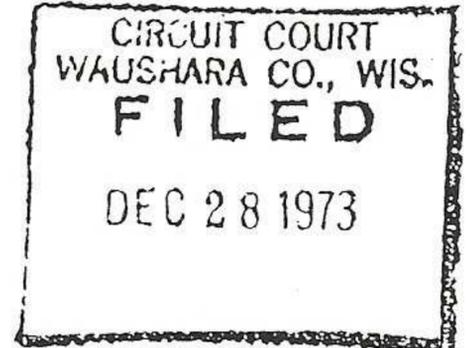


THE UNIVERSITY OF WISCONSIN
MEDICAL SCHOOL
1300 UNIVERSITY AVENUE
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DEPARTMENT OF PSYCHIATRY

December 6, 1973



The Honorable Robert H. Gollmar
Reserve Judge, Criminal Court Branches
2nd Judicial Circuit, Room 409
Courthouse
Milwaukee, Wisconsin 53233

Re: State of Wisconsin vs.
Edward Gein

Dear Judge Gollmar:

Pursuant to your court order of February 26, 1973, Edward Gein, a Central State Hospital patient and petitioner for release, was examined at the hospital on March 13 and 31, April 14 and 27, and June 30, 1973 by Dr. Roberts and on March 3, 17 and 31 and June 2, 19 and 30, 1973 by Dr. Arndt. Available to us were psychological test results by Dr. Burton Mickelson performed on March 19, 1973, preliminary hearing and trial transcripts and Central State Hospital records. The examination was conducted to evaluate the present mental condition of Mr. Gein in relation to possible discharge or release from Central State Hospital without danger to himself or others.

Edward Gein, born August 28, 1906, now age 66, was born in La Crosse, Wisconsin to George Gein, 31, and Augusta Loehrke Gein, 25, as the younger of two sons. A maternal uncle, Henry Loehrke, continues to reside in Grantsburg. Both parents died when Mr. Gein was in his thirties. Father was born in Coon Valley, Wisconsin and was reared after age three by Scotch maternal grandparents after his parents and sisters drowned in a flood. Following his elementary school education he began work shoeing horses as a blacksmith's helper. He later worked in La Crosse where he met his future wife. Following marriage when he was 24 and she 18, their two sons were born in La Crosse two and seven years later. The family was limited in economic ability as father worked selling insurance, in a tannery and at the city power house. The marriage and family relationships are described as normal -- "There's no perfect marriage". In 1913 father bought and worked a dairy farm, with added crop cultivation, in the lowlands near Camp Douglas. He traded it for a similar type farm near Plainfield in 1914 and Edward Gein spent the rest of childhood and adulthood from age eight on at that site. Father is described in the hospital social history as a heavy drinker, easily angered when influenced by alcohol and abusive to his sons. It is also reported father didn't like to work. The two statements are now denied by Mr. Gein who calls father hard working. Father was a cardiac invalid 1-1/2 years before his 1940 death at age 65.

Mother, of German ancestry, was the family decision maker, dominant parent and at times she did the family farm work. Mother's parents were immigrants from Germany who married before coming to the U.S. Maternal grandfather farmed just outside La Crosse. Mother was a plump pleasant person who spoke both German and English at home. Mr. Gein felt very close to her and accepted her guidance and demands. He described her as thrifty, hard working and a moralistic religious person. She could make others feel better and enjoyed life. She treated her two sons equally and taught them to behave properly. She had heart problems for a number of years before having a stroke. She remained non-complaining with gradual recovery at home after initial hospitalization. Mr. Gein provided nursing care and ambulation assistance for her. A second stroke a few weeks after her oldest son's death and shortly after an argument with a neighbor proved fatal at age 64 in 1945.

His brother, Henry George Gein, was born in 1901, five years before Edward's arrival. He had an elementary school education before working as a farmer. He remained a bachelor and was one of several male family members on mother's side of the family who never married. As children the two boys had average closeness considering their age difference. Both enjoyed trout fishing with father. In addition to work on the family farm Henry worked for neighboring farmers, for a road building contractor and a power and light utility company setting poles and stringing wires to supplement family income. With some pride Edward speaks of his brother's ability to direct and control a crew of Jamaican farm workers as their foreman during World War II. Others had greater difficulty in that task.

From the description, mother was the strong force in this family of three men. Father's death in 1940 removed a source of family problem but father was also a central pillar of the family unit. Henry then died in 1944 at 43 in a marsh fire. The involvement of Edward in this blaze with psychological "What if I had ___?" guilt implications and the death of mother not too long after left Edward very isolated and deeply emotionally traumatized. The two men were burning off a marsh and during a temporary absence of Edward the blaze got out of control asphyxiating his brother. It was several hours before his body was found by a search party with Edward guiding them to the site. This event is tearfully related as "the start of my trouble".

This family was economically limited throughout recalled childhood and adulthood. Edward refers to them as average and normal though the description compiled between hospital records and his comments paints it differently. Marital unhappiness by mother over her husband's alcohol consumption, marginal work and abusiveness might have caused divorce were it not for her religious beliefs. She assumed the parenting role plus a heavy family work role on the farm with her sons. They were isolated non-conformists with neighbors, related to mother's quarrelsome nature and intense religious beliefs with moralistic preachiness. Edward is defensive about that view of his family. A childhood recall includes fear of blood with inability to watch slaughtered animals being "dressed out". He was self taught to play three family musical instruments at home -- harmonica (father's), accordion (mother's) and violin (uncle's). He had filled in as a substitute musician on the violin and accordion playing at

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barn dances. This activity largely ceased after mother's death as he was "too busy".

He began school in La Crosse where he attended 1-2 years and learned to read. No school was available in Juneau County so there was an educational lapse until they moved to Waushara County. He completed the rest of his elementary education in a country school of about 12 students by age 16-17 in two different one-room schools not far from home. Relations with peers and teachers was satisfactory but there was very slight interest in girl classmates. One teacher gave dancing lessons after school. He regrets his limited formal education. He was an average student and no extracurricular activities were available. He liked to read on a wide range of subjects.

Mr. Gein remained single, virginal and little involved in heterosexual relationships throughout his life. Early sexual information came from mother as that provided by peers was regarded as uncouth. Premarital sexual abstinence was stressed and the non-marital relationships of others was considered immoral, even in need of punishment. Any female with whom he would relate needed mother's approval. He was teased about his bachelorhood by other men. He "never found the right girl" was the stated reason for staying single.

His basic vocation was farming, both self-employed and working for others for limited income. Until the invalidism and later death of nuclear family members he shared work on the family farm with them. Thereafter he entered a period of mental depression, the work became more difficult for him and progressively the farm itself deteriorated. From this 1945-47 period on he gradually sold off the livestock and increasingly worked more for others. He had earlier sold equipment to pay for his mother's funeral expenses and then bought it back at a higher price when he was able to afford it. After 1945 the farm began to reseed to woodland and he made half hearted efforts to sell it in order to move to the South after visiting other relatives. He did odd jobs, baby sitting, worked as a farm hand and was employed by the town of Plainfield part-time (1945-47). Avocational pleasures were skiing, archery, sports observation, listening to music, playing musical instruments (violin-accordion-harmonica), movies (western and adventure), reading (historical, anthropological, adventure), square dances (observe or musician but too self-conscious to dance) and hunting. Most striking through the 1945-47 period was his social isolation that influenced all other spheres of his life.

He was rejected for military service in 1942 (then age 36). He is Lutheran by religious background -- synod unknown. Much religious teaching from mother was strict and contrary to the more relaxed community religious pattern. The family attended church little after leaving La Crosse early in Edward's childhood. After mother's death he found it hard to reconcile her suffering with a loving God but he later returned to his religious belief though without affiliation with any religious institution.

Mr. Gein, a 150 pound, 67 inch tall gray haired man who appears in good health and states that he is considering his 66 years. He has a congenital

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skin fold of his left eye but is otherwise not distinctive in appearance. Past surgical procedures include a lymph node biopsy (chronic granulomatous lymphadenitis of undetermined etiology) and right inguinal herniorrhaphy. He has some limitation of motion in his right shoulder. Prior use of alcohol was moderate. The granuloma of his lymph nodes was considered as a possible Boeck's sarcoid. He took INH in 1969-70 for a diffuse pulmonary granularity with adenopathy. His hospital diagnosis since 1957 has been chronic schizophrenia.

Mr. Gein minimizes his involvement in alleged behaviors from 1947 on through the next decade by declaring amnesia for much of them. When pressed as to events reported by others he first remains non-committal but doesn't deny them, merely asserting he can't remember. As the interviews progress his recall improves but he then states he is unclear as to what is remembered from personal experience and what he was told by others. He also states his effective therapy aided his suppression of recall of past behavior and that he doesn't desire to increase his recall of abhorred experiences. At times he becomes quite legalistic in explaining why someone else must have committed the crimes rather than himself -- "How could I have started the truck without a switch key? Why didn't the deputy sheriff find her body the first time he came to the house? It can't be a mask if it couldn't be put on". He then reasons some other persons committed these behaviors, not himself -- such as the man who lived across the road. If pressed further, he finally says it must be me if others say I did it. Defensively he states that if he were to recall these happenings it would mean he perpetrated them and therefore he was not mentally ill at the time.

He dates the onset of severe pressures in his life to about 1944. He believes varied events would have been avoided if he had married, was better treated by neighbors or had sold the farm and left the area. The greatest life crisis was his mother's death. He was very lonely after her death and tried to arouse her from death by willpower. He was very isolated from his neighbors and other social contacts. Anger without direct expression dominated his relationship with his neighbors since he believed his family had treated them too well without reciprocal positive responses. Loans of wagons and farm machinery to others were one sided and the same pattern continued after his parents deaths. Neighbors failed to repay debts on money he loaned to them and they engaged in "crooked" behavior by cheating the government. Through 1944-47 he spent his time reading a great deal -- historical action stories, of Nazi atrocities including lamp shade tattoos found at a German concentration camp ordered by a woman and South Sea island ceremonies. He learned of head hunters and cannibals as well as of those who shrink heads and make death masks. One recalled adventure focused on a man who killed another for his yacht before he himself was captured and killed by head hunters. His reading about events in Germany included the making of lamp shades from human skin and of exhumation of bodies in Wisconsin and by an "exhumation club" in England. Such reading seemed a kind of justification for reliving those experiences himself.

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He denies recall of any exhumation and dissection of bodies. When pressed as to his earlier report of this he says "I must have done it if I said I did but I don't remember it". Earlier reporting to other physicians as described in the hospital record and court transcript included the following paraphrased reporting. Mr. Gein reportedly was motivated by hostility, diffuse sexual need and need for maternal comfort in 1947 at the time he read an obituary announcement of a middle aged woman he had known. She was obese like his mother. He felt a sense of excitement and pressure as though forced into action by an evil spirit in a preordained way as he exhumed her body the night after the funeral. Other emotions were guilt, anxiety and shame. After some body parts were removed for preservation, the body was returned to the grave. This activity was repeated about nine times later with female bodies, of varied ages. He had known most of these persons before their burial in the three cemeteries in the Plainfield, Wisconsin area. Though sexual excitement was involved there was no sexual behavior with the bodies which smelled offensively. Skin from heads with long hair and sexual organs (breasts and genitalia) were especially preserved in cellophane bags. No human flesh was eaten nor was any body chosen because of its physical attractiveness. He recalls words from Solomon in the Bible about consumption of flesh and wondered if it referred to cannibalism. The actions sound compulsive in their ritualistic destructive handling. He denies use of special instruments or possession of anatomical books to aid in this process. The behaviors were apparently comforting, relieving of internal pressures and done with a kind of reverence as he handled the objects sought as a type of trophy. His needs later changed and the activity reportedly ceased after 1952. His marked isolation prevented discovery of this activity though he retained the objects in his home through succeeding years.

Another event with which he is linked in the records, though never charged as a crime, is the murder of Mary Hogan which he denied at this time to Dr. Roberts. She was a tavern keeper in Pine Grove, Portage County when reportedly killed in December, 1954. Mr. Gein knew her from stopping in her tavern but suspects other men must have caused the death of this foul-tongued woman. He acknowledges physical evidence caused him to be suspected of her death and hints her death may have been no great loss. To Drs. Arndt and Mickelson he stated that he had killed Mary Hogan.

One crime he admits is causing the death of Mrs. Bernice Worden by gunshot wound on Saturday, November 16, 1957. A motivating factor cited is her need for punishment with himself as a preordained divine instrument in this behavior. She took her husband from a married woman who suicided by inhalation of chloroform. She allegedly broke up another marriage earlier. Mr. Gein viewed her husband's death by a blood dyscrasia as his just reward. He also describes as motivating factors in his behavior his isolation and failure of neighbors to treat him fairly, such as repaying their debts to him. Religious justification, isolation and anger built on rejection stand out as reasons behind his action though he believes it may have been an accidental shooting, saying he was not familiar with that specific gun's action.

That November, 1957 day started out in an ordinary way as he arose about 6:00 A.M., prepared and ate breakfast and washed the dishes. It was a rainy day on which he drove his car 6-1/2 miles to Plainfield. He purchased kerosene,

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placed in his container, for use in his kerosene stove and lamps, from a gas station at the edge of town. He then went to the Worden Hardware Store to purchase antifreeze to be placed in a glass container he had taken with him. He had obtained two gallons of antifreeze from them one week earlier. The store, previously owned by her husband and father, was managed by Mrs. Worden and her son, Frank. Mr. Gein had known her a long time and teased her one or two years earlier about going out roller skating with her. He denied knowing her well, thinking about her or having any sexual interest in her. Most of his shopping for items of the type sold in that store was done in Wisconsin Rapids. He paid for his purchase and took it to his car. He then returned to the store to look at a rifle he considered purchasing, in trade for one of his own. After asking permission and receiving it from her, he removed the rifle from under the chain holding it in a display rack. Mrs. Worden was standing one aisle away with her back to him watching deer hunters across the street bring in a deer killed on the first day of the hunting season. He took a shell from his pocket and placed it in the gun. As he checked the slide action of the gun, different than the bolt action to which he was accustomed, the weapon discharged. The victim fell to the floor dead, shot through the head. He doesn't recall aiming the gun. He agitatedly went to her and touched her. He recalls dragging her body through the store to place it in her pickup truck in the rear. Further recall for several hours is now denied. He earlier, based on available records, told how he drove the truck away, exchanged it for his car in which he took the body home and dissected it. The body was found decapitated, disembowled and strung up by the heels in the rear of his farm house that evening. He recalls talking with deer hunters at home before conversing with an adolescent neighbor girl, Darlene Hill, who stopped by with her two younger brothers. He responded to their father's request relayed by Darlene for aid with their car trouble by getting a car battery for him at the Gamble Store in Plainfield. He returned to the Hill residence in W. Plainfield for lunch and was apprehended there for questioning about the murder before being taken to jail in Wautoma.

He was charged with first degree murder and returned to Central State Hospital in January, 1958 as incompetent to stand trial after a six week examination there. He felt abused in the initial questioning and the evaluation. His first request was for prison incarceration rather than staying in the hospital but he is now reconciled to the latter. An electroencephalogram was normal as he began his hospital stay. During this time his home was burned in the Spring of 1958 and his property sold, leaving him only future funeral expenses with the balance of the money retained by the state. Initially he was passive and developed somatic symptoms in the hospital but these subsided after one year. He worked several years as a hospital orderly, caring for other patients, and several more as an occupational therapy aide. In the latter position he did rug weaving, then lapidary and jewelry making. After ten years he returned to court as competent to stand trial and was tried later that year. In November, 1968 he was found not guilty by reason of insanity and returned to the hospital where he has remained since. He has worked successively at office cleaning, masonry and carpentry work. He is not receiving tranquilizing medication and adjusts well on one of the highest privilege hospital wards. He works

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daily, attends church, is polite and conforming. The hospital treatment has been satisfactory and fair, he states, but he now desires to live outside the institution. Earlier plans to go to Australia are less discussed at this time. He has also talked of manufacturing some devices he hopes to invent, such as odor removing devices by special venting in toilets. He has no visitors and little mail. One concern about the hospital is his belief that formerly strict discipline has become too lax.

Mr. Gein has now been evaluated by a number of mental health professionals over the past 15 years and spent nearly all of that time in a mental hospital. As a consequence his present appearance to the examiners is highly colored by that fact and by his desire to appear in good health, non-dangerous and ready to be discharged by the court. He is now a self-contained, quiet reserved man who desires to reveal little of himself. Thus, the examiner must use inference and observation in making the evaluation.

Mr. Gein is pleasant but wary on initial contact. He acknowledges understanding the nature of the evaluation, its purpose and its non-confidential nature. His appearance is average, not bizarre or striking -- about what would be expected for a man in his sixties who spent his life as a central Wisconsin farmer in an isolated manner. There is nothing superficially about him to mark him as unusual. His step is active, his movements coordinated, his mind alert, his speech and manner pleasant but overcontrolled. He enjoys watching women walk and stares at them making friendly, superficial, favorable comments to or about them to others currently near him. He readily discusses his activity of the day, the state of the weather and attempts to always keep the conversation focused on appropriate ideas and feelings. This is his overt appearance. Mr. Gein is a man of average intelligence, whose formal education limitations have reduced full development of his potentials. Similarly his pattern of restricting his life experience, past and present in a psychological sense, limit his intellectual development, as does his emotional disturbance. Considering the foregoing he has an average fund of general information. His intelligence was measured in 1957 on WAIS test as an I.Q. of 99 full scale, 89 performance scale and 106 verbal. Present intelligence appears similar to that measured level.

He is oriented as to time, place and person and his judgement for handling abstract theoretical situations, detached from the events, is appropriate. That is, in response to questioning about an appropriate response to a given life situation, he reports what most others would do. He can also generalize in his thinking from the specific detailed elements to demonstrate his capacity for abstract thinking. His reports of memory vary widely -- from precise detail, repetitively reported in the same manner, of events occurring much earlier in his life, to accurate rapid recital of current activities and experiences and to gross gaps in information now unrecalled but previously reported. It is clear on talking with him that his recall for the latter events is highly dependent on his desire to share it, on his view of a correct relationship with the examiner, on his unwillingness to see himself objectively in relation to the information and on possible consequences of sharing it. Thus his memory appears uneven and variable in his reporting and these factors appear to account

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for better recall at one time than another. His desire to be amnesic is evident, but we believe it is partly feigned, partly a psychological defensive process and somewhat caused by the limits on his memory by limited recording and erosion by the passage of time when confronted by examiners he reveals anger, a display of temper and projects some hostility. Recent memory is good. The pattern described was noted in 1957 but is more pronounced now. His vocabulary is good. No psychological test or clinical findings indicate evidence of organic brain difficulty other than usual expected decrements with aging.

Mr. Gein desires to see himself as confirming, likeable, creative, just and of average to above average ability as a person. It has been hard for him to match that with his life experience, his treatment by others and his limited interpersonal and vocational successes. He functioned adequately, but with limited risk-taking and success, through 38 years with his mother. His life had structure and meaning which collapsed with the successive losses of father, brother and mother. Though not close emotionally as conventionally viewed nonetheless the ties of each to the other were inextricably supporting and sustaining while the outer world of people were seen as hostile, selfish and unrewarding. It was into the latter environment he was fully thrust in 1945 with resultant deterioration of his farming capability, with no person to be loved or loved by, interested or interested in, and as victim of his own psychological processes and fantasies.

He can sustain conventional, consensually accepted, patterns of thinking as long as he focuses on this and is not under much stress. As stress increases his thinking becomes tangential to an initial central idea and then alogical. The greater the emotional stimulus causing this stress the less he remains in contact with a reality shared by others. In such situations it requires increasing constant conscious effort to keep in contact with reality and to conform with other's expectations. One means of handling this is through an active fantasy life. This was especially noted in 1957 and less since then. A female identification was prominent then, with earlier ideas of transsexual surgical change on which he never followed through. The related behaviors with female body parts which were preserved has not been fully explained since he doesn't discuss this now. In fantasy he is more capable than in life -- an inventor for example.

His thinking processes have been unusual at varied times -- seeing faces in the leaves on the ground at the hospital, having visions of life before he was born, and belief in his power to raise others from the dead, particularly his mother. The year or two after her death was very traumatic, with severe depression, withdrawal, nightmares, hypnogogic hallucinations of mother's voice and social isolation. He felt things about him were unreal and that life events, including his later behavior, was preordained to happen. It is part of a basic belief in superstition. He then developed reasons why events did occur, such as justification on grounds of justice, the action of uncontrollable outside forces or religious punishment. Sexual preoccupation, quite in contrast with his basically asexual interpersonal activity, flourished as a replacement for fulfillment of social and personal needs.

Under stress his concentration becomes impaired, his speech more rambling, the organization of his ideas less adequate and his conversation more subjectively oriented rather than shared with his listener. In these situations he is less able to effectively use his intelligence and maintain desired controls over thinking and behavior. All of these are relative deficits. At no time in the interview nor in known behavior since 1957 has he been markedly out of control or substantially out of contact with reality. Yet the tendency for such impairment persists and it is seen in small amounts depending on circumstances and perceived stresses.

Emotionally the most prominent features are his insecurity, passive dependence, self-doubt, tension, anger, suspicion and a degree of suggestibility. For the most part he is emotionally colorless with some blunting of his emotional responses. This is countered by his desire to please others and be accepted by them. It makes him a somewhat unreliable historian for he may be overly agreeable to suggested responses presented by an examiner. On the other hand his self-protective needs counter this and keep him from disclosing himself, his ideas and emotions, as much as do most persons. It makes for interesting contradictions in his appearance. Another way the same phenomenon is manifest is his naivete and social inexperience that were so prominent in 1957 are now countered by his institution-wise appearance fifteen years later. Yet he remains quite socially inexperienced in many life areas in terms of depth relationships. As a result he is poorly aware of the impact of his responses and behavior on others and poorly empathetic with them. It isn't clear that he has ever known the sustaining impact of a continuing loving relationship with anyone in the manner and depth known to most. This creates a void which renders him fearful and uncertain in social relationships with a tendency to let others take the initiative. This is covered by some awareness of socially appropriate themes on which he talks quite well in a superficial manner.

Since our self-learning comes through a process of relating to others and seeing ourselves reflected through them it means Mr. Gein has a low level of self-awareness, self-understanding and even self-identity. He seeks this through dependence on others who will like him. Early life experience brought him closer to mother than father but her judgemental tendencies apparently kept her at some distance from all persons. Not knowing himself better renders Mr. Gein a victim of his own behavior since under novel or stressful situations his behavior may appear erratic and unpredictable even to himself. He thus lacks a well developed ego and is immature despite his chronological age and experience.

He is least comfortable and self-aware in his relationships with women. He lacks assurance of a vital sense of masculinity and has been unable to ever relate to women in a usual heterosexual manner. Despite this his needs for acceptance and love are evident and his avoidance of such relationships leaves him emotionally frustrated despite efforts to suppress this. He lives with women only in a fantasied relationship with some preoccupation about this. It was especially prominent during the period following mother's death and the

few years thereafter. The lack of such relationships and the need for but absence of such heterosexual social experience has caused Mr. Gein to be unable to sort out the differences in maternal, peer, social, affectionate and sexual relationships between a male and female. He thus has been unable to meet usual types of needs in the manner available to most persons.

With his low level of self-awareness he has a low level of faith and trust in others. Trust usually begins to develop early in life but it remains a deficit for Mr. Gein. He is sufficiently apart emotionally from others that he believes life events just happen to him. In some sense they do, for he is victimized by his own responses beyond a level of self-awareness or volitional choice when under enough stress. He is also sufficiently passive that he permits others to lead, in social and interpersonal activity. His life experience has led him to be superstitious and to believe in pre-ordained pre-determined magical events for he regards much that has happened to him as out of his own self-control. He finds it hard to believe or accept that past behaviors he knows as his own and are reported to him by others are actually his. They seem to be the acts of others or caused by unknown forces acting on him and in him. He thus denies, rationalizes and minimizes such events. He tries hard to suppress knowledge of them and repeatedly states it is important for his therapy that he do so. It is part of his pattern of continuing low self-awareness and serves to keep his anxiety level reduced and overly self-controlled and self-contained.

He focuses more on specific minor details than on a total experience and can distort, as more significant aspects of given experiences are ignored or not perceived. None of these traits are able to keep the emotions of guilt and anxiety out of Mr. Gein's self-awareness. He is near tears on occasion related to his guilt and self-deprecation over past behaviors that he can scarcely acknowledge as his own as he states, "I must have done it if they say so". His tension is also evident and rises to anger on some occasions. But most of the time his emotions are subdued, constricted and blunted and he appears to live in his present environmental situation with himself and with others in relative emotional comfort maintained only by energy expended to repress primitive feelings and ideas threatening periodically to break into conscious awareness.

Another device used to maintain psychological comfort is projection of his own emotions, ideas and behavior onto others. He attributes much of the ideas and feelings that go on inside himself. Thus he sees others as angry, hurtful, unloving and destructive wherein this is his own reflected mirrored image that he sees as belonging to others. It is easy for this to happen since he doesn't know himself well and lives with a fantasied idea of self-identity which is larger than life. How much and how often he distorts his thinking in these ways and becomes angry depends on how much he is under stress. The tendency to mistrust others and to distort their reaction to him is constant. His ever present underlying anger is usually overcontrolled and well controlled. However, he is always capable of provoking anger in other persons. The entire pattern is called paranoid thinking. When paranoid he considers himself as very self-important. He thinks others persecute him

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because he is so powerful, that they try to influence him and that he can cause particular behaviors in others. This unreality in his thinking distorts what objectively occurs around him.

In the interviews there were several outbursts of anger when he felt pushed by the examiner. The response considerably exceeded the stimulus and provided an opportunity to observe Mr. Gein's continued lowered threshold for activating distortion of other's responses, and a resultant use of projection followed by overt anger. It is believed that in a less controlled situation than the hospital his options for maintaining emotional control would be diminished. Social withdrawal and isolation is one such pattern which leaves him prey to his own thoughts and emotional processes. Another tension reducing device is conversion of anxiety to bodily symptoms. At times in the hospital he has complained of blurred vision, headaches, dizziness and pains in his neck and abdomen. This has not been prominent in recent years but psychosomatic symptoms early in his hospital stay and later a poorly defined pulmonary illness may be manifestations of this pattern. During an earlier time he also had a severe depression and later engaged in bizarre aggressive behaviors. Thus he has several alternative directions for control of tension, with some of the patterns most useful after marked stress and others at lower stress levels.

The clinical diagnosis rendered earlier in hospitalization has been chronic schizophrenia. Its originating date was 1947, and perhaps earlier. Whether the depression in 1945 was part of the same illness is hard to be certain in retrospect but it may have been. The symptoms were moderate in intensity in 1957, much lessened but present in 1968 and about the same in 1973 as in 1968.

Mr. Gein's chronic schizophrenic illness continues despite his extended hospital treatment. Within the supportive structure of the hospital he remains in good control of his behavior. His psychological appearance continues with a range of discrepant features -- child-like openness, naivete, directness contrasted with wariness, evasion, suspicion; good intellectual capability despite the limits of formal education and life experience; suggestibility but cautious cooperative responsiveness; emotional blunting and bursts of anger, tension, sadness and humor. Assets include some of these elements plus 1) the passage of considerable time since he last exhibited either overt psychosis or bizarre destructive behavior, 2) his desire for conformity and 3) the hospital treatment he has received. He is mentally ill but not overtly psychotic at this time. Liabilities are the presence of continued illness which earlier flared into overt psychosis and his bizarre behavior; persistent sexual preoccupation; use of projection and hostility which are adequately controlled in the hospital; the added stresses of community life were he to be released, with adjustments needed to 1) less supervision in a less structured hospital life, 2) vocational retirement, 3) hostility and possible ridicule of persons in the community; aging processes; asocial life style (both protective and stressful). He cannot face his own past behavior as he denies its recall in a manner suggesting that he can't face it. This means his past behavior continues as a problem

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for him. While not discussing it is useful in maintaining psychological comfort, it makes release consideration more hazardous than would otherwise be true.

The risks of dangerousness presented by his illness are very low under conditions of minimal hospital supervision. These predictions are always very difficult and the tendency is to overpredict such risks. With his past history it is not possible to say there is no risk of dangerous behavior, indeed it remains higher than the average person in the community and will always be so. Yet balancing all the factors involved this risk is very low and not such as to necessitate a continued residence in a maximum security institution. The difficulty with this consideration in the case of Mr. Gein is his high visibility and possible major consequences if he should conceivably engage in a repetition of earlier bizarre and destructive behaviors though the possibility of this while under structured supervision is remote.

In summary, Mr. Gein has partially recovered from the psychosis he had when entering the hospital. He is not "cured" since such an illness leaves residuals which continue though they are not significantly disabling in his daily living. Were he not known by history only a very thorough mental health examination would elicit these difficulties. He is desirous of leaving the present hospital and slightly knowledgeable of problems that may be faced outside the institution though it is hard for him to emotionally comprehend them. It is suggested to the court that a plan for a gradual decrease in institutional control be initiated working toward future hospital release. This could include transfer to one of the other state hospitals where less control would be maintained. In that setting added planning toward later release could be developed. It is hard to yet see full discharge without some continuing court directed supervision of Mr. Gein as in his best interest and safety or that of the community.

Thank you for the opportunity of examining Mr. Gein. We will be pleased to answer other questions in this matter as desired by the court.

Sincerely yours,

Leigh M. Roberts, M.D.
Leigh M. Roberts, M.D.
Professor & Acting Chairman

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