

The life and work of Dr Román Alberca Lorente

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ABSTRACT

Introduction. Román Alberca Lorente was one of the key figures in 20th-century Spanish neuropsychiatry. He received his medical and surgical licence in 1925 with special distinction, and focused on three specialties that for him were intimately linked: neurohistopathology, neurology, and psychiatry. In 1927, he defended his doctoral thesis “Estudio histopatológico de la encefalitis experimental” (“Histopathological study of experimental encephalitis”), for which he received the Rodríguez Abaytúa award of the Spanish Royal National Academy of Medicine. A year later, he won a competitive public examination to select directors of psychiatric hospitals, choosing the hospital in Murcia, a city he never left. He was part of the group of neurologists and psychiatrists who founded the Spanish Society of Neurology in 1949, and was president of the Society between 1959 and 1961. He joined the Royal Academy of Medicine of Murcia in 1951, and was its president from 1962 until shortly before his death in 1966. He won the chair of psychiatry in 1950. His prolific contributions include publications on neurohistopathology, neurology, and psychiatry; expert evaluation reports; lectures; and works relating psychiatry and law.

Material and methods. An extensive literature review was conducted, based on previous references, and particularly on the work compiled by Valverde and López-Mesas. Dr Herrero held numerous interviews with Alberca’s children, Ana and Román Alberca Serrano, who kindly contributed unpublished material.

Results. We present an overview of the work of Román Alberca Lorente through his texts and the opinions of his closest collaborators.

Conclusions. We review numerous texts by the author and summarise his opinions on psychiatry and neurology, as well as other cultural and humanistic issues that interested him.

KEYWORDS

Chair of psychiatry, neuropsychiatry, Hospital Román Alberca, Royal Academy of Medicine and Surgery of Murcia, Román Alberca Lorente, Spanish Society of Neurology

Introduction

The aim of this study is to present an overview of the life and work of one of the most outstanding figures in 20th-century Spanish neuropsychiatry, through the words of Alberca himself and his collaborators, as well as information provided by members of his family. Román Alberca Lorente contributed a significant body

of scientific research, encompassing fields that at the time were very closely linked: neurohistopathology, neurology, and psychiatry. In the latter discipline, he was appointed to a university chair. Due to his work as director of the Murcia psychiatric hospital, he was often asked to prepare expert evaluation reports, which were of extraordinary quality and continue to be considered exemplary, and wrote numerous works on psychiatry



Figure 1. Román Alberca Lorente on 13 August 1940. Image provided by the family of Dr Alberca Lorente.



Figure 2. Román Alberca Lorente on 30 August 1949. Image provided by the family of Dr Alberca Lorente.

and law. He was a founding member of the Spanish Society of Neurology (SEN), becoming its president between 1959 and 1961, and was also president of the Royal Academy of Medicine and Surgery of Murcia from 1962 until shortly before his death in 1966.

Material and methods

A literature search of the PubMed, Scopus, Web of Science, and MEDLINE databases (keywords: “Román Alberca Lorente,” “Spanish psychiatry,” “Spanish neuropsychiatry,” “neurohistopathology,” “neurology,” “history,” “Neurology school of Madrid,” and “Murcia Asylum”) yielded very few results. Therefore, we conducted a traditional literature search based on the extensive work compiled by M. Valverde and J.L. López-

Mesas, as well as articles including those by Barcia Salorio, Sáez Gómez, and Giménez Cisneros, which in some cases included incomplete or even erroneous references. Many texts, including lectures and other texts inaccessible by other means, could only be obtained through the book by Valverde and López-Mesas. Despite some minor imperfections, we consider this compilation to be the reference work for accessing many texts by Alberca. Published in 2003, this two-volume compilation entitled *La obra de Román Alberca* (“The works of Román Alberca”) gathers 109 contributions from Dr Alberca, including books, articles, lectures, and expert evaluation reports, although we were only able to fully or partially recover 57 texts. Part of this review is based on those texts. Another hurdle was the difficulty of obtaining some

of the author's original texts. Texts from Alberca's early "French period" were obtained through unpublished documents provided by his family members and from a website hosting scans of the documents. Links to these documents are provided in the references section. The interlibrary loan service of the University of Murcia provided numerous articles by the author, despite some inaccurate or incomplete bibliographic references.

We also used qualitative research techniques, with one of the authors (M.T. Herrero) conducting a series of informal interviews with two of Román Alberca Lorente's children, Ana and Román Alberca Serrano, who shared little-known details about his life and generously provided a range of original and handwritten documents from the professor.

To find other texts not included in the compilation from 2003, we had recourse to indirect references from certain previously published articles about his life. Some articles, communications, and lectures could not be obtained, and are named in the text but not included in the references section.

Results

Early years: degree in medicine and time in Paris

Román Alberca Lorente (Figures 1-3) was born in Alcázar de San Juan, in the province of Ciudad Real, on 30 September 1903, the youngest child and only son (he had four sisters: Ramona, Isabel, Elisa, and Luisina) born to his mother Elisa and father Manuel (Figure 4). Though his first calling was to study law,¹ he began a medical degree in Madrid, and at Colegio de San Carlos, belonging to the Madrid Faculty of Medicine, his professor Santiago Ramón y Cajal was a key influence.

During his third year at medical school, he passed a competitive examination for an internship at the psychiatry and neurology departments of Hospital Provincial de Madrid, directed by his first master, Prof José Sanchís Banús. He was named president of the Association of Student Interns and began to attend afternoon sessions at the laboratory of 'normal and pathological histology,' directed by Pío del Río Hortega² at the Residencia de Estudiantes,³ considered the first Spanish cultural centre and one of the leading forums for the exchange of knowledge in interwar Europe. Years later, Alberca would say of del Río Hortega that:



Figure 3. Undated photograph of Román Alberca Lorente. Image provided by the family of Dr Alberca Lorente.

He was, obviously, a great draughtsman, and stimulated our need to draw because, though others may be content with the objectivity of photomicrography images, nothing other than drawing our findings required such thorough study of morphological details. And he knew how to foster the spirit of rebellion, indiscipline, and independence that any true disciple must have [...].⁴

While Alberca was still a student, the famous American neurologist and neurosurgeon Wilder Penfield, who had been trained at del Río Hortega's laboratory, proposed that Alberca travel to America to specialise with him, on the condition that he teach Spanish histological



Figure 4. Román Alberca Lorente with his father and two of his sisters. Image provided by the family of Dr Alberca Lorente.

techniques there.^{1,5,6} It was also as a student, in 1921, that Alberca published his first study, at the age of 18 years.⁷

He was awarded his medical degree with special distinction in 1925 at Universidad Central de Madrid.⁵ From an early stage, he focused on three specialties that at the time were closely related. First, neurology and psychiatry, and second, neurohistopathology, due to the strong influence of the schools of Santiago Ramón y Cajal and subsequently of Nicolás Achúcarro and his disciples Gonzalo Rodríguez Lafora and Pío del Río Hortega.

In 1926, he received a grant for 14 000 pesetas from the Board for Study Extensions^{5,8} and, “while his first destination was to work with Prof Mott in London on the histology of schizophrenia, he decided on the recommendation of del Río Hortega to travel to the Institut Pasteur in Paris to work under Constantin Levaditi, who had requested that del Río send a member of his team to study the anatomical pathology of encephalitis” (Figures 5 and 6).^{1,6,9}

As a result, the publications from these early years (1921-1928) present an essentially histopathological slant⁹: he studied the nature and significance of Herxheimer spirals and their formation from primitive epithelial fibrils,^{7,10} and the importance of dermal alterations in elephantiasis as a syndrome resulting from various

aetiologies, with the most common being filariasis.^{10,11} This work on elephantiasis was published while Alberca was still a medical student, and his drawings studying the degenerative phenomena are striking in their number and level of detail. In another article he confirmed “the participation of the microglia as the first element in lesion response and asserted their origin in the mesoderm,”^{10,12} and in others he demonstrated “the path of entry into the epidermis of foot-and-mouth disease virus, concluding that the virus’ preference for the ectoderm demonstrated the existence of pure, non-neurotropic ectodermosis.”^{10,13,14} In an experimental study with herpes zoster virus, he investigated “the sequence of modifications from the peripheral nerve to the spinal segments, which can only be explained by direct propagation through the nervous tissue, thereby demonstrating the neuroprobasia of certain neurotropic viruses.”^{10,15,16}

During his time in Paris, he conducted anatomical pathology studies of herpes encephalitis, showing great dedication, and drew by hand the cerebral and neuroinflammatory changes observed in each preparation (Figure 7).

In 1927, he defended his doctoral thesis, “Estudio histopatológico de la encefalitis experimental” (“Histopathological study of experimental encephalitis”),¹⁷ based on analyses performed partly at the Institut Pasteur. The thesis was dedicated to his masters del Río Hortega, Sanchís Banús, and Levaditi,² and was awarded the Spanish Royal National Academy of Medicine’s Rodríguez Abaytúa award for the best thesis in medicine at the University of Madrid that year (Figure 8).^{1,5,6}

The thesis was subsequently published (in 1928) in the journal *Los Progresos de la Clínica*¹⁸ and later (in 1932) in the journal *Noticias Médicas*.¹⁹ In this work, Alberca made a fundamental contribution in demonstrating the affinity of herpesvirus for the ectoderm, and showing the topographical distribution and characteristics of the different viruses. His conclusions led to a change from the primitive ideas of von Economo, the first to describe “encephalitis lethargica,” who believed that the viral infection originated in the mesoderm (Figures 9 and 10).^{1,6}

As a result of this early work, and prior to the publication of his doctoral thesis, he contributed a review of aphasia²⁰ and the article “Sobre la locura inducida” (“On induced madness”),²¹ collaborating on the latter work with his



Figure 5. Román Alberca Lorente during a pause from work, with colleagues from his time at the Salpêtrière hospital in Paris. Image provided by the family of Dr Alberca Lorente.



Figure 6. Román Alberca Lorente attends an anatomical pathology session at the Salpêtrière. Image provided by the family of Dr Alberca Lorente.

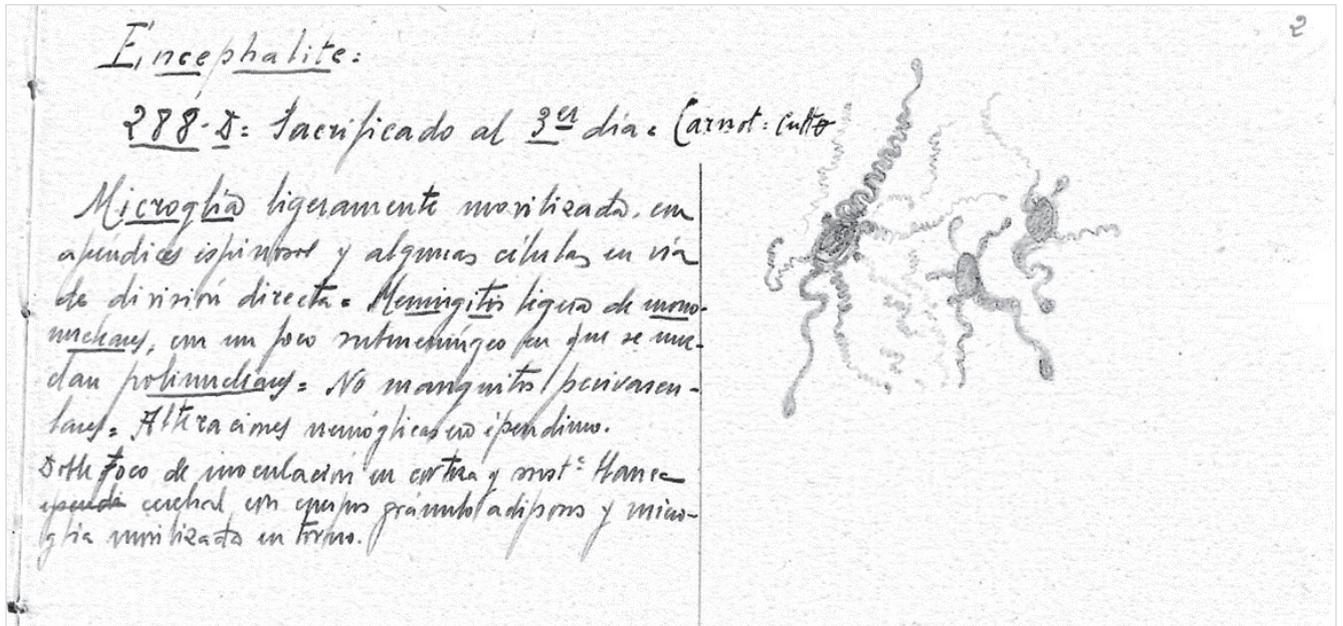


Figure 7. Histology findings in a model of encephalitis with handwritten notes from the professor. Image provided by the family of Dr Alberca Lorente.

psychiatrist master, Sanchís Banús, which we can regard as the beginning of Alberca's long career of publishing on psychiatry. The pair subsequently published two articles on trichinosis^{22,23}: the first was a case report of a pseudomyasthenic form of the disease, and the second rebutted Lafora's objections to the former work.

After the death of his master Sanchís Banús in 1932, he gave an emotive eulogy at the Ateneo de Cartagena,²⁴ praising his mentor's political commitment and the fact that he never tried to preach to others. His memory of and admiration for Sanchís Banús appear once more in a communication to the 1957 International Congress for Psychiatry, held in Zurich, on paranoid reactions in the blind or Sanchís-Banús syndrome, in which he described a patient "presenting delusions of grandeur four years after losing his sight due to a war wound,"²⁵ and in another lecture given in 1964 in a session honouring his master's memory.²⁶

Arrival in Murcia

After returning from Levaditi's laboratory in Paris, "nobody, not even he, would have suspected that at the age of 25 years, and with such robust training, his doctoral thesis would mark the end of his dedication to the field of histopathology"²² because, as recounted by Enrique Amat, "he travelled extensively in search of the 500 pesetas per month that would enable him to continue his research and, without economic hardship, marry his fiancée Julia Serrano and start a family from a stable position" (Figure 11).⁹ To that end, he had to renounce his research in a fashion, and in order to achieve his family objectives he entered the competitive examination to select directors of psychiatric hospitals, which he won in 1928, choosing to direct the hospital in Murcia.⁹

The Provincial Asylum for Mental Patients (*Asilo Provincial de Enfermos Mentales*), the name appearing on the façade of the building until its demolition, was

inaugurated in 1892 on the initiative of Juan de la Cierva y Peñafiel, vice-president of the Provincial Government of Murcia, and represented a decisive step in the development of psychiatric care in Murcia.

The hospital was the first new, independent psychiatric hospital built in Spain in the 19th century. The project cost 256 406.93 pesetas. The newspapers of the day described a “sober palace of charity,” “that wonder that, among all public buildings, most honours Murcia,” a “valuable and luxurious building,” “a beautiful building that is certain to bring health to a great number of alienated individuals,” “an exquisite building [...] and magnificent abode that, from today and for the honour and glory of Murcia, is a home for the alienated poor.” The hospital’s first budget accounted for a physician with an annual salary of 1400 pesetas, and five orderlies with annual salaries of 637 pesetas, with the exception of the chief orderly, who received 750.²⁷

The Daughters of Charity were responsible for running the kitchen, laundry, and pharmacy from the first days of the institution and throughout its existence. At the time of its inauguration, the hospital had 114 patients, with a mean of 70 admissions annually in the following years.²⁷

The centre’s first physician, a temporary placement, was Laureano Albaladejo, who remained there until 1894, when he left to work as a hospital physician (Valenciano Gayá²⁷ does not indicate which hospital he transferred to, but we may assume it would have been Hospital San Juan de Dios, today called Hospital Reina Sofía de Murcia). In 1895, the position was occupied by Bernabé Guerrero Caballero; after a competitive examination held in 1906, he was confirmed with the title “tenured physician of the provincial charity assigned for visits to the asylum.” With Guerrero, the centre’s approach shifted from “medicine for the insane” to psychiatry. “After his death, Luis Gómez García was appointed as an interim replacement; Gómez was more experienced than his predecessors in the specialty of psychiatry and, with the assistance of Raimundo Muñoz, was dignified in meeting the centre’s needs between the times of Bernabé Guerrero and Román Alberca.”²⁷

When Alberca took charge of the position in Murcia, there was a political will to modernise psychiatric care and to build a new psychiatric hospital; thus, according to Alberca himself, he never lacked resources, even though the building was by now old and poor.²⁸

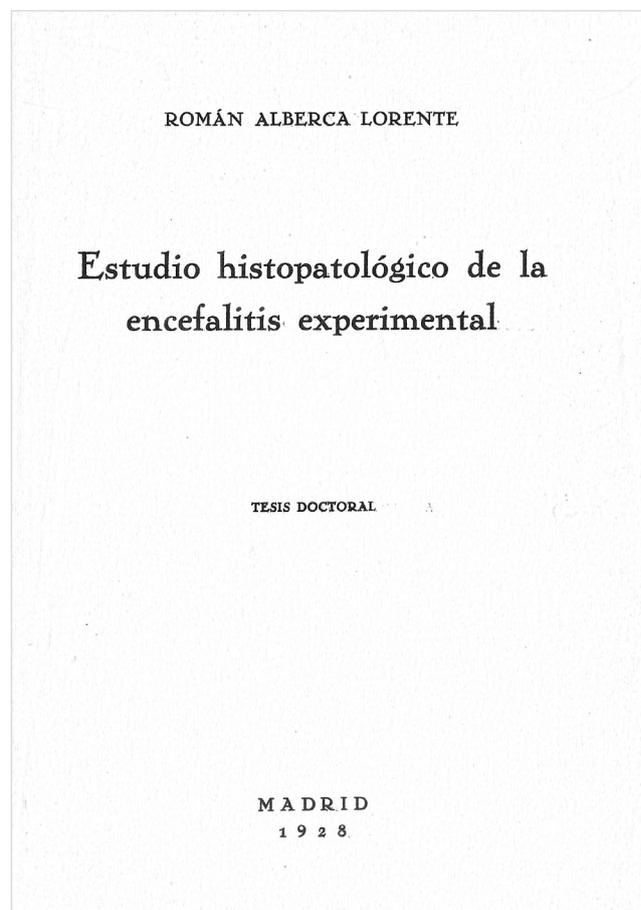


Figure 8. Front page of Dr Román Alberca Lorente’s doctoral thesis. Image provided by the family of Dr Alberca Lorente.

At the Murcia psychiatric hospital he came to understand the reality of these patients, which in the opinion of Enrique Amat Aguirre probably led him “to his true vocations: clinical care, instruction, and eventually humanism; even without the influence of his economic difficulties, his generosity nonetheless would have led him to renounce life in the laboratory to dedicate himself to others: his patients and students,”²⁹ a very broad calling. On the other hand, Sáez suggests that Alberca’s true calling was research; however, the basis of both authors’ assertions is unclear.

Like other psychiatrists of the time, such as Fernández Sanz and Salas y Vaca (Leganés) and Ruiz Maya (Córdoba), he endeavoured to encourage artistic capacities in his patients, a trend that had already begun in the 19th century²⁹; to that end, he provided

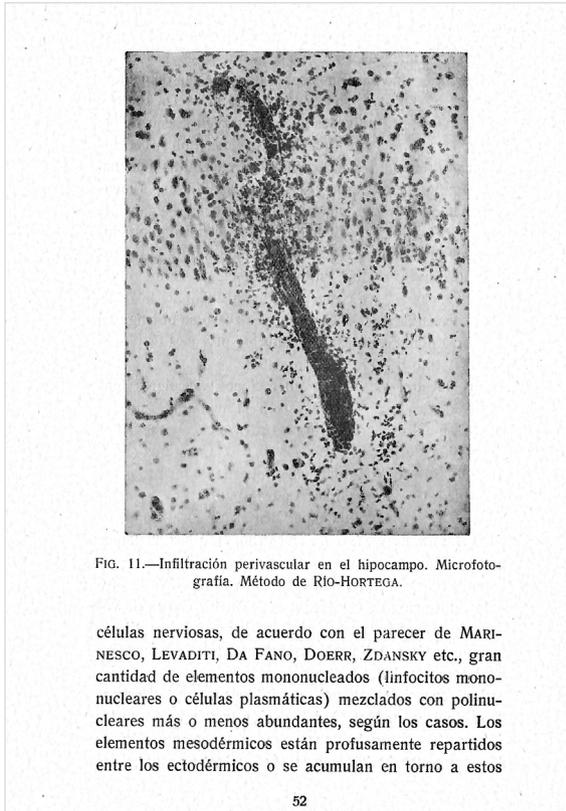


Figure 9. Photomicrograph showing perivascular infiltration in the hippocampus. Del Río Hortega staining method. Image taken from one of the figures from Dr Alberca's doctoral thesis. Image provided by the family of Dr Alberca Lorente.

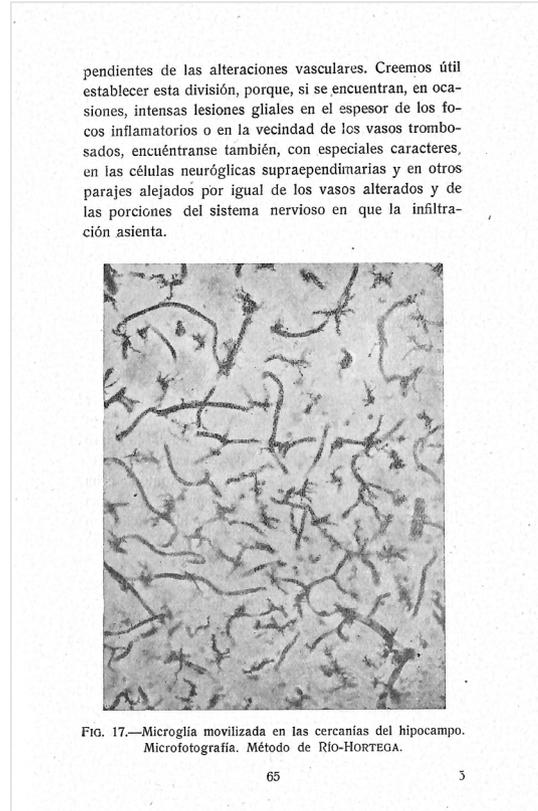


Figure 10. Photomicrograph of activated microglia near the hippocampus. Del Río Hortega staining method. Image taken from Dr Alberca's doctoral thesis. Image provided by the family of Dr Alberca Lorente.

chalk for patients to decorate the walls of the hospital's courtyards to occupy their free time. The patients took advantage of this, drawing scenes from everyday life and ironic portrayals of visits from celebrities and festivals, particularly religious celebrations (Figure 12). Alberca himself was caricatured in some of these murals (Figure 13), which were photographed by Gonzalo Rodríguez Lafora on a visit to Murcia during the Second Republic, when he was president of the Psychiatry Council. Were it not for these photographs, the caricatures would have been lost, as only the door of the original building remains today. These images are collected in the catalogue of an exhibition held several years ago in Valencia.^{30,31}

A caricature of Alberca Lorente was also printed in 1932 in the publication *Galería de figuras médicas* ("Gallery of medical figures"; Figure 14), although it is unclear

whether this was inspired by the murals from the hospital. The drawing brings together his work as a psychiatric hospital director and his prestige as a histopathologist, with the portrayal of various nerve cells.

Alberca and art

Román Alberca Lorente gave numerous lectures on art, such as the one delivered at a session held by the chair of art history in Seville, on modern painting, and a lecture at the Mediterranean chair in Alicante, in which he critiqued the work of Benjamín Palencia²; however, to our knowledge, the texts of only two of these lectures are available today.^{32,33} In the first, he gives an overview of the irrational basis of artistic conception, showing a surprisingly broad and profound knowledge of existentialist philosophy,¹ affirming that "the painting of

these modern times has a certain schizophrenic meaning, as it is not attuned with the viewer; rather, it emerges from within the artist, unconcerned with realistic portrayal [...] as though due to an autistic process. The expressionist painter, without being schizophrenic, [...] paints his own imagined world.” As a corollary, he makes the following conclusion:

Thus, is it the case that in these recent times, all painters are schizophrenic, that being insane is a necessary condition for painting? [...] Neither the art of children, nor expressionism, bears more than a passing resemblance to the artistic expression of schizophrenics. [...] Schizophrenia does not produce artistic aptitude. Modern art has a meaning, an intention, a why, a whitherto (whether or not we are attuned with it), which is not present in the interpretation of schizophrenic art. [...] Art and madness walk only a short distance together, their first steps.³²

In the second speech, on the progression of modern painting since Velázquez (Figures 15 and 16), though he admits that he is not a painter, a critic, or an art historian, we can discern that he has a broad knowledge of the history of art and contemporary painting, reviewing the “pre-impressionists” (Corot, Millet, Manet, Degas, Lautrec), “impressionists” (Seurat, Cézanne, Gauguin, van Gogh), “the affable expressionist movement” (Matisse, Dufy), “Nordic expressionism” (Munch, Kirchner, Nolden), “the intellectualist pole of abstract painting” (the neoplasticism of Mondrian, the elementalism of van Doesburg, the suprematism of Malevich), “the synthetic cubism” of Picasso, “the tormented negativism of Dadaism,” “surrealism,” “the primitive social painting of Orozco or Rivera,” and “the futurism of Chirico, Carrà, or Morandi.” Finally, he responds to the main question of the lecture, “What does any of this have to do with Velázquez?,” citing in the work of the Sevillian master the basis and origins of the work of many subsequent painters.³³

The Spanish Civil War and its repercussions

Román Alberca Lorente’s time in Murcia was convulsive during the Second Republic, and particularly during the Spanish Civil War and the years that followed. His moderate left-wing ideology became problematic after the war (“although he had withdrawn his membership of Republican Left in protest at the attitude of the left during the 1934 revolution”).²⁸ Román Alberca decided



Figure 11. Román Alberca Lorente with his wife Julia Serrano. Image provided by the family of Dr Alberca Lorente.

to remain in Murcia, and resisted serving the Falange, despite pressure to do so if he wished to continue directing the hospital. According to his children, even after the conflict, he seems to have been denounced by a colleague at the centre as an ally of the Republican government. However, we found no evidence that this possible report was ever escalated or had any repercussions. His family members told us that he protected a fellow physician with right-wing ideals, whom he hid at the hospital during the war and whose testimony may have prevented the complaint from being taken further. We searched the national archives, but were unable to find any evidence of a political investigation into Alberca. Indeed, he was not forced to take exile, unlike his mentor Gonzalo Rodríguez Lafora, or José Salas Martínez (father of Margarita Salas), a psychiatrist at the Cienpозuelos psychiatric hospital



Figure 12. Graffiti mural from a wall of the psychiatric hospital, depicting the Pietà.

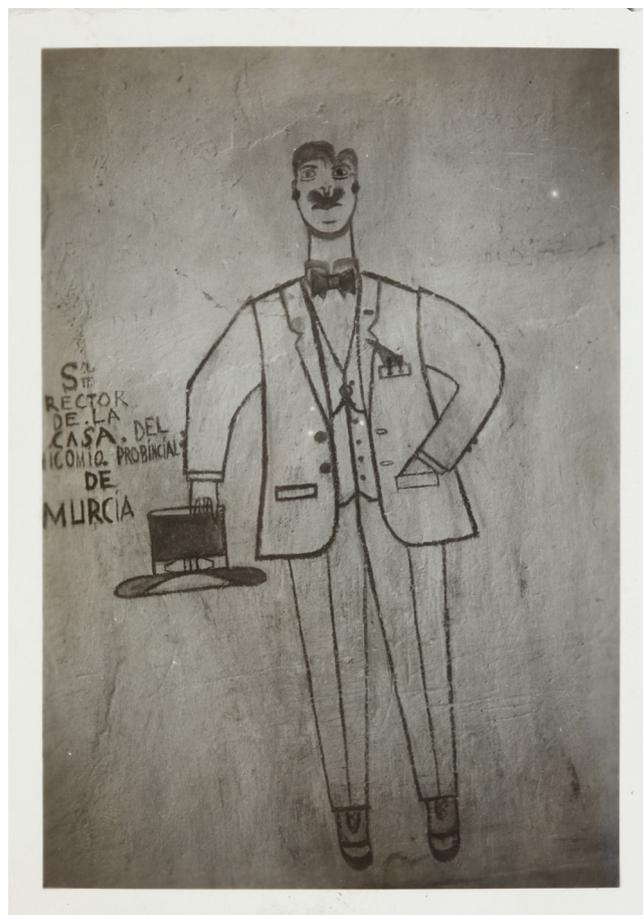


Figure 13. Graffiti mural showing a caricature of Dr Alberca. The caption reads: “[Di]rector of the house of the provincial insane asylum of Murcia.”

who was imprisoned after the war, although “with the assistance of a general of the victorious army, he was released with the recommendation that he not remain resident in Madrid.”³⁴

Several Murcian members of the Spanish histological school, disciples of Cajal, also suffered in varying degrees for supporting or serving the Republican faction; examples include Luis Calandre Ibáñez, Luis Valenciano Gayá (whom Alberca helped to re-establish himself in Murcia and who became one of his most valued disciples), and Antonio Pedro Rodríguez Pérez.³⁵

As late as 1946, in the first exercise of the competitive examinations to appoint a chair of psychiatry, in which Alberca was a candidate, “during the notorious ‘trinca’

[‘ganging up’], in which candidates essentially reviewed the curriculum vitae of their competitors to attempt to discredit them, Vallejo-Nágera wheeled out Alberca Lorente’s previous membership of the Republican Left. This circumstance and the fact of his being a disciple of Sanchís Banús, who in addition to being a psychiatrist was also a relevant Socialist politician during the Second Republic, ruined any chance of success in that first selection examination. He would have to wait another four years to win the position.”³⁶

In the post-war years, he continued maintaining correspondence and personal relationships with the great fathers of Spanish psychiatry, Vallejo-Nágera and López-Ibor; other noteworthy figures in Spanish academia,

including Gregorio Marañón, Carlos Jiménez Díaz, Sixto Obrador, Pedro Laín Entralgo, and Ramón Menéndez Pidal; and many Madrid intellectuals; in addition to his continued friendship and collaboration with Rodríguez Lafora. All of these figures visited Murcia on numerous occasions.

In this city in the basin of the river Segura, his family grew, initially at the Bañón house on Calle Pinares, where he always kept his consultation, despite the family later moving to the Murcian district of La Alberca. The family grew with the birth of two daughters, Julia and Marisa, and later two more children, Ana and Román. He was always very proud of his son Román Alberca Serrano, who completed his baccalaureate with special distinction, and subsequently followed in his father's footsteps, studying the nervous system as a neurologist.

Neurological work

The situation of Spanish neurology in the late 19th and early 20th centuries, specifically the Madrid school centred around the Hospital General (now the Hospital Gregorio Marañón) and its most significant figures, such as Luis Simarro, Nicolás Achúcarro, José Sanchís Banús, Gonzalo Rodríguez Lafora, José María Villaverde y Larraz, and the “new generation,” including such personalities as Román Alberca, Manuel Peraita-Peraita, and Dionisio Nieto-Gómez, perfectly contextualises this period and has been described by such authors as Giménez-Roldán.³⁶

Alberca was most engaged in the neurological aspect of his work in the years following the publication of his doctoral thesis. In the session held in Alberca's memory at the 1967 National Congress of Neuropsychiatry, Enrique Amat asserted that “probably, Alberca was primarily a neurologist, and later moved from neurology to psychiatry.”³⁹ Most of his neurological work focused on encephalitis; indeed, the first work he published after his thesis compiled clinical data on non-purulent infections of the nervous system, describing, for example, how “postencephalitic Parkinsonism is the nightmare of neurologists the world over, who are impotent to defeat it with an efficacious treatment.”³⁷

In 1933, he published articles on postinfectious encephalitis³⁸ and on abortive forms of epidemic poliomyelitis.³⁹ Similarly, he published the article “Contribución al estudio de las secuelas de la encefalitis epidémica” (“Contribution to the study of the sequelae

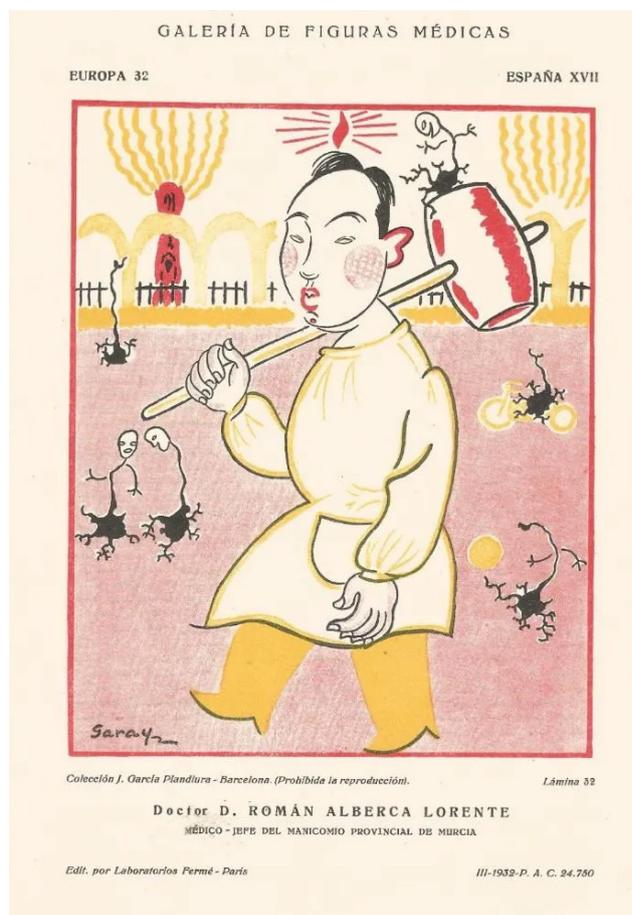


Figure 14. Dr Román Alberca Lorente. Chief physician of the provincial psychiatric hospital of Murcia. Published in *Galería de figuras médicas*. Image provided by the family of Dr Alberca Lorente.

of epidemic encephalitis”),⁴⁰ describing three cases of postencephalitic parkinsonism and, finally, presenting personal experience from his time directing the psychiatric hospital in Murcia with the use of malariotherapy to treat general paresis of the insane and tabes dorsalis.⁴¹ This treatment was introduced in Spain in the 1920s by Rodríguez Lafora as a replacement for therapy with mercury, bismuth, and arsenic, with key proponents including Vallejo-Nágera and Rodríguez Arias; it was extensively used at numerous Spanish psychiatric institutions.⁴² Valenciano Gayá recalls that he worked with Lafora at the time (between 1927 and 1936), and “experienced the peak and the drama of this dangerous but promising treatment, which inspired hope

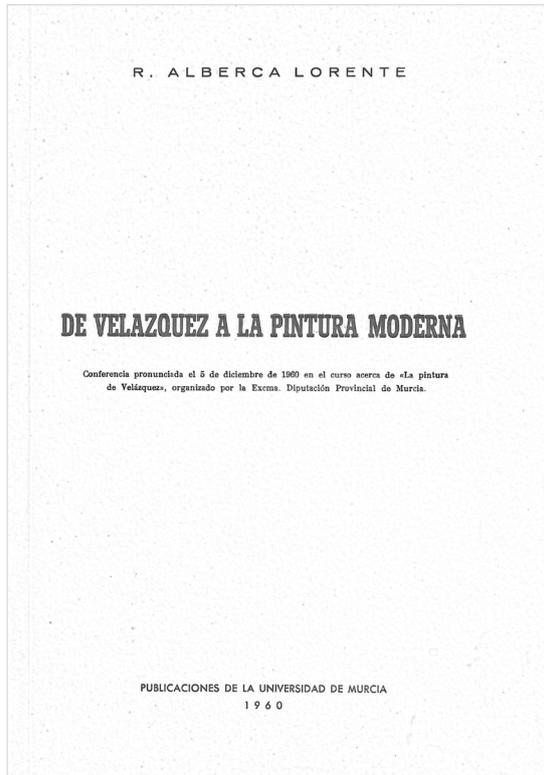


Figure 15. Front page of the work “De Velázquez a la pintura moderna” (“From Velázquez to modern painting”). Image provided by the family of Dr Alberca Lorente.



Figure 16. Image of one of Picasso’s Meninas included in the work. Image provided by the family of Dr Alberca Lorente.

for psychiatric therapies and which rapidly spread across Europe,” and later fell into disuse.⁴³ This study alludes to Alberca’s work with patients with general paresis of the insane at the Murcia psychiatric hospital.

Though Alberca’s work increasingly focused on psychiatric and legal issues, he always showed interest in encephalitis, as shown by the fact, highlighted by Valenciano,⁴⁴ that two of his last contributions (a lecture delivered in 1964 entitled “Encefalitis diseminada y alérgica” [“Disseminated and allergic encephalitis”] and a case report at the meeting of the Society of Neurology and Psychiatry of Madrid entitled “Leucoencefalitis con estudio histopatológico y virológico” [“Leucoencephalitis with a histopathological and virological study”]) address this topic, about which he was so passionate.

Neither of these texts is referenced in the vast compilation by Valverde and López-Mesas.⁴⁵

Over the years, he published and delivered numerous lectures on encephalitis, neuritis, neuraxitis or meningitis,⁴⁶⁻⁵³ dementia,^{54,55} Guillain-Barré syndrome,⁵⁶ symptomatic psychosis in pernicious anaemia,⁵⁷ and disorders of awareness associated with fourth ventricle tumours.⁵⁸ However, without a doubt, one of his most significant works in this field was the 1943 monograph *Neuroaxitis ectotropas*,⁵⁹ described as a “monumental treatise”³⁶ in which “Alberca’s great contribution was to demonstrate the basic nature of nerve cell pathology and the topographical distribution of lesions, two observations that enable the characterisation of all forms of viral encephalitis and a relative individualisation of each. Alberca characterises each group of encephalitis:

primary, parainfectious and post-vaccine, and demyelinating encephalitis.”⁷¹ In his review of the state of Spanish psychiatry in the 1940s in the *American Journal of Psychiatry*, Lafora highlights this work, citing it as “an important contribution” during that period for its “study of the parasitic virus infections of the central nervous system.”⁶⁰

Alberca and expert psychiatric reports

Alberca published more than 10 works on subjects relating psychiatry to law.⁶¹⁻⁷¹

Since his early years directing the psychiatric hospital, he had close links with the Provincial Assembly of Murcia,²⁸ and the legal authorities requested on multiple occasions that he issue expert psychiatric reports. In the years preceding the Spanish Civil War, he published two such reports: in 1930, “Sobre las calidades de la histeria y la reintegración de la capacidad de obrar” (“On the qualities of hysteria and the reintegration of legal capacity”; to restore the capacity of a patient who had been legally incapacitated after an attack of hysteria),⁶¹ and in 1936, “Sobre la peligrosidad de las psicopatías” (“On the danger of psychopathies”; establishing the conditions of responsibility of one J.H.M., who had admitted to murdering a child).⁶² The reasoned part of these reports is highly instructive; both constitute good examples for the drafting of a forensic psychiatric report, and may serve as a basis for anybody interested in an introduction to this field. To our knowledge, these are the only two reports to be published, among over 100 that he wrote.

At the request of Antonio Ferrer Sama, chair of criminal law at the University of Murcia, Alberca was commissioned to write the section on alienation and transient mental disorders in the Criminal Code for the work *Comentarios al Código Penal* (“Commentary on the Criminal Code), directed by Ferrer.⁶³

He later gave lectures on danger in the early stages of psychosis,⁶⁴ the creation of a body of forensic psychiatrists, and on mental disorders in latent somatic conditions⁶⁵ for students of criminology and forensic psychiatry.

In his work *La capacidad de obrar. Bases del peritaje psiquiátrico* (“Legal capacity. The foundation of expert psychiatric evaluation”),⁶⁶ he addresses the difficulty posed by “the counterposition of rigid, immutable laws

and codes against psychiatry, which exists in the realm of the biological sciences, whose laws are always replete with exceptions,” and subsequently reviews issues related to legal capacity and capacity to act, incapacitation as a means of protection, the problems associated with oligophrenias, the question of psychopathies, absolute and relative incapacity, the scope of the terms “dementia” and “insanity,” curable psychoses, and periodic psychoses and the lucid interval. Finally, he summarises the essence of a forensic psychiatry report and certain special considerations, such as the reversion or lifting of incapacitation. In conclusion, he recalls that expert examiners are often “unwilling to express their conclusions according to the letter of the Code, as that is the ambit of the judge, and judges advise the examiner to limit himself to his own territory, without entering into issues of nomenclature or reciting legal themes.”⁶⁶

Román Moreno⁷² asserted at the 1967 National Congress of Neuropsychiatry in Murcia that the subject of psychopathic personalities was one of Alberca’s favourite subjects, and took up a lot of his time. Over his 25-year tenure as director of the psychiatric hospital in Murcia, approximately one-third of the reports he issued are thought to have addressed psychopathies. He always considered this a thankless task as “we are unlikely to see gratitude from the psychopaths [...], nor their families, who do not wish to air their suffering [...], nor anybody who may find themselves a victim of psychopaths or who may become one.” Despite this, his attitude regarding the possible rehabilitation of these personalities was always optimistic, as he rejected “the associated concept of degeneration, its fatalistic and inexorably unchanging nature. The concurrence of external motivations may permit a certain prophylaxis and treatment, to the extent that this is possible.”⁶⁷ This interest in psychopathies is exemplified by his work on psychopathic personalities,⁶⁷ his preface to Kurt Schneider’s *The psychopathic personalities*,⁶⁸ a study on psychopathy and crime,⁶⁹ his work on disease and the typicality of crime in criminal law,⁷⁰ and a study on psychiatry and criminal law.⁷¹

T. Angosto⁷³ considers Alberca’s⁶⁷ work on psychopathic personalities to be the document at the root of the discussion created by forensic psychiatric evaluation, collaborating with Bartolomé Llopis Lloret (1905-1966), in the notorious Jarabo case, though it is not mentioned in the article.

At the Congress held in Alberca's memory in 1967, Raimundo Muñoz Martínez recalled how in his work as a forensic psychiatrist, Alberca "captured his thought on diverse legal concepts: alienation and transient mental disorders; he analysed the aetiologies of crepuscular states (epilepsy, schizophrenia, hysteria [...], pathological inebriation, withdrawal syndromes in addiction, and many others) or the typicality of crime (agreeing with other authors that the same crime may be caused by different diseases, and a single disease may lead to a varied range of crimes); or psychopathic personalities and danger."⁷⁴ Regarding legal capacity, Alberca Lorente asserts that in order to establish incapacitation, "all reports must establish whether there is a mental disorder, and if so, characterise its depth and persistence; and ascertain what the individual's activities are likely to be and to what extent he/she should be allowed to undertake them."⁷⁴

In his intervention "Las raíces de la delincuencia juvenil" ("The roots of juvenile delinquency"),⁷⁵ Alberca concludes that "the statistics on juvenile delinquency are a measure of the health or illness of a population."

Alberca and the creation of the Spanish Society of Neurology

The Spanish Society of Neurology (SEN) was founded on 18 April 1949.^{76,77} Its founding members formed the first Executive Board on 19 December 1949, with Lluís Barraquer Ferré as president and Román Alberca Lorente as third board member. Later, between 1959 and 1961, he was the Society's president. Interestingly, the sons of these two men, Lluís Barraquer Bordas and Román Alberca Serrano, are currently the only two children of former presidents of the SEN to have achieved the honour of also becoming president of the organisation (1969-1973 and 1995-1997, respectively). During the session honouring Alberca, at the Ninth National Congress of Neuropsychiatry in 1967, Luis Oller-Daurella said of Alberca that "he was a part of the SEN from its foundation, and is listed as the fifth member to join."⁷⁸ On 21 September 1967, the SEN dedicated an in memoriam session of the Spanish and French neurological societies, as Dr Alberca had also belonged to the Société Française de Neurologie⁷¹ as well as being a member of the Royal Society of Medicine of the United Kingdom.⁷⁹ At the meeting, Belarmino Rodríguez Arias read a eulogy that was subsequently published in the journal *Anales de Medicina y Cirugía*.⁷⁹

Alberca Lorente represented the SEN at international congresses in Paris, Lisbon, Brussels, and Zurich, as he was a speaker of French and German, and also learned English in order to read scientific articles. For instance, he gave two lectures in German at the Second International Congress for Psychiatry in Zurich,⁷⁸⁻⁸¹ as well as the aforementioned communication on Sanchís-Banús syndrome.²⁵

Chair of psychiatry

Alberca pursued a position as chair of psychiatry, despite Murcia not having a faculty of medicine. In the competition in which he eventually won the position, the call for candidates was issued on 31 January 1948 (Spanish Official State Bulletin [BOE] of 19 February),⁶ and concluded in 1950, with the parallel appointment of Ramón Sarró to the Barcelona chair and Román Alberca to the Salamanca chair.⁸² In the competitive examination, he delivered a lecture on fantastic paraphrenia. In the previous examination, in 1946, he had presented a study on rent neurosis. He was appointed chair of psychiatry in Salamanca in the BOE of 18 May 1950, but never lectured there as the chair of the Faculty of Medicine of the University of Valencia was established the same month, and he transferred there, taking possession of the chair in October 1950 (BOE, Order of 23 October 1950). There, in 1965, he created the School for Psychiatry Training (Figure 17), whose management he combined with the coordination of the psychiatric hospital in Murcia, where the great majority of his collaborators always worked (Figures 18 and 19). In the "inaugural speech of the president of the Association at the Fifth National Congress of Neuropsychiatry," in Salamanca, he recalled that: "I extend an emotional greeting to this noble and genuine city of Salamanca, to this legendary University, where I had the opportunity (but not the audacity) to realise my childhood dream of giving my inaugural lecture."⁸³

Linking psychiatry and neurology

In the first third of the 20th century, both psychiatry and neurology were young disciplines developing in parallel. Medicine was essentially practised at hospitals, and some neuropsychiatry departments already existed, mainly grouped around two centres: the Madrid school, born at the private psychiatric hospital in Carabanchel, which included Achúcarro, Lafora, Sanchís Banús, Villaverde, and Vallejo-Nágera, among others, and the Catalan



Figure 17. Several collaborators from the Faculty of Medicine in Valencia. Image provided by the family of Dr Alberca Lorente.

school, whose most distinguished members included Rodríguez Arias and Subirana. Members of the Madrid school were trained in neurohistology, influenced by Cajal and the German tradition, and practised neurology and psychiatry simultaneously. On the other hand, the Catalan school took more of a clinical and semiological approach, following the French tradition.²⁸

Alberca Lorente's personal view of the relationship between neurology and psychiatry is hinted at in an article addressing whether these specialties are united or should develop separately,⁸⁴ but is clearly established in his article "La relación neurología-psiquiatría" ("The relationship between neurology and psychiatry")⁸⁵; in the words of Amat, "In Alberca's work, to separate neurology from psychiatry, and either from his overall identity, would be to distort all three."⁹ Alberca himself affirms that: "I could not say how much my psychiatric training owes to my forays into histopathology and to my modest neurological training."⁸⁵ Ultimately, he saw himself above all as a psychiatrist, but he loved neurology and considered himself a neurologist at a time when

"many psychiatrists speak of psychoanalysis with the same confidence, ease, and irreverence as a priest giving Mass."⁸⁵

Alberca thought that "the problem with linking neurology and psychiatry is, in my view, an old story."⁸⁴ He wondered as to "the extent of the opposition or cooperation between neurology, so meticulous, exact, and objective [...] and psychiatry, which is imprecise, subjective, and ethereal. [...] From its very beginning, neurology is a science. Psychiatry has behind it a past, a tradition that is religious, philosophical, ethical, or romantic, but not scientific. The true interest for psychiatry of the nascent study of diseases of the brain was just that: self-interest, and not disinterested help. It attempted to obtain through this cohabitation the scientific rigour that it had always lacked. [...] Neurology and psychiatry share this scientific nature, but one in the classical sense and the other in the current sense."^{84,85}

Alberca Lorente attempted on occasion to bring psychiatry closer to the precision of neurological localisation. In his view, neurology had "largely been more generous" in this



Figure 18. In an office at the Murcia psychiatric hospital, with several collaborators. Image provided by the family of Dr Alberca Lorente.



Figure 19. In Murcia with his collaborators. Image provided by the family of Dr Alberca Lorente.

relationship.⁸⁵ He noted the contribution of neurologists to the problems of interpreting hysteria, disorders of consciousness, delirium, Korsakoff syndrome; and two of his main interests, “knowledge derived from encephalitis with respect to childhood schizophrenia”⁸⁵ and “the role of the orbital brain in impulsion and spontaneity, even in psychopathies.”⁸³ And finally: “And in exchange, what has psychiatry offered neurology? Nothing. [...] It has identified itself with neurology, mimicked it, and contributed nothing new.”⁸⁵

Psychiatric work

Lafora,⁶⁰ in 1949, wrote an excellent summary of the situation of psychiatry in Spain in the decade following the Civil War. For Lafora, Spanish psychiatry reached its pinnacle in 1936 due to the strong influence of Cajal and the histological work of del Río Hortega. In the years preceding the war, Lafora highlights the contributions of, among others, Sanchís Banús, Aldama, Gotor, Valenciano, and Alberca himself, in the journal *Archivos de Neurobiología*. He underscores the work of the psychiatric board of the Public Health Department’s Mental Hygiene Division between 1931 and 1935, when the board sought to regulate the management of psychiatric patients; the construction of new mental health clinics; the improvement, under the board’s supervision, of the older psychiatric hospitals; and the training of psychiatric nurses. Subsequently, he recalled the appearance of a new psychiatry journal, *Actas Españolas de Neurología y Psiquiatría*, edited by López Ibor, in 1940, and the journal *Revista de Psicología General y Aplicada*, edited by José Germain, in 1946.

The review highlights several books published after the Civil War, addressing diverse subjects often related to the war, such as Justo Gonzalo’s work on brain damage (1945), López Ibor’s treatment of war neuroses (1942), and Vallejo-Nágera’s text on war psychosis (1942). He also highlights the work on psychodiagnosis by José Salas (1944), the book on pellagra-related psychosis by Bartolomé Llopis, and the psychiatry manual published in two editions by Vallejo-Nágera (1945 and 1948). Finally, he mentions López Ibor’s publications on the diagnosis and treatment of epilepsy (1943) and psychiatric therapy, a study by Luis Valenciano on modern therapeutic trends in psychiatry (1942), a book on surgery of pain by E. Tolosa (1941), and the previously mentioned *Neuroaxitis ectotropas* by Alberca (1943).

In summary, Lafora writes that the Spanish psychiatry of the first decade after the war is “dominated by an enthusiastic interest in the practical therapeutic problems and shows an obvious lack of attention to experimental and laboratory research problems of an aetiological and neuropathological nature [...] [with] an equal lack of psychological and psychotechnical research” and signals a need to “reactivate the old Spanish neurobiological tradition of the Cajal school.”⁶⁰

The section above on Alberca’s early years discussed the undeniable influence of psychiatry and of one of his masters, Sanchís Banús, with whom he published his work on induced madness,²¹ which may be considered his first text in the field of psychiatry.

To summarise in this review Alberca’s opinions and contributions in the field of psychiatry is an impossible task; therefore, we take recourse to the opinions of colleagues and other psychiatrists who worked alongside him and were taught by him. In his speech at the 1967 session honouring Alberca, Demetrio Barcia Salorio, a disciple of the Valencian school of psychiatry and chair of psychiatry at the University of Murcia, succinctly synthesises the most outstanding aspects.⁸⁶ He begins by analysing Alberca’s conception of psychiatry, citing the works of another of his Murcian disciples, Luis Valenciano: “he represents the synthesis of Spanish neuropsychiatry due to his deep understanding of the histopathology of the nervous system, of neurology, of psychiatry, and even of philosophy.”⁸⁶

For Alberca Lorente, “psychiatry is medicine above all else; while it often moves away from medicine, it periodically returns [...] because neither does the mental lie beyond the scope of medicine, nor can psychiatry be of any value without a somatic basis.”⁸⁷ In Barcia’s view, “there was also a specific field, in which [Alberca] had to develop himself, to establish his own conceptions. He did not believe that it was a matter of giving preference to the corporal or to the mental, as both orientations are two poles or faces of the same structure; he concluded that no psychiatric thought could be truly fruitful [...] if it overlooked the essential problem of the link between body and soul.”^{86,87} For Barcia,⁸⁶ the essence of Alberca’s contribution to psychiatry is determined by three defining characteristics of his work: 1) Exhaustive analysis of the literature on the subject he was analysing. As noted by Valenciano, “with an unequalled bibliographic thirst and study, each of his lectures offered an exhaustive



Figure 20. Speech at the Royal Academy of Medicine and Surgery of Murcia. Image provided by the family of Dr Alberca Lorente.

grounding in the subject at hand,⁴⁴ pointing to one of the essential traits of his personality, his generosity. 2) The universality of the topics he addressed. Just reading through the titles of his works hints at this: from childhood psychoses⁸⁸ to the irrational roots of artistic creation³²; from schizophrenia and its terminal states⁸⁹ to rent neurosis (in the work he presented as a candidate to the chair of psychiatry), psychosomatic pathologies⁹⁰ (a chapter in which he reviews both the physical and the psychic mechanisms involved in the disease of all patients), and obsessive-compulsive personalities.⁹¹ 3) The development of a fundamental doctrine: he began from a position of classical psychiatry in the German tradition, enriching it with contributions from other schools and addressing highly important subjects. He based his work on a solid psychiatry, addressed essential questions, and built on his doctrine in each publication.⁸⁶

Thus, Vera Padilla⁹² at the 1967 session and Barcia¹ in his review of Alberca Lorente's oeuvre recall that, in 1950,

Alberca Lorente gave a lecture on the psychopathology of time and space⁹³ and, in 1953, published the article "Las bases del análisis existencial" ("The foundations of existential analysis").⁹⁴ Barcia¹ describes how, because of this work, Binswanger referred to Alberca as the greatest expert on this subject in Spain, although we have been unable to identify the time and place in which he made this assertion.

In "The foundations of existential analysis,"⁹⁴ Alberca ordered the abundant literature on space and time in a trilogy: chronological time, lived and experienced time, and a parallel between the chronological and the lived, corporal space. Through the analysis of this space-time structure, he analysed various aspects of psychiatric disease, such as psychopathy, depression,⁹⁵ and delirium; referring to Ortega y Gasset,^{96,97} he offered an original thesis to develop an anthropological psychotherapy.^{1,98}

As a corollary to his psychiatric contributions, which he may have begun, as mentioned above, in his 1925 article

on induced madness and his translation of Henry Devine's work in 1931,⁹⁹ we may highlight works from his latter years on hydroelectrolytic disorders in neuropsychiatry¹⁰⁰ (in which he conducts an extensive and well-researched review with references to Cajal, de Robertis, del Río Hortega, Lhermitte, Roussy, Achúcarro, Valenciano, Mollaret, Creutzfeld, and many others, on the functions of nervous transmission and the microscopic structure of the neurons and glia of the central nervous system, to support the role of potassium in "dyspotassaemic" periodic paralysis). He also addressed the subject of psychiatric epidemiology at the National Congress of Neuropsychiatry in Madrid in 1965 in a session of the Valencia chair of psychiatry, which Alberca occupied. He wrote the introduction to the session on biological therapies in the era of psychiatric drugs¹⁰¹ (we must not forget that Alberca was practising when the treatment of psychiatric patients was revolutionised by the discovery of haloperidol in 1958) and the treatment of neurosis.¹⁰²

Finally, Alberca Lorente also reviewed the psychiatric contributions of Rodríguez Lafora in the over 100 works he published on senile and presenile dementia, general paresis of the insane, the relationship between thyroid disorders and psychiatry, works on mental hygiene, historical studies, and artistic studies on cubism and expressionism. In his article, Alberca concluded by acknowledging his great debt to Lafora, both scientifically and spiritually.¹⁰³

Anecdotally, we may finally mention a posthumously published work, "El problema de la epileptización de los esquizofrénicos tratados con electrochoque" ("The problem of epileptisation in schizophrenics treated with electroshock therapy").¹⁰⁴

Royal Academy of Medicine and Surgery of Murcia

On 29 April 1951, Alberca was admitted to the Royal Academy of Medicine and Surgery of Murcia as a full member, replacing Antonio Hernández-Ros Codorníu, and gave a speech entitled "Tareas y rumbos de la psiquiatría" ("Tasks and trends in psychiatry").¹⁰⁵ With a keen sense of humour, he noted the two-fold good fortune of his admission: firstly, the simple fact of having been admitted, and secondly, the fact that he came to occupy the seat of a good friend who had not died but rather had voluntarily left for Madrid: "the joy of being admitted to the Academy is nearly always tarnished by the definitive loss of the colleague who precedes us."¹⁰⁵



Figure 21. A portrait of Román Alberca Lorente as president of the Royal Academy of Medicine and Surgery of Murcia, where the painting is on display. Image provided by the Royal Academy of Medicine and Surgery of Murcia.

In his speech, he sought to demonstrate that psychiatry "is a branch of internal medicine with a singular task, because, unlike internal medicine, it studies processes that at a first glance present with more or less abundant and flamboyant psychic symptoms."¹⁰⁵

On 14 March 1962, he was elected president of the Royal Academy of Medicine and Surgery of Murcia (Figures 20 and 21), a position he held until October 1966, as he was considering moving to Valencia to direct his School for Psychiatry Training.

From his time at the Royal Academy, the texts of numerous welcome speeches for new full members are conserved, including speeches for Pascual Murcia,¹⁰⁶ Mínguez Delgado,⁵² Gómez Jiménez de Cisneros,¹⁰⁷ Palazón Godínez,¹⁰⁸ Serrano Martínez,¹⁰⁹ Martínez García,¹¹⁰ and a particularly emotive speech for Luis



Figure 22. Bust of Román Alberca Lorente at the entrance to the Hospital Psiquiátrico Román Alberca, in Murcia.

Valenciano Gayá,¹¹¹ who was admitted as a full member in 1960, giving a lecture entitled “El delirio paranoide y la razón vital” (“Paranoid delusion and vital reason”). In his welcome speech, Alberca highlighted several qualities in his disciple: his work ethic (“No, it is not a misfortune to be hard-working: fortune, which only helps the audacious, never abandons the hard-working”), his intelligence, and “another noble human and scientific quality: calmness and a lack of urgency. Rilke might have had him in mind with his words: ‘ripening like the tree which does not force its sap and stands confident in the storms of spring without the fear that after them may come no summer.’”¹⁰⁹ To conclude, he admitted that it may seem infantile to discover such an insignificant and minimal trait: “Valenciano’s love of the grey, not of

being grey, [...] but the desire to remain unseen, a rare trait in our time, characterised by the excessive rise of propaganda that debases man.” And he recalls the words of a character from Romain Gary’s *The roots of heaven*: “the profound tragedy of Caesar’s life was not Brutus’ dagger thrust: it was the absence of a photographer.”¹¹¹

According to his family, friends, and professional colleagues, Alberca Lorente was a man of character, severe, honourable, and fair; he valued friendship but afforded great freedom to his collaborators, many of whom continued working with him for decades.

In addition to his vast intelligence, he was a multi-tasker, with numerous interests. He was an early bird, rising at seven in the morning, taking his siesta in a rocking-chair, and retiring at midnight. He was a lover of film and an avid reader, leaving handwritten notes in the books he read. Though he had a car, his children recall that he did not drive, and used his trips for work and to continue reading and studying. Furthermore, when he travelled to congresses, due to his love of the arts, he organised parallel visits to museums and to the opera.

In his latter years, he developed diabetes and became obese; he eventually died due to kidney failure on New Year’s Eve of 1966, and he was buried on 1 January 1967.

There can be no doubt that Alberca left us at the height of his career and still had great contributions to make to the field of psychiatry. His unexpected death shocked the worlds of neurology and psychiatry.

The session honouring Román Alberca Lorente at the Ninth National Congress of Neuropsychiatry, held in Murcia, was inaugurated on 27 September 1967 by Antonio Sabater Sanz, his oldest disciple, with the lecture “La persona y el maestro” (“The person and the master”).¹¹² Prior to the session, a bust of Alberca was unveiled in the entrance hall of the psychiatric hospital named after him, as an “eternal homage to his memory and undying example for new generations of psychiatrists.” The bust welcomes all those who visit the centre (Figure 22).

Discussion and conclusions

Alberca’s biography unfolded during an important period in the history of Spain. He undertook his medical training under the strong influence of Santiago Ramón y Cajal, who contributed to the creation of such institutions as the Board for Study Extensions, which Cajal himself

chaired from its foundation in 1907 until his death in 1934. It was precisely a grant from this body that allowed Alberca to cement his scientific training at the Institut Pasteur in Paris, although as a medical student he had already published his first works at del Río Hortega's laboratory and worked as an intern at the psychiatry and neurology departments of the Hospital Provincial de Madrid, with Prof José Sanchís Banús. There is general consensus regarding Sanchís Banús' undeniable influence on Alberca, which led to his interest in psychiatry.

After returning to Spain, he had to abandon his desire to dedicate his time to research, to marry, and to live an honest life due to the limitations of his meagre income from research work. Thus, he was forced to give up his career as a researcher, and entered the competitive examination to become director of a psychiatric hospital, opting to work in Murcia. We believe that as a result of this decision, Spanish neuroscience probably lost a brilliant figure; this loss was Murcia's gain, in the form of a highly capable clinical neuropsychiatrist.

Regarding his work as a neurohistologist, authors including Barcia, Rahmani, and Valenciano Gayá agree on the value of the contributions from his doctoral thesis, demonstrating the affinity of the herpes virus for the ectoderm, which modified the beliefs that began with von Economo on the origin of the infection in the mesoderm. In any case, the major part of his neurological research focused on encephalitis. In the opinion of authors including Enrique Amat, Alberca was primarily a neurologist and subsequently moved into psychiatry, although he ultimately considered himself a psychiatrist, despite always acknowledging the influence of his "modest neurological training."⁸⁵

Alberca analysed in depth the relationship between neurology and psychiatry, counterposing the objective, exact, actual, and scientific nature of the former with the subjective, imprecise, classical, philosophical, and even religious nature of the latter. He asserted that the interest of psychiatry as a field in neurology was only in obtaining the scientific rigour of the latter, which had never been achieved in psychiatry.

Alberca's relationship with the legal profession was influenced by the numerous expert psychiatric reports he issued at the request of the courts, as a result of his role as the director of a psychiatric institution. His opinions as an expert psychiatrist are collected in a work on the foundation of expert psychiatric examination,

and one of his greatest interests was undoubtedly the subject of psychopathies, on which he always took an optimistic view, rejecting the supposed immutability of these disorders. He also issued reports on numerous legal questions related to mental alienation and drug dependencies, among many others.

His intense scientific curiosity led to his involvement in the creation of the SEN, which he represented at numerous international congresses.

After many years pursuing a chair of psychiatry, he finally obtained the Salamanca chair in 1950, although, as he himself confessed, he never gave his inaugural lecture there as he transferred several months later to the chair in Valencia, where he created a school, combining this with his work at the hospital in Murcia.

At the speech he gave upon his admission to the Royal Academy of Medicine and Surgery of Murcia, "Tasks and trends in psychiatry," he described the methods inherent to this specialty: "While psychology studies the 'normal soul,' examining the 'pathology of the soul' is the ambit of psychiatry."¹⁰⁵ The second method is "reapproaching medicine, which studies diseases of the body in the somatic sphere, whereas psychiatry studies diseases that manifest with psychic symptoms, although both must attend to diseases of the whole body."¹⁰⁵

Alberca's links with Murcia were never lost, even when he took possession of the chair of psychiatry in Valencia. He continued to have emotional and professional connections with the region, as shown by his membership since 1951 of the Royal Academy of Medicine and Surgery of Murcia, where he was president from 1962 until shortly before his death, and on which he left an indelible mark.

Many of the physicians and psychiatrists who later exercised in Murcia were taught by Alberca at the Faculty of Medicine in Valencia; one example is the future Murcia chair of psychiatry, Demetrio Barcia Salorio.

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Conflicts of interest

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