breakdowns in the past, but she said nothing alleviated her symptoms.

She had tried everything.

So steadfast in his belief that all mental illness was organic and medical rather than social and behavioral, Walter deemed Alice to be a perfect candidate for the first ever lobotomy performed in the United States.

In reality though, Alice's afflictions were likely definitely mostly behavioral as well as medical.

In society.

Yeah.

She had apparently grown up very well off, very spoiled.

Like she herself said I was a very spoiled child.

Okay.

She would throw tantrums to get her way,

was giving everything she wanted when she did that.

So when she entered adulthood,

she didn't have coping skills or an ability to express

her wants and needs in a healthy way.

She would just get mad, upset and anxious about it.

So that was for sure behavioral and societal.

Exactly.

I just said society earlier.

I don't know if you know that.

Yeah, you know.

I was just like society.

Just society, you know.

Honestly, that is just the answer for everything, society.

So in the years after that,

she was experiencing also a lot of unfortunate events in her life on top of this like ability to have no coping skills whatsoever.

Her two-year-old child had died.

Oh, wow.

Her sister had been murdered at the hands of her brother in law, so her husband.

Yep.

And again, at this time, society was not super comfortable with negative emotions.

So Alice learned to keep those anxieties all inside, which led to a long history of having a lot of acting out publicly issues.

It got worse and worse, her mental illness,

where she was exposing herself to the neighbors.

Oh. no.

Verbally abusing her husband,

and she started relying on tranquilizers

just to make it through the day.

Oh, man.

Because that's the thing, you push those anxieties down and you don't talk about them, you keep pushing them.

Exactly, they explode.

They do damage inside.

So by the time Alice came to the Freeman and Watts,

she was anxiety walking.

At the end of her rope.

Yeah, they said she rung her hands,

she thrust around during the examination,

like she was just an anxious ball of anxiety.

Oh, that's awful.

So really with few, if any, other options,

Alice and her husband consented to be the test case

for this procedure.

Wow.

On September 14th, 1936.

And again, she became the first person

in the United States to receive a lobotomy.

So at first, the procedure seemed to be a success.

Alice was recovering pretty well from surgery.

Six days later, though, Freeman received word

from Alice's husband that she was still calm

and she didn't seem anxious,

but she was having trouble speaking and writing.

And that she was, quote, almost too placid.

So fortunately, once the swelling in the brain

subsided, which took several weeks,

of course, very intense procedure,

she did return more or less to normal.

And I guess throughout the remainder of her life, though,

even though her anxieties were less,

like it did lessen a lot of that,

she did experience a lot of symptoms

that were very much probably related to the surgery,

like convulsions.

That very much negatively affected her quality of life.

But even through all this,

they considered this experiment

with Alice a resounding success.

And they wasted no time reporting this to their colleagues.

It's so interesting that it did sort of help, in a way.

Yeah.

But it created more issues.

Yeah.

Because I think it kind of, to me,

it almost feels like it dulls the senses a bit,

so her anxieties just weren't being felt as intensely.

Like it's just dulling, a feeling, which is scary.

That's very scary.

But he became determined at this point

to refine the procedure

because he wanted to reduce those side effects

to make better success rates.

So he didn't want to lose momentum.

So Freeman and Watts began looking for a second candidate

for surgery just weeks after Alice Hammett.

And that feels like too soon when you don't know the-

Because you need to refine it.

Exactly.

And you don't even know yet

what she's going to go through down the road.

Exactly.

So they found a willing participant,

59-year-old bookkeeper, Emma Ager.

So like Hammett, she had struggled with anxiety

and depression for most of her life.

Her symptoms were so extreme at times

that she suffered hallucinations.

She had a profound and irrational fear of being poisoned.

That was something she was dealing with.

And apparently during the procedure,

for like doing her lobotomy,

the leukotome broke down,

and the leukotome was the surgical tool used

to perform the lobotomy.

It was invented in the 1940s by Canadian neurosurgeon

by the name of Dr. Kenneth McKenzie.

And it almost looks like a syringe type shape

with a long protrusion at the end

that gets inserted into the hole in the skull

and then into the brain itself.

Like a syringe, there's a plunger on the back

and this is used to kind of like send

the wire thing into the brain to do the work.

Okay.

Then the doctor uses it to rotate it

and that cores out some brain tissue.

Ooh.

It broke down during this procedure.

That's not good.

But they got it to work

and the surgery was considered a success

with Walter later noting that the patient

was responsive and cheerful after surgery.

But he said, although entirely lacking in spontaneity.

It is every parent's nightmare unfolding in South Jersey.

The search is on for an 11-year-old Cape May County boy

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So far, searchers have found only his left sneaker near his home.

It's hard to imagine losing a loved one,

a wife, a husband, a child.

For many, it's their biggest fear.

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Every week, I dive into a new case,

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And I'm proud to say that this podcast

has aided in a number of arrests.

It's important to me to remember the human behind the headline

and help family members find their vanished loved one,

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So the success of Emma Ager's surgery

very much encouraged Freeman and Watts,

and they wanted to continue employing Moniz's leucotomy,

which Freeman had rechristened the lobotomy.

I wonder what made him want to change it.

Yeah, I think he just wanted to make it his own.

Yeah, I mean, he wanted to change it

to be the transorbital lobotomy, so he could do it quicker.

That's why he changed that.

He didn't want the recovery times.

He didn't want hospital stays he wanted

to be able to do this inpatient, do a lot of them.

And there's just certain things that you can't do like that.

And after this success, patients were lined up

to receive what Freeman and Watts were touting

as a groundbreaking treatment.

It shows you how bad mental illness can be

that people were so desperate to get their skull

and brain dug into just to get relief.

Yeah, it's horrible.

It's like that should show you how bad it can be.

And because people were,

they were desperately asking to have their skull opened up and their brain scrambled to get relief.

When people say crippling anxiety,

I don't think they necessarily understand crippling.

Willing to have your brain scrambled with a random tool

that's like an electric toothbrush

just to get any kind of relief.

I can't imagine because that's the thing.

I mean, I struggle with anxiety like now today,

but I can't imagine what it felt like back then

when they didn't have an understanding of it.

Oh yeah, because nobody's understanding

you were taking the time to know.

If you have a panic attack afterwards, you're like,

oh my God, I feel like I was just completely out of control of my own body.

And to feel like that every single day, I can't imagine.

And to have people probably look at you like,

oh, like what's she going through?

Like that's a burden.

Yeah, like that's annoying.

I mean, you feel like a burden.

You know, like that's awful.

Of course, it's like a cycle.

So you can see why people were,

but at the same time, like you said, like holy shit,

people were like just lining up for this.

Yeah, lining up for it.

And it didn't, and they were getting successes out of it,

what they were doing as successes

and reporting as successes.

And it didn't take long though, until these perfect outcomes

turned into bad outcomes.

For instance, one early patient who received the surgery

to treat chronic depression was transformed

into a chronic talker.

Oh wow.

Who would literally not stop speaking.

Like, like could not control it.

Could not stop.

Like it was uncontrollable speaking.

And also became like obsessively compelled

to spend hours every day rowing on the Potomac River.

Like just rowing, rowing, rowing.

Another patient seen for treatment of her anxiety

and obsessive compulsive disorder came out of surgery,

cured of her symptoms, but just a few weeks later,

both her depression and compulsive behaviors returned,

stronger and more disabling than they were before.

Really.

So there was a mix of outcomes.

It's interesting how they're doing the same procedure on people,

but it's affecting them differently.

I think the brain is so interesting.

It's not refined.

And it's not the same procedure.

I'm sure you're not severing the same connections every time.

So you're getting different results.

This is a wildly erratic procedure in and of itself.

Because that's the thing.

So they're, like you said, they're going through the eyeball

and they're cutting.

They're not doing that yet.

He hasn't even made the transorbital lobotomy yet.

He's just drilling.

He's doing Angus Moniz's lobotomy.

Yeah.

So he can see where he's severing.

I mean, to an extent, of course.

Yeah.

But this is just the lobotomy.

Okay.

The lobotomy in and of itself is absurd.

Like it's just in wild.

But because he hasn't even created the transorbital lobotomy yet.

Okay

By the winter of 1937, Freeman and Watts had begun making the rounds

on the lecture circuit, talking about their successes,

the potential of the technique to eradicate mental illness.

But and while some in the field were pretty receptive to the experiments

and results, a lot of people in the fields of neurology and psychiatry were very skeptical and suggested that the positive results could just be as easily be as a result of surgical shock

and the results of the procedure, then would be of the procedure itself.

Which sounds like it was the case because it wears off.

At first they're like, oh, wow, I'm cured.

And then a couple of weeks later, they start having all these other issues.

Freeman and Watts continued right on though in their work of psychosurgery, quote unquote. And they were very confident that they were on the verge of a major advancement in this field. So in the late 1930s, the medical and psychiatric fields were very split among the majority who believed that the mind, a nebulous concept referring just to like thought and cognition, that's what the mind is, could and should be treated as separate from the body.

And then there were those like Freeman and Watts who were convinced that medical science, not talk therapy, was the only way to address mental illness.

Now the problem wasn't that one was right and one was wrong,

they were both right to some extent.

And both wrong to some extent.

Each side believed that they were right and the other one was wrong.

The only way.

And that it was this like, you know, issue intersection here and impasse that created a lot of tension between skeptics and advocates of the prefrontal lobotomy and drove Freeman and Watts's work in the field.

Now determined to prove their skeptics wrong, Freeman and Watts revisited some of the earlier cases in which the patient showed no signs of improvement.

And this wasn't really helping their argument that like it was working.

And in one case, there was a woman who was plagued with fears of germs and contamination.

And the second surgery on her frontal lobes led to a very difficult recovery for her.

And her thinking was confused and inattentive following the surgery.

In another case, it was a woman who had been struggling for years with suicidal ideation.

Her depression only got way worse after the second surgery.

And she tried to end her life by setting herself on fire after the second surgery.

So it's bad now.

And it's like, now this should have been, I mean.

Done.

Done.

Move on.

Something else has got to be done here.

Go back to your papers.

But no, by the end of the 1930s, the setbacks experienced by Freeman and Watts were compounded when their friend and colleague, Egas Moniz, was attacked in his office.

Now remember, Egas Moniz created the lobotomy.

Yes.

In 1939, he was attacked by a former patient who shot him four times.

It caused him to be paralyzed.

And he ended up having to use a wheelchair for the rest of his life.

Wow.

So like this is showing you, you're ruining people's lives here.

Like you're not helping.

This is not helping.

You have a former patient coming to like express his, not in a correct way, but this should tell you something.

Now Freeman and Watts experienced another major setback in the summer of 1941, when a very infamous lobotomy was performed on a very well-known family member, Rosemary Kennedy.

And it very much failed to produce the desired outcome and would eventually be remembered publicly as one of their, if not their greatest failures.

Oh man.

And we will be getting into the lobotomy of Rosemary Kennedy in part two,

because I really want to get into that one because it's pretty horrific.

I only know, I would say like the baseline of that entire story.

And for what I do know is horrible.

It's horrific.

I can't imagine what we're going to talk about.

It's horrific when her family did to her.

It really isn't what these people did to her.

Because she was very young when she got her spray.

She was 23.

Yeah.

So we're going to do that.

Look up, I encourage you before you get to part two, look up photos of Rosemary Kennedy.

What a fucking cool chick she looks like.

There's a picture of her like smoking a cigar and she's wearing this like fedora.

And she's just like, she's also a knockout.

Oh yeah.

Stunning.

Yeah.

Stunning beauty.

And it's like, and she and everyone, obviously we'll get to it in part two,

everyone who knew her in her personal life said she had one of the most likable personalities.

I remember hearing that.

She struggled and we'll talk about why she struggled.

And she had some issues.

Of course.

That should have been addressed and they did try to address.

I don't know if they did a great job, but.

Sounds like talk therapy would have been a better version.

I think she needed a mix of many things and they just didn't give her the proper thing.

But everyone who knew her in her personal life said like, yeah, she struggled.

She had some issues, you know.

Of course.

She could be a little unpredictable because of her issues.

but they said her personality was fucking top notch.

Like teachers loved her, people who knew her loved her.

Like she was just a very likable human being and she was funny.

She had like a good sense of humor.

Right.

And she was just like a badass.

They was going to be a cool chick.

They killed her without killing her.

Oh, 100%.

And as we'll see, she knew what happens later.

And she, yeah.

That's heartbreaking.

So we will get into that in part two because it's a pretty heavy part.

Yeah.

But this is the beginning of Walter Freeman.

I've always been interested in lobotomies and like that whole,

I've been interested in his career.

It's interesting.

It's horrifying.

It's like a nightmare to me.

So veah.

Hopefully you guys are finding this as fascinating and horrifying as I did.

I find it super fascinating, especially just even what we've covered in part one.

So I'm excited is not the word.

I'm anxious to get to part two.

Part two is going to be rough.

So yeah.

All right.

Well, with that being said, we do hope that you keep listening.

And we hope you keep it weird.

But that's a way that you perform lobotomies on people because guess what?

It didn't work.

Yikes.

No.

Should have been stopped right in the beginning.

Yes.

Stop it right in its tracks.

Just go to therapy.

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