

KANT'S CONCEPT OF HEALTH AS AN INTERACTION OF MIND AND BODY

KANTOV KONCEPT ZDRAVLJA KAO INTERAKCIJA UMA I TIJELA

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SUMMARY

This paper examines Kant's concept of health under four aspects. Part 1: Kant speaks of health primarily in terms of common sense (gesunder Menschenverstand) and healthy reason (gesunde Vernunft). The concept of health is, therefore, mainly an epistemological concept. Part 2: Health stands in the context of disease. For Kant, disease is always linked to a lack of cognitive capacity. Kant's thoughts on disease and health can be found above all in his late writings "Anthropology from a Pragmatic Point of View" (1798) and "The Conflict of the Faculties" (1798). The early work "Essay on the Maladies of the Head" (1764) and a speech on "On Philosophers' Medicine of the Body" (1786) should also be included. Since health is primarily in the context of cognition, mental illnesses are at the centre of Kant's work. Part 3: Kant repeatedly presents his own state of health as an example. When Kant wrote his own "dietetics" in response to Christoph Wilhelm Hufeland's "Macrobiotics or The Art of Prolonging Human Life", it became clear that the attainment of physical health is also linked to mental health. After all, we can speak of psychosomatics. Part 4: For Kant, the preservation of health is also the task of the government. This political dimension of health is evident in Kant's writings. This discovery of psychosomatics is part of a medical-historical context that originated with Kant, among others, and which has not yet been sufficiently researched.

Keywords: Kant, medicine, health, disease, psychosomatics

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INTRODUCTION

Immanuel Kant's interest in medicine manifests itself in different ways. He did not study medicine and did not write a monograph on medicine. However, there are numerous statements on medical topics in his works and his correspondence, especially with Markus Herz, Christian Garve, and Christoph Wilhelm Hufeland. His own physical and mental condition plays just as much a role as medical issues of the time. Kant does not develop a systematic or unambiguous concept of health in his philosophy, but essential aspects of health can be found in Kant's works, which are informative for a definition of health and his concept of medicine. All in all, Kant and medicine are topics that are still rarely treated in German research. Urban Wiesing and Heiner Klemme have conducted important studies on the subject (Klemme, 2020; Wiesing, 2008). A monograph on Kant and medicine by Hans Förstl was published in September 2024 (Förstl, 2024). In my paper, I will discuss Kant's concept of health under four aspects. As a result of this consideration, it can be stated that Kant's concept of health implies essential aspects of psychosomatics. Up to now, this aspect has hardly played a role in research. Only Reinhard Brandt speaks explicitly of psychosomatics against the background of a speech by Kant, which will be considered later in the text (Brandt, 1999a, p. 355). Heiner Klemme also emphasises the body-mind relationship in his essay (Klemme, 2020). Nicola Zambon (Zambon, 2021) examines the body-soul relationship in Kant's speech of 1768 (Brandt, 1999a) and places this in relation to moral philosophy.¹ These are some of the few examples that deal with the topic of body and soul in relation to Kant's discussion of medicine.

HEALTH AND UNDERSTANDING

Kant speaks of health in terms of common sense and sound or healthy reason. The concept of health is, therefore, first and foremost an epistemological concept. Thomas Schramme presents an important compilation of current international theories of disease.² He himself divides the concept of disease into epistemology, ontology, and axiology. Diseases are always also entities or concepts that are based

¹ "The thesis I will therefore be defending in this work is that Kant's philosophy of medicine is guided not only by a theoretical interest, but also – indeed, perhaps primarily – by a fundamentally practical one, linked to moral philosophy, and especially the doctrine of virtues" (Zambon, 2021, p. 34).

² Schramme's publication contains mainly American studies on the concept of disease. There are texts by H. Tristram Engelhardt, Jr., Christopher Boorse, K., Caroline Whitbeck, Lennart Nordenfelt, Jerome C. Wakefield, and Robert E. Kendell, among others (Schramme, 2012).

on epistemological questions.³ This theory is not based on Kant but is an example of how the concept of disease can be thought of in contemporary epistemological concepts. For Kant, common sense is a faculty of cognition, namely a practical faculty of cognition that produces a concrete result. In this sense, healthy means that people are bound to common sense. It is about a concrete application that a person carries out in a specific area and not about philosophical, a priori thinking. Common sense is a low level of cognition (Kant, 2006, p. 169).

It is the mind of a healthy person who has a natural capacity for judgement. Common sense appears in various contexts in Kant and is criticised as common sense for epistemological thinking and emphasised as indispensable for aesthetic judgement (Kant, 1987, p. 294). Robert Nehring dedicates his book to these forms and the critique of common sense (Nehring, 2010). Kant calls the scientist who deals with principles the *bright mind* (lat. *ingenium perspicax*) (Kant, 2006, p. 139). The person with common sense is thus focused on the concrete. This thought is expressed in the following quote:

But sound understanding can demonstrate its superiority only in regard to an object of experience, which consists not only in increasing knowledge *through* experience but also in enlarging experience itself; not, however, in a speculative, but merely in an empirical-practical respect. For in the speculative employment of the understanding, scientific principles *a priori* are required; however, in the empirical-practical employment of understanding there can also be experience, that is, judgements which are continually confirmed by trial and outcome. (Kant, 2006, p. 140)

The connection between common sense is also shown by the fact that Kant links mental illness with the *sensus privatus*. According to Kant, madness is a loss of common sense (Kant, 2006, p. 219). What all forms of madness have in common is the loss of common sense (lat. *sensus communis*), which is replaced by logical stubbornness (lat. *sensus privatus*). In this logical stubbornness (lat. *sensus privatus*), the person has perceptions and thoughts that are only for himself. Accordingly, he is distanced from common sense, which means he is mad. Kant criticises this state of affairs because it would no longer be possible to communicate rationally if we always had our own private ideas. However, a healthy mind is characterised by the fact that “we also restrain our understanding by the *understanding of others*, instead of *isolating* ourselves with our own understanding and judging *publicly* with our private representations, so to speak” (Kant, 2006, p. 219). Reason is always bound to general comprehensibility. The content must be communicable to others. If this is not the case, the intellect or the mind is ill. Kant

³ Schramme (2012, p. 9–40).

speaks of a disease of the mind, and this brings me to the second part, which I will call health and disease.

HEALTH AND DISEASE

Kant's thoughts on disease and health can be found above all in his late writings *Anthropology from a Pragmatic Point of View* (1798) and *The Conflict of the Faculties* (1798). Stefanie Buchenau presents an important study on medicine in the last-mentioned work. She shows Kant's different aspects of the therapeutic and practical confrontation with Hufeland's dietetics (Buchenau, 2019). The early work *Essay on the Maladies of the Head* (1764) and a speech on *On Philosophers' Medicine of the Body* (1786) are also relevant to this topic. Since, as mentioned above, health is primarily in the context of knowledge and cognition, mental illnesses are the focus of Kant's work. When Kant wrote his own dietetics in response to the work of the physician Christoph Wilhelm Hufeland, *The Art of Prolonging Human Life* (1797)⁴, it became clear that the attainment of physical health is also linked to mental health. After all, we can speak of psychosomatics. It was the neurologist and professor of psychiatry Johann Christian August Heinroth who first used the term "Psychosomatik" in 1818.⁵ The book by Alexa Geisthövel and Bettina Hitzer (Geisthövel & Hitzer, 2019) provides information on the history of psychosomatics and the historical development of psychosomatic medicine. This book gives an overview of the scientific significance and clinical importance of what is known as psychosomatics in the 20th century. The anthology by Heinz Böker, Paul Hoff, and Erich Seifritz (Böker, Hoff & Seifritz, 2019) is indispensable for the current understanding of psychosomatics. In addition to the historical change of this term, the various psychosomatic clinical pictures and associated physical effects are presented. This volume also contains studies on the legal and financial implications of psychosomatics. One of the co-founders of psychosomatic medicine in Germany was Karl Kuno Thure von Uexküll (1908–2004), whose book on psychosomatic medicine is still a standard work for current practice in updated editions (Uexküll, 2017). Uexküll was in favour of psychosomatic medicine being an integral part of all practical medical disciplines. He always spoke out against the separation of body and soul in medical practice and advocated an integrated medicine that encompasses the whole person and overcomes the mind-body dualism.

⁴ This book was published in the third edition (1805) and onwards under the title *Macrobiotics*.

⁵ Heinroth (1818, p. 49). For the first use of the term "Psychosomatik" by Heinroth, see also the text by Holger Steinberg (2018).

There is little research on Kant's thinking of "psychosomatics", so my approach is to explore psychosomatics in Kant's writings.⁶ Body and mind are always interrelated. Kant even goes so far as to say: "On the power of the mind to master its morbid feelings by a sheer resolution". This is the title of the third chapter in his work, *The Conflict of the Faculties*. This discovery of psychosomatics is part of a medical-historical context that originated with Kant, among others, and which has not yet been sufficiently researched. For a long time, Kant's statements on medicine and his lectures on anthropology and psychology were not at the centre of research on Kant, which focused primarily on the three *Critiques* and the associated theoretical, practical, and aesthetic problems. It was primarily with Reinhardt Brandt's research around 1999 that interest in Kant's anthropology and thus also the questions about the human being in connection with the mind-body relationship became more pronounced in Germany.⁷

We see that Kant's interest does not focus exclusively on physical health. Hufeland's medical book is particularly interesting to him because Hufeland presents dietetics for a man that treats him as a moral being. In this medical treatise, man is seen as a moral being who needs culture to strengthen his physical nature or remain healthy and live a long life. Kant follows Hufeland in showing how the mind can affect the body and also heal it.⁸ Kant finds examples of such a power of the mind in introspection. At the same time, this procedure causes him a certain discomfort. After all, Kant finds it deeply distasteful to bombard the reader with subjective impressions without any objective significance.

To want to entertain others with the inner history of the play of my thoughts, which has subjective importance (for me) but no objective importance (valid for everyone), would be presumptuous, and I could justly be blamed for it. But if this sort of introspection and what I found by it is something rather uncommon, which it is worthwhile for everyone to try though it must be pointed out to them, the nuisance of telling others about my private feelings can at least be excused. (Kant, 2012b, 7:98)

Kant thus expresses his personal feelings in the context of the matter, which here is the dietetic way of life. He reveals various practices to prevent a cold, for ex-

⁶ Andreas Heinz, an important contemporary psychiatrist, also ignores the aspect of psychosomatics in his study of Kant's theory of mental illness within Kant's *Anthropology* (Heinz, 2014, pp. 172–194).

⁷ Brandt's commentary on the speech *Über die Heilung des Körpers, soweit sie Sachen des Philosophen ist* (Brandt, 1999a) and his commentary on *Anthropology from a Pragmatic Point of View*, which contains important statements on mental illness (Brand, 1999b), led to a greater interest in Kant's statement on illness and opened up the topic of psychosomatics.

⁸ The German word for mind is *Gemüt*. This refers to the soul in the sense of *animus*.

ample. Kant's dietetics certainly seems antiquated and sometimes humorous today. One particular gem is Kant's description of his resolution to draw breath. When he had a cough or cold, he would draw air through his nose with his lips closed. This ultimately enabled him to fall asleep at night. Closing his mouth prevented the expulsion of air and suppressed the urge to cough by forming saliva and swallowing the liquid. The conclusion of Kant's detailed description of drawing breath with closed lips is that the power of the mind can lead to the alleviation of illness (Kant, 2012b, 7:110–112). Self-healing is, therefore, possible through intention. Of course, Kant notes in his writing that this procedure cannot apply to all illnesses.

Kant's preoccupation with medicine and illness is primarily focused on mental illness. Here, he even attempted a nosology or classification of diseases. He developed this as early as 1764 in the *Essay on the Maladies of the Head* (Kant, 2012a). In this text, Kant presents onomastics, i.e., a nomenclature of the ailments of the head. Not without irony, he remarks that doctors thought they had helped their patients by giving their illnesses a name. Imitating this fashion of doctors to a certain extent, Kant now sketches short onomastics of the infirmities of the head with an ironic undertone. In doing so, he not only presents clinical pictures of mental defects but also holds up a mirror to bourgeois society, including the medical profession, by first writing about infirmities of the head, which can be despised and ridiculed. Kant wittily and in a socially critical way recognises diseases of the head as diseases of civilisation. It is not uncommon to find fools and weak-minded people among well-mannered citizens. The second form of diseases of the head, which today are called psychoses, must be treated medically. At the end of our consideration of Kant's *Essay on the Maladies of the Head*, we should point out an astonishingly topical remark. When Kant enquires into the causes of mental illnesses and thus the infirmities of the cognitive power, he states the following:

I have also only paid attention to their appearances in the mind without wanting to scout out their roots, which may well lie in the body and indeed may have their main seat more in the intestines than in the brain, as the popular weekly journal that is generally well known under the name of *The Physician*, plausibly sets forth in its 150th, 151st, and 152nd issues. (Kant, 2012a, 2:270)

Kant is referring here to Johann August Unzer's weekly journal *Der Arzt*, in which the connection between digestion and mental illness is described. This comment on the relationship between body and soul or mind is a further concession to the effect of the physical on the mental state of the human being and, thus, to the possibility of a pathological disturbance of the power of cognition. In

a speech from 1786, Kant clearly expresses that health refers to both the mind and the body:

It must be ensured that a healthy mind is in a healthy body. In this inter-relation it is the business of physicians to help the sick mind by curing the body, but it is the business of philosophers to help the afflicted body by controlling the mind. (Kant, 2007, 15:939)

In the rest of the text, Kant recognises that the mind has the power to have a positive as well as a negative effect on the body. Kant even goes so far as to say that the power of imagination has an influence on the body. “And everyone knows how we can promote digestion by the emotions stirred in friendly but lively conversation, or by turning away from our meditations during dinner” (Kant, 2007, 15:940).

The mind can, therefore, support vital functions. The effects, which Kant understands as movements of the mind, have a particular effect on the body. The connection between mind and body is also reflected in the relationship between physician and philosopher, so that the two professions are intertwined in such a way that “the doctors’” business is to help the ailing mind by caring for the body; the philosophers’, to assist the afflicted body by a mental regimen (Kant, 2007, 15:940). This speech from 1786 is an important testimony to Kant’s recognition of psychosomatics. Mind and body are related to each other in a way that is also reflected in the actual practice of the professions of physician and philosopher and, thus, also in the relationship between the medical and philosophical faculties. If Kant is concerned with physical health, it is also against the background of his own experiences, which brings me to section III, which deals with Kant’s health.

KANT’S HEALTH

Kant’s endeavours for his own health also include the body and the soul and must, therefore, be seen in the context of the body-soul relationship. Kant even developed his own dietetics. His own health is particularly evident in his correspondence (especially with the physician Marcus Herz) and in writing *The Conflict of the Faculties* (1798). These deal primarily with Kant’s weak physical condition. He also speaks of frequent ailments that affect him. Above all, he began to suffer from age-related ailments and shortly before his death, a few months before his 80th birthday, he suffered a stroke. Hans-Joachim Schwarz has written an excellent book about Kant’s life crisis and his dietetic turnaround (Schwarz, 2019). It shows in detail the physical and, above all, psychological problems Kant was confronted with and how he was able to overcome them. The fact that Kant confessed to a form of hypochondria is expressed both in his letters and in the writing

Conflict of the Faculties. In this writing, he primarily comments on his own illness. Kant justifies this approach by stating that he was a philosopher and not a physician, leaving him with only self-observation and inner experience as a basis for judging illness or disease. In this sense, Kant consciously chooses the subjective point of view for his statements on illness. Kant writes about the dietary lifestyle that should enable him to stay or become healthy.⁹ He also describes various practices to prevent a cold. It is also about self-healing through self-control. Today, we would also speak of self-efficacy (German: *Selbstwirksamkeit*) at this point. In the *Conflict of the Faculties*, Kant even put forward the theory that his physical constitution was the cause of his hypochondria, which even triggered depressive moods.

I myself have a natural disposition to hypochondria because of my flat and narrow chest, which leaves little room for the movement of the heart and lungs; and in my earlier years this disposition made me almost weary of life. (Kant, 2012b, 7:104)

Kant goes on to describe how he countered this condition with the thought that the morbid state only affected his body, not his mind. Distractions through mental labour also helped. The physical anxiety remained, but by distracting his concentration from the feeling, he was able to counteract the hypochondria. Here, too, we can recognise a kind of self-healing through mental effort. However, self-healing does not succeed in every case, so physicians are needed for treatment. Hans Förstl analyses Kant's critical attitude to medicines in an essay. However, there is evidence that Kant consumed some remedies (e.g., *Chinarinde and Trummersche Pillen*) (Förstl, 2022).

Maintaining his own health was also part of Kant's lifestyle. For him, this was expressed in the realisation of a precise daily routine, which he adhered to meticulously. This is documented as follows: Getting up at 4.45 a.m. every day, lecturing at the university between 7 a.m. and 10 a.m., then working on his own writing, having lunch, including table talks, followed by a walk, resuming reading and writing, and going to bed at around 10 p.m. This discipline and routine were intended to promote physical and mental health. The ascetic lifestyle enabled Kant to work on his philosophical works in a disciplined manner. At the same time, Kant makes a disciplined lifestyle generally binding and even recognises an excessive amount of entertainment or distraction as a weakness of the mind (Kant, 2006, p. 206). When Kant writes about the feeling of pleasure and displeasure, as well as the capacity for desire, the self-management of pleasures, which should

⁹ An important aspect of the dietetic life is the observance of regular sleep. See the study by Matthias Leanza on Kant's own sleeping habits (Leanza, 2009).

be experienced in good measure and in reasonable harmony with society, plays a role. Excess or opulence should be avoided.

The art of good living is the due proportion of living well to sociability (thus, to living with taste). One sees from this that luxury is detrimental to the art of living, and the expression ‘he knows how to live’, when used of a wealthy or distinguished man, signifies the skillfulness of his choice in social enjoyment, which includes moderation (sobriety) in making pleasure mutually beneficial, and is calculated to last. (Kant, 2006, p. 250)

Food intake is one of the factors that should facilitate physical and mental health. It has already been noted above that Kant ate lunch in company. This dinner party, which Kant regularly organised in his house in Königsberg from 1786, is not only an expression of a social event but also evidence of Kant’s insight into the connection between body and soul. In addition to physical satisfaction, the mind is stimulated by the conversation.

When I manage a dinner party composed of nothing but men of taste (aesthetically united), in so far as they intend not merely to have a meal in common but to enjoy one other’s company (this is why their number cannot amount to many more than the number of graces), this little dinner party must have the purpose not only of physical satisfaction – which each guest can have by himself alone – but the social enjoyment, for which physical enjoyment must seem to be only the vehicle. That number is just enough to keep the conversation from slackening or the guests from dividing into separate small groups with those sitting next to them. (Kant, 2006, p. 278)

The dinner party was mainly attended by younger men from various disciplines. The fact that women were not present at his table is certainly a major shortcoming. Kant also comments on this in a footnote and fears that the presence of a lady may restrict the conversation or inhibit the men, leading to what we would call today an awkward silence that overtakes the dinner party (Kant, 2006, p. 278). However, Kant’s reflections on table society show how important social life was to him. The fact that health is always an expression of a socio-political aspect is also shown when Kant recognises health as a task of the government. This aspect is examined in the fourth and final paragraph.

HEALTH AS A GOVERNMENT MATTER

As a member of the medical faculty, the physician is not only committed to the health of the human body but also to legal requirements. Kant elaborates on this observation in his essay, *The Conflict of the Faculties*. Here, he shows the differences between the faculties of the university and describes their conflicts with

each other. This late treatise is the last work published by Kant himself. It is not a systematic, epistemological work but a popular writing that draws attention to an educational policy problem. In the university, there are the upper faculties, which include theology, law, and medicine. Furthermore, there is the philosophical faculty, primarily committed to the truth. This is not about usefulness, but the philosophical faculty can research and teach freely and without authority. The higher faculties, including the medical faculty, have to justify themselves to the government. The doctor is, therefore, always bound by legal requirements. It is, therefore, still relevant today what Kant stated as early as 1798: that the government has an interest in the health of the people.

But since the way physicians deal with the people's health must be of great interest to the government, it is entitled to supervise their dealings with the public through an assembly chosen from the businessmen of this faculty (practicing doctors) – *a board of public health* – and through medical regulations. (Kant, 2012b, 7:26)

Thus, the political dimension of medicine is also relevant in Kant's thinking, and the role of the state in health is repeatedly thematised by Kant. The preservation of health is a governmental matter, as Kant also demands in the *Conflict of the Faculties*. Kant also repeatedly criticised the relationship between government and medicine. The relationship between the state and medicine continues to be a topic in current politics in the course of various reforms, as well as in scientific publications. The anthology by Sigrid Graumann and Katrin Grüber provides a comprehensive overview of the various aspects and disciplines for a fair organisation of the healthcare system. Economic conditions and distributions play a special role here (Graumann & Grüber, 2004). The term "health policy" (German: *Gesundheitspolitik*) also bears witness to the connection between medicine and politics, already recognised by Kant and the associated goal that health policy reforms should always be in harmony with respect for patients' rights.¹⁰

Another political issue of the time was smallpox vaccination, which Kant discusses in his "Theory of Virtue" in the context of suicide. Kant asks whether smallpox vaccination was morally justified at all, as it could also have fatal side effects.

Anyone who decides to be vaccinated against smallpox puts his life in danger, even though he does it *in order to preserve his life*; and, insofar as he himself brings on the disease that endangers his life, he is in a far more doubtful situation, as far as the law of duty is concerned, than is the sailor,

¹⁰ A definition of this term and further literature can be found on the homepage of the German Federal Centre for Health Education (<https://leitbegriffe.bzga.de/alphabetisches-verzeichnis/gesundheitspolitik/>).

who at least does not arouse the storm to which he entrusts himself. Is smallpox inoculation, then, permitted? (Kant, 1996, p. 424)

Kant fails to provide a concrete answer here. There are other ambivalent statements that show that Kant did not take a clear position on vaccination in view of its side effects. However, it was clear to him that vaccination had to be prescribed by the government. Lambros Kordelas and Caspar Grond-Ginsbach analyse the passages in which Kant deals with smallpox vaccination and show the ethical implications that this had for Kant. They also describe the historical development of smallpox vaccination in the 18th century. The authors formulate the aim of this text as being to provide a systematic orientation aid for current controversies in medical ethics (Kordelas & Grond-Ginsbach, 2000). During the years of the global coronavirus pandemic, the public media and politicians repeatedly referred to Kant in order to legitimise or not legitimise vaccination against COVID-19. In 2022, German Health Minister Prof. Dr Karl Lauterbach campaigned for corona vaccination, referring to Kant's Categorical Imperative:

From my point of view, it can be assessed as follows: Anyone who refuses the vaccination offer is actually violating the moral precept of the categorical imperative as defined by Immanuel Kant. Such a refusal could never be the maxim of action for all of us. If we all refused to use the well-researched and low-side-effect vaccination to protect ourselves and others from death and serious illness, we would probably never be able to end the pandemic.¹¹

In an article in the newspaper *Die Welt*, however, Kant researcher Dieter Schönecker surmises that Kant would not have allowed himself to be vaccinated. Schönecker's arguments mainly centre on compulsory vaccination. Since, for Kant, this would be a duty of virtue and not a legal obligation, it is unlikely that Kant would have agreed to compulsory vaccination by the state. Moreover, Kant does not see vaccination in the context of protecting other people; rather, he sees vaccination as something that could benefit or harm his own life, as vaccination (then as now) also harbours considerable risks. Kant thus discusses smallpox vaccination exclusively in the context of the duty towards oneself. If it could injure or kill the self, then it is not permitted. The conclusion of Schönecker's considerations is, therefore, that Kant could not justify compulsory vaccination by the state (Schönecker, 2021).

¹¹ Lauterbach, 2022, January 13, translated by A. Sell

CONCLUSION

These four aspects form the core of Kant's concept of health. Health is linked to a healthy mind or common sense. A healthy common sense enables life in a community. If the mind is disturbed or ill, the individual is isolated and can no longer actively participate in social life. Kant says that man has the desire for a long life and health. This desire has its origin in the mind. A healthy lifestyle should ensure that this desire can be fulfilled. The importance of individual lifestyle behaviour for health is also relevant in contemporary medicine. In this sense, G. A. Fava also speaks of patients as 'health producers', as they can promote their own health through healthy behaviour (practising regular physical activity, not being overweight, following sound nutrition, getting adequate sleep, and refraining from smoking and substance abuse). This connection between individual activity and health ties in with Kant's dictum of living responsibly, even though Kant is not explicitly mentioned here. Fava also shows that psychosomatic medicine can play an important role in his illuminating essay, which also traces the developments of these medical methods in the USA in recent years (Fava, 2023).

However, it can also happen that a person feels healthy but is not healthy. The subjective feeling of health can be deceptive. Furthermore, Kant reports of friends who thought they were healthy but were ill (Kant, 2012b, 7:100). People cannot fulfil the desire for health on their own, but health is also linked to a form of publicity, so the political dimension of health is also addressed here. We thus find here the formulation of a preliminary form of a welfare state and a general health insurance scheme. Kant's comments on health are significant, as he assumes that body and mind influence each other. A healthy mind can have an effect on physical health, and the body can have an influence on the mind. This interaction is also reflected in the relationship between physician and philosopher. Both have different tasks, but their activities are also intertwined by the connection between body and mind: "[T]he doctor is qualified to treat the disordered mind by measures applied to the body; the philosopher, to treat the body through the influence of the mind" (Kant, 2007, 15:943).

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SAŽETAK

Ovaj rad ispituje Kantov koncept zdravlja s četiri stajališta. Prvi dio: Kant govori o zdravlju prvenstveno što se tiče zdravoga ljudskog razumijevanja (njem. *gesunder Menschenverstand*) i zdravog razuma (*gesunde Vernunft*). Koncept zdravlja je, dakle, uglavnom epistemološki pojam. Drugi dio: Zdravlje je u kontekstu bolesti. Za Kanta je bolest uvijek povezana s nedostatkom kognitivnih sposobnosti. Kantova razmišljanja o bolesti i zdravlju mogu se pronaći prije svega u njegovim kasnim spisima "Antropologija u pragmatičnom pogledu" (1798.) i "Spor fakulteta" (1798.). Treba uključiti i rani rad "Zapažanja o bolestima glave" (1764.) i govor "O medicini tijela za filozofe" (1786.). Budući da je zdravlje prvenstveno u kontekstu spoznaje, mentalne su bolesti u središtu Kantova djela. Treći dio: Kant uzastopno predstavlja svoje zdravstveno stanje kao primjer. Kada je Kant napisao vlastitu „dijetetiku“ kao odgovor na "Makrobiotiku ili umijeće produljenja ljudskog života" Christophu Wilhelmu Hufelanda, postalo je jasno da je postizanje tjelesnog zdravlja također povezano s mentalnim zdravljem. Uostalom, možemo govoriti o psihosomatici. Četvrti dio: Za Kanta je očuvanje zdravlja i zadatak vlade. Ta politička dimenzija zdravlja očita je u Kantovim spisima. Ovo otkriće psihosomatike dio je medicinsko-povijesnog konteksta koji između ostalog potječe od Kanta, a koji još uvijek nije dovoljno istražen.

Ključne riječi: Kant, medicina, zdravlje, bolest, psihosomatika