Thure von Uexküll 1908-2004

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Looking back in 2001, Thomas Sebeok (1920–2001) emphasized how important for the formation of contemporary biosemiotics had been the discussions that he, Giorgio Prodi (1929–1988) and Thure von Uexküll conducted in Freiburg in the 1970s (Sebeok 2001: 63–65). As one of these three main figures, Thure von Uexküll significantly contributed to the realignment of the semiotic threshold (i.e., the threshold below which genuine sign action cannot properly be said to take place) from the borderline between nature and culture to the borderline separating life from non-life — thus effectively making the study of living systems a study of semiosis (Anderson et al. 1984; 1990). His writings on the development of the main concepts of biosemiotics and on the interpretation of Jakob von Uexküll’s work in relation to thereof certainly qualify as biosemiotic classics. As a physician and philosopher, he developed a semiotic approach to medicine in general and to psychosomatic medicine in particular. As a semiotician, he renewed ties with the old roots of semiotics deriving (since Antiquity)

Fig. 1. Dr. honoris causa, University of Tartu, Dec. 1, 1994.

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from medical science. He died on September 29, 2004.\textsuperscript{3}

Thure von Uexküll was born in Heidelberg on March 15, 1908, as the elder son of Jakob von Uexküll. After his study of medicine (1928–1936) in Hamburg, München, Innsbruck and Rostock, and residency and internship Charité in Berlin (1936–1943), he became an assistant professor at the medical hospital at the University of Munich (1945–1952). Awarded a Rockefeller Grant, he worked in the USA from 1952–1953. From 1955 to 1965, he was Director of the Medical Outpatient Department at the University of Giessen, and from 1966 to 1977 served as the Director of the Department of Internal Medicine and Psychosomatics at the University of Ulm.

After his retirement in 1977 he lived in Freiburg as a Professor emeritus of internal medicine and psychosomatics at the University of Ulm. However, he stayed active in research, producing several books, lecturing in conferences in Germany and elsewhere, and remaining enthusiastically interested in new ideas and, until the last year of his life, was a member of the editorial board of \textit{Sign Systems Studies}.

\begin{figure}[h]
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\includegraphics[width=0.5\textwidth]{fig2.png}
\caption{In a summer seminar on biosemiotics, in Puhtu, Aug. 8, 1995.}
\end{figure}

In 1994, Thure von Uexküll was awarded an Honorary Doctorship from the University of Tartu in the field of semiotics and psychosomatic medicine (Fig. 1). Since his family comes from Estonia, he has had strong contacts there.

He spent many summers in Puhtu in the 1920s and 1930s at his family’s villa on the coast of the Baltic Sea, and was named Karl Kuno Thure after a former owner and designer of Puhtu, Karl Thure Helwig (father of grandmother of grandfather of Thure v. Uexküll).

During his lifetime, he had a clear influence upon both the Copenhagen and the Tartu schools groups of biosemiotics. In 1991, he attended the meeting “Biosemiotics and Biotechnology” in Denmark, and in September 1989, he visited Tartu to contribute to in a conference commemorating the 125th anniversary of Jakob von Uexküll. In the following years, he visited Estonia several times for biosemiotic seminars (Fig. 2), and both the Jakob von Uexküll Centre in Tartu (Magnus et al. 2004), and the Jakob von Uexküll-Archiv für Umweltforschung und Biosemiotik in Hamburg University (Rütting 2004) have been the recipients of Thure von Uexküll’s support.

Thure von Uexküll’s principal interests included internal medicine, psychosomatic medicine, philosophy, and semiotics. Besides his role as the leading thinker in the field of psychosomatic medicine, his impact on semiotics include major achievements in at least the following important areas (see also Sebeok 2001; Tiivel, Kull 1999):

(1) The analysis of fundamental questions of semiotics, including the semiotic interpretation of ‘self’ (e.g., Uexküll 1984; 1986b; 1992a; 1995); in which he constructed a theory of natural semiotic levels ranging from the cell which constitutes the lowest level (a “semiotic atom”) and progressing through the ascending semiotic levels of vegetative semiosis (phytosemiotics) and animal semiosis (zoosemiotics) to human sign systems such as language which allow for the capacity to represent absent objects and possible worlds (see Hoffmeyer 1998);

(2) The interpretation and development of Jakob von Uexküll’s approach; by publishing a compendium of his father’s works (J. v. Uexküll 1980) and writing extensive commentaries on them (Uexküll 1982a; 1987; 1992b; 1993b; 2004);

(3) The analysis of the relationships between semiotics and medicine; establishing a semiotic approach to psychosomatic medicine (Uexküll 1982b; 1986a); developing a theory of human integrated medicine (Uexküll 1994; Uexküll, Wesiack 1998) and of subjective anatomy (Uexküll, Fuchs 1997) — for, as Uexküll pointed out, medical practices tend to focus myopically on the indexical aspects of disease, not seeing the importance of symbolic or iconic layers of reference (Uexküll 1999; see also Hoffmeyer 2001);

(4) The development of biosemiotics (including the work on endosemiotics); in Thure von Uexküll’s pioneering work on endosemiosis (1993, together with Geigges and Herrmann), the knowledge on sign transmission inside the organism was systematized, and microsemiosis defined as the sign processes occurring within the cell, and between its organelles (Uexküll 1988; 1993a; 1997a).
On the occasion of Thomas Sebeok’s 65th birthday in 1985 a *Festschrift* was produced to which Thure von Uexküll contributed an article in which he gave a semiotic interpretation of Jean Piaget’s theoretical work, connecting it at the same time to the work of his own father, Jakob von Uexküll. In this article, Uexküll first explains Piaget’s idea of *circularity* — i.e., that a stimulus presupposes a *need*, or “a readiness to react”, and that “the reflex can only be described as a circular event, in which a neutral phenomenon receives a property which it does not have independently from the reacting organ, and which it loses again after the completion of the reflex, i.e. with the cessation of the readiness to react” (Uexküll 1986b: 122).

Uexküll then makes the following remarkable observation: “The mere fact of the insoluble concatenation of stimulus and reaction has been, and still is today, to some extent overlooked through the prevailing dogma of the constant causal connection of reality — a graphic illustration of Einstein’s statement that *theory determines what can be observed*” (Uexküll 1986b: 122; our italics). What Uexküll wants us to see, we presume, is the direct parallel between epistemology and life, i.e. *needs co-determine stimuli in much the same way that theories co-determine observations*.

Clearly, the deeper goal running throughout all of Uexküll’s work was to uncover “the pattern which connects”, to quote another great thinker of his own generation, Gregory Bateson: “What pattern connects the crab to the lobster and the orchid to the primrose and all the four of them to me? And me to you? And all the six of us to the amoeba in one direction and to the backward schizophrenic in another?” (Bateson 1979: 8).


Specializing in medicine, and developing his father’s paths of thinking, Thure von Uexküll gave a theoretical basis to psychosomatic medicine. As Thomas A. Sebeok observed “no pillar of the medical establishment would more crisply and trenchantly discern and signal a crucial paradigm shift in, or a consistently comprehensive semiotic overview of, the intellectual landscape than Thure von Uexküll” (Sebeok 2001: 62).

*Lehrbuch der psychosomatischen Medizin*, the largest volume in its field, was edited by him, has been published in six editions (1979, 1981, 1986, 1990, 1996, 2003), and has appeared in English translation (1997c).
views on the relationship between medicine and biosemiotics may be illustrated by the following passage:

Medicine must replace its mechanical model for the body with a model of the living system. Living systems do not react in a mechanical way to mechanical inputs; rather, they transform inputs of the environment on their receptors into signs which inform the systems about the meaning of the environment for its needs. These signs enable the system to recognize and to assimilate the resources of the environment in order to maintain their autopoiesis as basis for their health. (Uexküll 1992: 455)

Similarly, the following quote comes from his “Medicine and semiotics”:

The ability to form symbols means that the direct connection between perceiving and operating is interrupted. The sensory signs lose their absolute unambiguity. They become as it were, un-homely (‘un-heimlich’). An inner world separates perception and operation, in which test operations are needed to find out whether one’s senses can be trusted or whether it is dangerous to follow their demands. (Uexküll 1986a: 213)

And, approaching medicine as a culturally related system, “If every culture produces its medicine, may it not be possible that every culture also produces its illnesses?” (Uexküll, Wesiack 1997: 36).

Thure von Uexküll was actively working until the last year of his life. In 1998, at the Seventh World Congress of Endocytobiology, a session was dedicated to his 90th birthday (Tiivel, Kull 1999). The opening talk was given by himself.

For the Uexküll-conference in Hamburg in January 2004, he sent a contribution noting that “Living beings do not discover their Umwelten. They have to construct it out of the signs found” (Uexküll 2004: 374). And throughout Thure von Uexküll’s life’s work as a physician and a semiotician, this is exactly what he did.

References


4 See Thure von Uexküll’s bibliography, e.g., at http://www.karl-koehle.de/archiv/uexkuell/publikation.html. We also thank Donald Favareau for his help in preparing this text.


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