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OEDIPAL DISTORTIONS IN SEVERE CHARACTER PATHOLOGIES

DEVELOPMENTAL AND THEORETICAL CONSIDERATIONS

BY THEODORE SHAPIRO, M.D.

The oedipus complex is presented as a universal, developmentally determined mental organization that incorporates pregenital factors in a new hierarchic structure. Psychoanalysis with adults who have a variety of disorders, including severe character pathology, demonstrates the role of the oedipus complex and its variants as a dominant theme in these disorders. Recent trends in psychoanalytic theory are reviewed to facilitate our understanding of the newer metapsychological formulations that tend to de-emphasize oedipal constellations. Specific issues of changing emphasis in drive theory, ego organization, developmental levels of anxiety, and the separation-individuation process are considered.

1. There is a possibly apocryphal story told about Freud following the publication of his observation that the oedipus complex was at the center of neurosogenesis and was a universal fantasy. A psychologist in the United States studied five- and six-year-old boys and girls and found statistically that, indeed, boys preferred their mothers and girls their fathers. He sent the results to Freud, who is said to have returned his commentary on a postcard: "*Typische Amerikanische Wissenschaft*" (typical American science).

2. At a meeting on Psychoanalysis, Scientific Method, and Philosophy, the discussion turned toward whether the oedipus complex is universal. Ernest Nagel and Sidney Hook (1959) indi-

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cated that if a theory is to be proven true, one must be capable of stating what empirical observations would negate it. The discussion faltered about this requirement of philosophers of science and the philosophical status of the oedipus complex remained problematic.

3. The concept of the oedipus complex and libido theory in general came under attack in the thirties and later (see, for instance, Kardiner, et al., 1945) when culturalists suggested that there was evidence that children reared in matrilinear and patrilinear cultures without nuclear families did not evidence an oedipus complex. Environmentalist errors continue to be echoed in studies such as that of Bieber, et al. (1962), in which reports of what homosexuals in therapy *say* about their parents are taken as *facts* about parents rather than psychic reality.

These points are presented only as historical referents to be discarded so that I may explicate what I believe the concept of the oedipus complex entails and define how it will be used in this paper.

It is a universal fantasy which is characteristic of human mental synthesis. It refers to an organizational feature of the mind which becomes developmentally possible by virtue of the fact that ontogenetically children begin gradually to sort out their world. Initially, they distinguish between pleasurable and unpleasurable memories, and then between passive and active aims in relation to drive satisfaction. They then establish object representations that are the source of the satisfactions, and, finally, they ascertain whether the sources are male or female—roughly, fathers or mothers. Thus children, in accord with their developing autonomous ego functions, build a cognitive-affective schema of ever-increasing complexity with respect to the number of features to be considered (good/bad; active/passive; me/not me; male/female).

Along with this suggested sequence of changing mental categorization there is a hierarchic reorganization at each level which supersedes prior stages (see, Kohlberg, 1966; Werner, 1940). In this sense, the oedipus complex is nuclear—i.e., it is

more than the sum of its parts and we can only infer its precursors as "through a glass seen darkly" because, although the new organization incorporates earlier experiences and phase-specific drive organization, these are now restructured. The oedipus complex also entails constructs such as castration anxiety, primal scene schemata (Edelheit, 1972) and the subsequent family romance fantasies. Moreover, the fantasy is largely unconscious, although varying derivatives emerge relatively undisguised when children are observed directly and the particular form of resolution has lasting effects on later life patterns. A further proviso is that the discovery of the oedipus complex is method bound; it can best be uncovered by the analytic method so that when we speak of it, we do not speak of how actual parents act toward children, but of how the child has internalized how the actual parents acted.

Freud's postcard, Hook's and Nagel's challenge, and the cultural issues may be looked at as problems of method, problems of philosophical status, and problems of environmental determination. I shall approach the topic of oedipal distortions in severe disorders of character with a brief historical survey of changes in psychoanalytic theory, which may then be used to simplify the problem.

In its beginnings, psychoanalysis depended solely upon the genetic proposition that character organization was the outcome of the vicissitudes of the drives (Freud, 1915). While this was a monophylectic theory, it included the possibility of describing object relatedness as preambivalent, ambivalent, and finally postambivalent. It also clearly ensconced the idea that the oedipus complex was at the center of the problem to be analyzed. Notions of fixation and regression were viewed as the determinants of later neurotic as well as characterological outcome. In 1914, after his confrontation with Jung, Freud had added the construct of distribution of cathexes between narcissistic investment of ego and object representations to account for the data of psychoses. Indeed, in his 1914 paper he suggested that what

had been learned about drives from the study of neuroses would be matched in understanding of the ego from the study of psychoses.

The later development of the structural theory (Freud, 1923) and, subsequently, ego psychology provided new opportunities to expand the scope of psychoanalytic application to include the possibility that faulty ego functions influence secondarily the form of conflict, just as conflict may influence autonomous ego functions. Ego psychology also provided the theoretical possibility that there is a constant interplay between the status of object relations, identifications, and body image consolidation and that this interplay may influence distortions and create uneven functioning among specific ego functions. The earlier genetic characterology, which included such designations as anal character (Freud, 1908), was confounded in Freud's 1923 paper, in which it was suggested that apart from libido development, there might be independent lines of development that have a more significant effect on later behavior than drive fixations.[1]

Mahler, et al. (1975) later introduced the separation-individuation process as a model description of the child emerging from the undifferentiated to the differentiated period. Thus she offered yet another way of organizing our thoughts about development which can be used to construe development as observed directly, in *statu nascendi* as well as retrospectively.[2]

Where do these theoretical revisions leave us with respect to the status of the oedipus complex in severe character pathologies? The oedipus complex remains an unconscious organization that serves as a central way-station which can now be viewed as

[1] Ferenczi (1913), of course, had already suggested the retrospective fantasy of stages of the sense of reality as a separate developmental line. The terminology he used still survives; for instance, unconditional omnipotence, magical hallucinatory omnipotence, magical gestures, etc.

[2] The scope of this presentation does not require extensive treatment of theoretical variants such as the object representations of Klein (1952), the body ego theory of Schilder (1950), the self object theories of Jacobson (1964), the identity theory of Erikson (1968), and the self theory of Kohut (1971).

being influenced from many sectors—from drive, from the environment, from the organizing function of the ego itself, from prior body ego and identificatory schemata. It may be represented as those negative and positive, passive and active, libidinal and aggressive attitudes and aims which cluster around the first significant male or female representations. It is discovered in analysis as a codification of the variety of organization of the individual under study. Its particular form invariably represents an "error of closure"[3] or a distortion that exists between actuality and psychic reality.

The oedipus complex, then, is a description par excellence of an individual's unconscious view of the world. Subsequently it functions as the relatively abiding way in which we tend to organize the meaning of experience. Thus, when we speak of the oedipus complex in severe character disorders—be they perverse, narcissistic, or other—are we suggesting that it is different from that seen in the neuroses? My experience coincides with my suspicion that the form of the story has no more variations than it does in the neuroses. The differences reside in the intensity of affects and the number of drive derivatives that are simultaneously available to consciousness, and the variability of object representations (Kernberg, 1975). This, of course, is familiar to us because when Freud was asked about choice of symptom and severity of pathology, he often yielded to economic formulations.[4]

In accord with these varied genetic propositions, one must consider the influences of the oedipus complex from a number of interrelated developmental paths. Four areas that would seem relevant are: (1) drive organization, (2) ego organization, (3) the developmental level of anxiety, and (4) the separation-individua-

[3] "Error of closure" is a term used by cartographers who, when attempting to draw a map of the terrain they have traversed, invariably are unable to arrive at where they began on the representation due to the difference between magnetic and true North.

[4] This could be a restriction imposed by the philosophical status of the oedipus complex as a scientific construct and, therefore, a function of the "form of the theory" that permits proliferation around it but not within its core organization.

tion process. Although these heuristically separate lines develop simultaneously, they may be separated in order to examine what has been said about the influence of each on the oedipus complex in severe disorders of character as well as on the problems that accrue in each aspect of development.

I

The concept that pregenital fixations exert direct and undue influence on each successive drive state so that the oedipus complex is predetermined by genetically prior states is espoused in the literature pertaining to the vicissitudes of drives. This view also includes theoretical propositions; for instance, that undue drive fusion or defusion operates in such a manner that the intensity of aggressive and libidinal attachments to objects at any given time would be excessive or would reflect the ambivalence associated with the stage of fixation and be characterized by rapidly alternating attitudes.

Klein (1952) postulates that the first year of life includes such affect-laden discrimination between good and bad part-objects that they may persist as prominent features of later functioning. In severe disorders, therefore, the oedipus complex would appear either as a rigid set of requirements and attitudes toward the parents, with a high degree of unbound hostile aggression toward one or both parents and a relative absence of mature loving attitudes and neutralized aggression, or as rapidly alternating affects. There would be tendencies toward clinging, hostile attitudes, or polymorphous perverse sexual inclinations like those seen in pseudoneurotic schizophrenia (Hoch, 1949). On the other hand, extremely rigid expectations might accrue as in the severe obsessional states that cover disorganizing anxiety.

Wilhelm Reich's (1933) view of character armor being laid down at each fixation point, leaving its mark on character in both the form of defense and the intensity of drive that it protected, is one of our best early statements designed to illuminate character neurosis. Insofar as modern self theorists, such as

Kohut (1971), stress narcissistic development as a developmental line, they too echo this early model, establishing yet another metapsychology within a metapsychology to be considered.

The problem with this epigenetic point of view is that it leaves our theory open to what I choose to call "the great oralizing fallacy," i.e., that the first year of life may so determine later life that its stamp is irreparable. This is not compatible with a developmental psychology because, to my mind, a truly developmental psychology allows for the possibility that with maturation there is a discontinuous hierarchic organization such that structuralization at each stage reorganizes the mnemic traces of the prior stages. Thus, the oedipal constellation may supersede earlier experiences, rendering them less "toxic" than their previous archaic level might suggest. Moreover, methodologically we are left in a peculiar bind if we look at the oedipus complex as merely a summation of earlier, even preverbal stages. Verification for that proposition, of course, is not available because the data derive from a presymbolic stage.

Consider the proposition that because a male is disposed toward fellatio rather than intercourse with females he is fixated pregenitally. Freud's (1905) earliest formulation that perversions result from fixations left the route open for such a proposition. However, it was later found that back pressure or regression from castration anxiety also contributes to such preferences and that the reorganization of the oedipus complex is a more likely screen through which earlier pregenital stages may be inferred, though not so easily observed. One could just as well invoke a negative oedipus complex with regressive aims (see, Arlow and Brenner, 1964). While fellatio includes oral mode and zone in Erikson's (1950) sense, it is usually performed with a phallus and with a member of the human species.

During analysis of a young man some of what has been suggested was demonstrated.

The patient, in his twenties, entered analysis with major disturbances in all areas of functioning. He avoided intercourse

with his wife, preferring to masturbate to fantasies involving oral-genital contact with young girls or seductions by older women. In lieu of affection toward his wife, he would provoke violent arguments. His work was impaired by feelings that he was an impostor; his low self-esteem often led him to bolster his ego by impulsively altering facts, but he would then experience shame at the thought of discovery. A central theme of his fantasies was already present in a traumatic event which occurred during early adolescence. He was discovered rubbing his penis against the buttocks of a sleeping girl.

He began analysis with a great sense of urgency and with much concern about whether or not the analyst liked him. He wondered whether the analyst would take advantage of him and seduce him. His growing anxiety about his wish to be the passive victim of a man revealed a predominating feminine identification.

Before the summer vacation, he acknowledged that it was his wife's aunt whom he idealized, that she was the object of his affection, not his wife who was merely a vehicle he used to be close to her aunt. He returned from vacation reporting some increased sexual activity with his wife, but this soon diminished as he resumed analysis.

During the next phase of treatment he frequently dozed on the couch, seemingly inviting the analyst to attack him while he slept. His waking comments on the other hand, were reports of earlier sexual exploits for which he won the esteem of his peers. Simultaneously, it was apparent that his quest for advancement was a derivative wish for admiration "by the boys" which, in turn, made him anxious that any success would be shared by his "avaricious" mother. The products of his work were easily identified with the hope for a child whom he would protect from his mother's engulfing usurpation.

As his passive wishes were interpreted, they were met with a stance of pseudostupidity which, when interpreted, led him to reveal an incident during early latency in which a little girl played dumb as he sexually manipulated her. There followed

a number of dreams which suggested that his passivity represented a defense against strong castration anxiety. In one dream, a small animal was in the tub with him; it grew enormous in size as he was bathing. He associated the animal to a skin condition on his extremities and groin which he felt marked him publicly as a masturbator; as an adolescent he had masturbated in the bathtub. While revealing his guilt, he was simultaneously asking for pity because he was marked by the skin condition. Interpretation permitted increasing openness about his frank sexual wishes toward his wife's aunt. He contrasted her goodness with the anger of his mother. At that point, the analyst was viewed as a similarly depriving mother.

The patient accepted the idea that symbolically he had married his own oedipal daughter, i.e., his wife was identified with his sister and he with the triumphant partner of his mother. His father, as usual, was absent from his verbalizations. Evidence for the interpretation was presented in condensed form in a dream which was reported at this point in the analysis. In the dream he is molesting from behind a woman who is wearing a little girl's pants, similar to those worn by his wife, but who has the breasts of an older woman. This takes place in a grand arena with his mother and grandmother looking down on him as they cook his favorite food. In this dream, the pregenital determinants that influence his oedipal victory are evident. Following some understanding of this dream, the patient's impulsiveness decreased; he worked more effectively and he masturbated less frequently. In another dream he was flying above the city as everybody watched.

These phallic narcissistic and exhibitionistic themes then gave way to oral themes. His mother was described as always giving him food at her expense, often taking it from her own plate. This seemed to be a determinant of a character trait of the patient: he always tried to take without appearing to want, for fear of owing a debt. The early memory in the form of a feeding interchange between himself and his mother is also evident in the organizing experience during adolescence in which he tried

to seduce the sleeping young woman, i.e., to take unnoticed.

Although he admitted that his life was proceeding much better, at this point the patient began to complain to the analyst. He accused him of playing with himself as he sat behind the couch. The reversal in the wish that the analyst masturbate while the patient fell asleep hid a more threatening wish that as he passively lay on the couch, the analyst would introduce his phallus into his mouth, thus feeding him necessary strength orally.

In this characterologically impaired young man we find all of the elements of an analyzable oedipal theme with its many pregenital determinants, the organization of which, however, was certainly more than the sum of its parts and could be properly analyzed through the oedipal screen.

Conversely, observations of children who have been seduced in various ways in early childhood show that the lasting effects of these traumata may be ameliorated if ego functions are adequately developed and consistent external ego supports help them to master the particular events. These ideas notwithstanding, John Frosch (1964) views psychotic character formation (not unlike severe character pathology) as resulting from sexual stimulation not appropriate to a particular developmental phase. Such experiences impose serious disturbances in the sense of reality and relationship to reality, while reality testing is preserved. It should be noted, however, that these traumata are said to effect an ego function and that Frosch does not dwell on drive organization alone.

II

Ego functions may develop unevenly either because of intrinsic defects in postulated ego nuclei or because of uneven hypertrophy of some functions due to excessive stimulation in some areas with neglect in others. A parallel idea would be that body disruptions act as precursors to unevenness in the balance of later ego functions. Such postulates are based on the notion

that body ego precedes ego structuring and that experience with one's body is a determining factor in later defensive organizations (see, for instance, Bender, 1966; Freud, 1923; Greenacre, 1953; Jacobson, 1964; Schilder, 1950).

There have been many developmental studies suggesting that in early psychoses the ego's perceptual apparatuses are incapable of incorporating stimuli from the outside because of intrinsic deficits. Bergman and Escalona (1949) extended Freud's vision of a stimulus barrier and proposed that if the biological precursor of the ego is too embattled, a premature, inadequate ego results. Mahler (1968) described the inability of the autistic child to accept the "mothering principle" or to utilize the mother's executive ministrations for tension relief. These may be intrinsic distortions within ego functions that are further damaged by maternal withdrawal which then results in uneven development. When autonomous functions hypertrophy in order to compensate, the child may excel in developmental performances in those areas that do not involve object relations. In his studies of children brought up by psychotic mothers, Anthony (1975) found that such children have a remarkable resilience and that ego compensations are possible, even in genetically damaged children.

Roiphe (1968) described children of eighteen to twenty-four months in whom there is an early genital arousal in association with observation of the anatomical difference between the sexes and earlier experiences which produced instability in self- and object representation. He suggested that these factors may lead to a great instability in later ego functions. Roiphe and Galenson (1973) have described varieties of fetishistic substitution for objects once the symbolic modes are established as a means of negotiating an uncertain reality. A similar view was espoused by developmentalists, such as Schilder (1950) and Bender (1966), who not only described psychoses as being the outcome of these instabilities in body representations and part representations of the body but also believed that these instabilities later profoundly affect the individual's sense of self and functional

fragmentation.

In extreme forms of pathology, such as psychoses, we observe children who, after emerging from their autistic development, may develop at later stages full-blown castration reactions in an apparently objectless setting (Shapiro and Huebner, 1974). These castration reactions correspond in their symbolic translation more intimately to aspects of body narcissism than to object representations. I would suggest that in less extreme forms —if this can be viewed in a framework of a spectrum of disorders—object representation would probably become quite rigid with an extreme degree of anxiety directed toward both the projected dangers and the body representation.[5]

In psychotic children the degree to which affective arousal, such as excitement and/or anger, disrupts their sense of self may have lasting effects on various ego functions. In addition, when there is excessive emotional constraint or, indeed, excessive permission for drives, these children show a hypertrophy of intellectual and cognitive functions or of acting out, as the case may be. The varying abilities of such children to bridle their drives may lead to distortions in specific ego functions, or even to islands of creative functioning, yet leave them incapable of intimate relations. Such unevenness in development could result either from the ego's mediating function between external reality and drive expression or from distortions in body ego representation.

Kernberg (1975) has spoken of split-off self- and object images that emerge as transference reactions in borderline patients. During the course of therapy, these various split-off images must be integrated into a whole representation of an object. I suggest that an ego-based concept for such a view might be that the cognitive functions and structures themselves influence the form of the split-off, oscillating representations. Loewald's (1970) comment that what we internalize are not objects but "interactions with objects" lends itself to this view. Thus, when Kernberg talks about oscillations between self- and object rep-

[5] See Freud's 1914 view of hypochondriasis as a form of actual neurosis.

resentations in regard to whether or not they are the active or passive aspect of the activity involved, we may have a partial solution in Loewald's terminology. It is the interaction in the relationship which is internalized and then projected onto the analyst.

What may we do with this in terms of available cognitive psychology?

Piaget (1947) described an early sensory-motor period in which each experience is heterologous and noncontinuous with the next event. It is only later that experiences are seen as continuing or proceeding. It is this gradual development toward a fluent representational reality, established by eighteen months, which individuals with borderline states do not seem to achieve in a stable manner. However, if we use this strictly regressive model, it takes us to a period before separation-individuation. To do this we must imagine that even a mature mental apparatus lacks the metaphorical "glue" to hang objects together, especially under the tension of extreme threats to integrated functioning.

How might such a state of cognitive disruption disturb the oedipus complex? One can envision a rather evanescent and changing oedipal arrangement which would represent one aspect of experience with significant others as one action schema at one time and another at another time. On the other hand, there might be a defensive clinging to one form of interactional split object relationship in order to hide another. This might lead to the clinical observation of a highly rigidified oedipal organization. What are the drive components in such an arrangement, however? If we look to each aspect of these hypothetical schemata—split object representation, drive organization, internalization of interactions—we see in each an emphasis on one aspect of the same phenomenon. Just as there may be an object for every action schema, every drive must be represented in a form that is vectorial and "verbal"[6] and have its objects as well as its agents or perpetrators. Thus, although we

[6] In the sense of a grammatical verb.

are again proceeding sequentially, the functions coalesce on a structure we call the oedipus complex. Each theory then accentuates the part of the mental picture that becomes the preference of the analyst-as-worker.

What then of the variety and intensity of anxiety signals we expect to find in severe character disorders?

III

Ego functions may be enhanced or inhibited in a selective manner because of unusual accentuation of the varying signals for anxiety derived from each stage of development, i.e., helplessness, separation, castration, or superego sources (see, Freud, 1926).[7] If we look at the hierarchy of anxiety possibilities that children may experience, we can see that anxiety which presumably derives from conflicts with the superego will be overly intense by virtue of the primitiveness of the underlying fantasy organization. Thus, again, fantasies cohere with anxiety signals and each with a specific stage of ego organization.

To illustrate this point clinically, I cite a young man with a pedophilic perversion. His interest in little boys was rationalized in his avowed wish to give them pleasure by masturbating them. This man reported having an overstrict, punitive, and hyperreligious father. Behind the patient's interest in fondling genitals was a wish for anal penetration, which was only dimly seen through a screen of disgust. Rage at his father-image was unbridled, but his gentleness with boys was great. His sadism was subjected to reaction-formation, just as his view of his father may have been distorted by the drive organization which ensued. Castration anxiety was overwhelming and was expressed in a number of derivative fantasies, including a screen memory of his father gently coaxing a pig to slaughter, saying "take your medicine," after which he slit its neck. Moreover, this young

[7] Alexander (1923) used the varying character types portrayed among the four brothers Karamazov as a way of dealing with the same underlying castration anxiety.

man avoided women and intercourse; his explanation was that he was not circumcised and that the foreskin was tantamount to vaginal covering.[8] Thus, his personal view of intercourse was such that in order to involve himself with a woman, he would have to cut off the protective "woman" that covered his glans, and forego his hermaphroditic fantasy of a fused male-female, self-sufficient image.

It is difficult to decipher from the format of this oedipal constellation what the actual experience of this man was, but we do know that the organization of his behavior followed closely the organization of the unique oedipal constellation. While his reality testing never failed, his anxiety repeatedly led him to interrupt relationships with men because the homosexual fantasy of contact with adult men was tinged with sadism. Moreover, the back pressure from his castration anxiety was such that he could not move forward to a heterosexual object. The structure of this patient's oedipal constellation may also be found in neurotics who inhibit sexuality or show frank compulsion neuroses, but in whom the intensity of the anxiety may not be so great as to inhibit heterosexual contact or object choice.

Turning now to separation anxiety, a cautionary note must be introduced. During the course of normal development many children show a revival of severe separation anxiety during the phallic phase. Nighttime masturbation associated with self-comforting may lead to disquieting presleep fantasies which give rise to severe castration anxiety. Such anxiety may then be reinforced from the environment when the mother, growing weary of being called repeatedly to the child's room, explodes in anger. The danger arising from the newly formed internal restrictions, or the sadistic fantasies that may arise as a feature of anal-phallic progression, can be easily externalized and pro-

[8] See Nunberg's (1949) prescient monograph on circumcision, in which he elaborated the unconscious meaning of the foreskin. So far as I know, the patient described offered the first reported conscious fantasy demonstrating Nunberg's construction.

jected onto the mother who is intolerant of the frequent intrusions at bedtime. The anxiety may undergo regressive transformations to fear of abandonment rather than narcissistic fear of body injury. The later separation anxiety may include a tendency to revive fantasies associated with both forms of early anxiety signals.

IV

The separation-individuation process (Mahler, et al., 1975) which overrides all of development in the course of psychic "hatching" may also proceed at an uneven pace in accord with children's autonomous ego capacities, their environmental aids and prohibitions, and their ability to tolerate their own wishes. Mahler's description of the progression from the normal autistic to the symbiotic phase and the varying substages of separation-individuation offers a model to map the possible difficulties children can develop while establishing a sense of self as separate from others. One can imagine that in the interplay between parental permission for separation and parent as executive and object for tension discharge, a number of variations on the oedipal theme may eventuate, which could lead to a multiplicity of anxiety forms.

A phobic child of five was seen in consultation. She was not only agoraphobic and zoophobic but verbally raged at her mother while her father was discounted psychologically. Her phobic avoidance of animals led the mother to frustrated angry outbursts that further frightened the child. The continuing wish to re-establish a clinging, dependent, and symbiotic tie to the mother was inferred from the child's behavior, but hugging, loving displays soon turned into pinching and clawing. It was apparent from the history given by the mother that she continually distanced herself from the child because she could not tolerate her closeness. The child's desperate separation anxiety therefore became a focal point for a continuous need for mastery of separation. Even at ages six and seven, in the course of treat-

ment, severe character difficulties involving every level of ego organization could be attributed to this difficult relationship.

In the transference to her therapist, this child wished more and more not only to control the therapist but also to receive from her. Yet when at Christmas she was given something which she desired, she was unable to accept the gift because her oedipal organization seemed to suggest that it was dangerous to receive from "mother," as one would not know how much sadism or projected rage to expect. Further, the gift was never sufficient because what she wanted was something determined by unconscious fantasies rather than reality. The derivative of these fantasies was later revealed as a wish for a penis, a fantasy that was continually played out in deprecating her female therapist as ugly, portraying her without pants to be humiliated and laughed at, and trying to lift her skirts to look. What earlier derivatives are still to show up is problematic because the oedipus complex has already had its transformational effect.

Another child, age twelve, with severe agoraphobia and claustrophobia, depersonalization, and an angry helpless character style, all similar to what we find in severe character disorders, complained bitterly that her mother was not a good mother and that when her father gave to her it was only to alienate her further from her mother. When asked what it was she wanted from her mother, she could not answer. Instead she sat stroking her arm in and out of a soft fleece-lined coat. Observing this, the analyst suggested that perhaps she wanted to be held gently and stroked by her mother. She cried softly and said, "Why doesn't my mother do this for me?" An interesting contrast to this image is that the history from both mother and father suggested that the mother had been an excellent mother until the child was six years old, at which time there was an abrupt break in her diligence. The mother described her own childhood as "horrendous." She had been brought up in a cold, distant family in the midst of a bitter divorce. As a woman, she could not offer affection in any way, even to her husband.

One is confounded about the source of this child's oedipal distortion. Is it an actual reading of the mother's difficulties in intimacy? Is it a translation in line with severe disorder and difficulty in her capacity to separate and individuate from her mother? Is there a retaliatory factor in her later behavior? Or does it refer to early deprivations which predominate in object representations in the current life of the child?

These are the difficulties that confront us when we try to decipher sources of distortions in the oedipal constellation in severe character disorders. I am not certain that they are any clearer in neurotic disorders.

SUMMARY

As psychoanalysts we examine an individual's psychic organization at a specific point in symbolic time. Our judgments regarding the source of behavior and fantasies are based on retrospective genetic propositions which are then used to explain current behavior. Verification in a scientific sense has always been a problem. Neubauer (1960) has collected available data on the one-parent child's oedipal constellation. On the basis of ten cases he culled in the analytic literature, he suggested that there is pathogenetic potential in superego and sexual identification. However, he was unable to say whether it was the fantasies about the absent parent, whether idealized or sadistic, or the actual experiences with the present parent that determined the oedipal outcome.

In a panel discussion, Wolff noted that attempts to chip away anterospectively at the "preverbal ice age" merely provides corroboration or compatibility, not proof (see, Schafer, 1965). That severe character pathologies show a variation in oedipal themes cannot be denied. That they are different from oedipal themes in neurotics, except in their intensity, rigidity, and external instability, is questionable. The overriding feature of our current views is that the oedipus complex is as much a result of the drives and that its form is as much an amalgam of experience in and

with the world and inner maturational structures, as any other psychic function. As such, the oedipus complex should mirror the character disorder, but it may be through examination of ego functions and their variations that a better picture of the current functioning and characterology will accrue, rather than any part aspect such as status of self-concepts, distribution of narcissistic energy, etc.

Since analytic work proceeds through an understanding of the inner conflicts of individuals, oedipal constellations can be used therapeutically to help patients understand their world view on the basis of their estimates of their own capacities at varying stages of development and their retrospective view of how their parents and their own wishes interacted. Thus, in my opinion, the oedipus complex is a hierarchically determined organization which is important for analytic work in severe character disorders, as opposed to therapies that use only ego strengthening techniques. Through analytic work we bring the ego under control. Better adaptive behavior involves exposing the distorted determinants, according to the patient. As such, the oedipus complex remains the most important tool for progress in analytic work. It provides a vehicle to demonstrate to patients in a convincing manner how they continue to make their own future on the basis of past reformulations of a reality that they re-experience daily. The analyst shows them the anachronistic nature of their experience.

From the standpoint of development, we cannot yet firmly answer the question of the sources of the oedipus complex because it is an end stage of how individuals progressively symbolize their experience in new hierarchic structures. In this paper, I have tried to present a schematic view of the terrain and provide an outline of some of the possible influences that must be considered. There is, of course, no satisfactory answer except the old one—that we in psychoanalysis explore better than any other science the nature of the specific structures that underlie psychic reality.

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MICROPSIA AND TESTICULAR RETRACTIONS

BY WAYNE A. MYERS, M.D.

Five episodes of micropsia, which were precipitated by oedipal masturbatory fantasies, are described in the analysis of an adult male. Traumatic visual events and testicular retractions during the oedipal and latency years predisposed the ego functions concerned with visual perception to later involvement in conflict. The micropsia itself is seen as defending against castration anxiety by means of a series of unconscious fantasies of denial. These fantasies cause a regression to an earlier mode of visual perception (and to micropsia) characteristic of latency. The defensive modifications of the functions of the ego itself seen in micropsia are closely allied to those seen in the dèjá vu *experience and in depersonalization.*

A number of episodes of micropsia occurred during the six-year analysis of a male patient I have described elsewhere (Myers, 1976a). The experience of micropsia, which arose in the setting of the reactivation in the transference of drive derivative wishes from the oedipal period, could only be understood through the recognition and reconstruction of the interrelationships between two series of events during the patient's oedipal and latency years—traumatic visual occurrences and marked testicular retractions. Both series of events gave rise to profound castration anxiety which was defended against, in part, by the micropsia. The defense of micropsia included a regressive modification of the ego functions involved in visual perception. The defensive modification of visual perception was set in motion by a number of unconscious fantasies which will be detailed later. This kind of defense, in which functions of the ego are modified in the service of defense, places micropsia in close proximity with such altered ego states as the *déjà vu* experience and depersonalization.

CLINICAL MATERIAL

Mr. A was the third child in a middle class Italian family. He had two sisters, five and eight years older than he. Household nudity was common, and the patient frequently observed his parents' "defects": his mother limped because of a leg foreshortened from a childhood illness, and his father wore a truss because of a huge scrotal hernia.

There were intense struggles with the mother over feeding and toilet training, and considerable anxiety was aroused whenever he was separated from his mother. Memories of marked retractions of the testicles into the inguinal ring area consciously dated to the age of four, but pronounced retractions probably long preceded this. An early interest in the Italian bowling game of bocce was inhibited after the patient at the age of eight was struck in the left eye by a ball thrown by his father.

The patient began analysis at age twenty-two because he was depressed and had begun to suffer from obsessional thoughts about world economic woes following a rejection by a woman friend. He also commenced his graduate studies in a foreign language at this time. During the course of his six-year treatment, Mr. A's verbal metaphors, screen memories, dreams, obsessional doubts, and phobic manifestations showed an exceptionally large number of references to movement or inhibitions of movement. Testicular as well as phallic castration anxiety was very prominent, and there was a pronounced testicular focus to the material he presented from the very onset of the analysis. This focus on testicular movement was seen to be multiply determined, and associations usually revealed concerns from many psychosexual and ego developmental levels, with the testicular movements per se having served as an organizing experience under which the aforementioned difficulties were subsumed.

The First Episode of Micropsia

Toward the end of the first year of analysis, Mr. A, who was usually a few minutes late to sessions at that time, arrived early

one day. He was angered that I had not taken him immediately into my office, though he knew that I always saw another patient (an attractive black woman) just before him. With embarrassment he then revealed that he had defecated in the bathroom while waiting for me. When he had entered the bathroom, he had smelled a fecal odor and had imagined that the smell was from my feces. As he said this, he feared my hitting him or kicking him "in the balls" for saying that I "smelled bad." He spoke of feeling pressured by me into looking at and talking about "dirty" things in sessions, as he had felt pressured by his mother into defecating for her during childhood. He offhandedly mentioned then that he would see his mother after our session and stay overnight at his parents' home while studying for an exam at school.

Following this, the patient spoke of his confusion over different types of verbs, especially active and passive types, and he wondered if there were only these two types or if there were "mixed variants." When I inquired about the latter phrase, he responded with questions about what had been happening between me and my black patient in my office. He felt angry with me then and likened me to the professor at school, whose exam he was studying for, in that we both expected him to "know everything." The professor and I were both "good-looking" but he was reluctant to compliment me like that, as I never complimented him. Besides, I did not always look so good. He then again became fearful of my hitting him or of my kicking him in the "balls" and spoke of experiencing micropsia.

During the period of micropsia, which lasted about fifteen minutes, "things in the office looked tiny and distant," as if he were "looking at small print in a book." He felt as though his eyes were not focusing properly, and he recalled similar episodes at ages eight and nine while watching television. He felt very tense and out of control as he described these sensations and depicted himself as being similar to a crazy person in an institution. An intense urge to strike me came over him, which he attributed to my having so much "power" over him and to

my making him talk about such "dirty" things. He struggled to "hold things in," not wishing to talk ("crap") for me and wishing to hold his testicles in place. He wanted to lie very still and to have me talk to him and to explain away his obsessional doubts and his "crazy" micropsia. When I did not gratify his wishes, he thought of me in the bathroom with my pants down and defecating. He felt safer with this image because then I would be unable to "pounce on him" and hurt him. This was likened to feeling safer with his father after the father had removed his truss at night and was unable to "bounce quickly" toward him and hit him.

Since the genesis of the micropsia will become clearer in subsequent episodes, I will limit my remarks here. In essence, the session centered on the reactivation in the transference of the oedipal rivalry with the father, expressed here as wishes for my black female patient, whom Mr. A had previously associated to the forbidden mother and to the next older sister. The castration anxiety engendered probably led to testicular retractions and to even further castration anxiety. The rage aroused in the oedipal struggle with the analyst-father was regressively displaced onto the struggle with the mother for anal control. The mixed variant obsession dealt primarily with primal scene fantasies aroused by the current transference situation. The anxiety- and guilt-provoking wishes to look and to know were projected onto me and the professor, and the micropsia ensued.

The Second Episode of Micropsia

As I learned later, the micropsia recurred on a number of occasions in the ensuing years, although Mr. A did not speak of it again for another three years. On this second occasion, in the last session of the week before the weekend break, he was late for an appointment after I had been forced to change the time of the hour.

He expressed intense anger at the time change and spoke of feeling abandoned by me. Obsessions emerged about the pre-

sumed differences between the analysis of children and of adults. He speculated about what kind of father I must be and saw me as warm and loving, which seemed unmasculine to him and different from his own father. He then expressed doubts about whether or not to give his current woman friend a gift, something he had never before done with a woman. It seemed obvious that he wished to give her the gift but he was frightened because it seemed adult and masculine. The fear of being a man like me led to his adopting a childlike tone, and he meekly voiced the wish that I might turn off the air conditioner because it was chilly. He said that he could not expect me to do this because he paid me such a low fee. When I pointed out that he was portraying himself as a child, as a defensive response to the fears aroused by exhibiting himself as a man to me, he spoke of experiencing micropsia again.

At this time, he perceived the books on my shelves as appearing smaller, and once again he was reminded of the latency episodes. Those usually occurred on Sundays, when he would contemplate going to school the next day and being separated from his mother. He spoke of his present wishes to be little with me, to be my child, and of how "belittled" he had felt by my interpretation, which he took as an injunction to become an adult. In the childhood micropsia episodes, he recalled how the television set had appeared tiny to him and how his vision had seemed blurred, especially in his left eye. He observed that this was the eye that had been injured, shortly before the onset of the latency micropsia, by the bocce ball thrown by his father. Obsessional thoughts about "balls and eyeballs" ensued, and he felt anxious as he recalled that he had seen an ophthalmologist on a number of occasions between the ages of eight and eleven for transitory experiences of awakening from sleep at night and "being unable to see." Nothing organic was discovered by these examinations, and he wished that I would now reassure him that there was nothing wrong with his "balls and eyeballs."

His associations shifted to the recall of a childhood ball game, in which players stood in boxes on the sidewalk and tried to

bounce a ball past their rivals in the other boxes. He was good at the game as a small child, but lost his competitive drive after the bocce ball incident and the blindness experiences. Suddenly he felt fearful that I would hurt him if he showed me that he was a man. He recalled how a friend had also been struck in the eye by a ball as a child and had suffered permanent damage to his eye. Mr. A remembered that in the box ball game, one had to look up and down a lot in order to keep one's eyes on the ball. He likened this to looking up and down for his testicles when they moved, and he remembered how his scrotum seemed small when the testicles were up in the canal. At this point, the micropsia ceased. He wondered if he could produce the micropsia at will but feared being unable to stop it. This was associated to his inability to control his testicular movements. The loss (separation) and return of his testicles and vision were also seen as relating to separation from me, which he also could not control over the upcoming weekend. The similarity to the early separations from the mother was obvious to him.

Once more, this episode was precipitated by anger at the analyst-father, arising from an oedipal level conflict. The rage aroused intense castration (and separation) anxiety. The childhood eye injury and hysterical blindness episodes and latency micropsia were recalled and genetically linked with the testicular retractions. In addition, when he felt "belittled," he defensively made me appear small and less threatening by the micropsia.

The Third Episode of Micropsia

About one year after the second episode, and shortly before Mr. A was to marry in the sixth and final year of the analysis, another episode of micropsia was reported. Once again, it occurred during the last session of the week before the weekend break. It was also in the setting of mounting castration (and separation) anxiety related to fears of my harming or abandoning him for his wishing to be a man like me (and like father)

when he married. The day before the session to be reported, Mr. A had experienced great castration anxiety because of a boil on his scrotum. He had trembled as he spoke of his fear of damage to his testicles: a doctor might have to lance the boil with a knife and he would be permanently damaged. He also had discussed a dream in which he had been unable to throw a basketball through a hoop; he associated this to fears of being unable to perform sexually after his marriage. The basketball was seen as his father's "balls" (the scrotal hernia), which here conveyed a sense of supermasculinity.

Mr. A was late for the session in question and spoke of how troubled he had been by the material the day before. He feared that he would not be able to function as a man with his wife and talked of not having gotten "big enough balls" in the analysis. He felt "empty" and "inadequate" and wished that he had a dream to offer to me as a gift. The empty feeling recalled childhood memories of his testicles being out of his scrotum. He then became fearful of my anger toward him for coming in late and thought of my kicking him in the "balls" or castrating him. I interpreted the projection of his own castrative rage toward me (father) and his wish to have my (father's) "big balls" and to replace me (father) with the mother.

At this juncture, he began to experience micropsia once more, although I was not made aware of this for some moments. He spoke first of my wanting to keep him a child and then expressed the fantasy that if he listened quietly to me and believed everything I said, he would get better. He likened me to his mother, whom he saw as wishing to keep him tied to her (although he saw the projection of his own wishes here). He once more thought of his father's "big balls" and told me how horrible it was for him to "look" at this idea. His old obsession about balls and eyeballs recurred, and then he informed me that whenever I made interpretations which emphasized his sense of separateness from me or his mother or which delineated his wishes to be an adult male and to be better than me or his father, he became fearful, often had twinges of the testicular movements, and

occasionally experienced micropsia. I likened his wish to sit in quiet harmony with me to his lifelong fantasy that his testicles would return to his scrotum (after they had retracted into the inguinal canals) only if he remained totally passive (childlike, feminine). I asked if his current aggressive masculine wishes, which brought in desires to further individuate from his mother and to triumph over his father (in an oedipal sense) by his marrying, were causing testicular retractions, and he confirmed this.

In referring to his latency micropsia episodes again, he noted that he had often blinked his eyes during the childhood episodes in order to magically restore things to their normal size. He had felt weak and helpless during such occasions in childhood and likened this to his current feelings with me. I interpreted his helplessness as relating to his fears of experiencing intense emotions, such as rage, because such emotions produced testicular retractions in childhood and now, and led to intense castration (and separation) fears.

In this session, we see that the patient once more wished to distance himself from (to not see) his aggressive oedipal wishes because of the intense castration anxiety aroused. The linkage between balls and eyeballs was made again and the magical control of one anxiety-provoking area (the eye-blinking with the micropsia) was connected to the passive feminine fantasied control in the other area (the testicular retractions).

The Fourth Episode of Micropsia

After his marriage, Mr. A became concerned about his ability to impregnate his wife. One day he voiced these fears during a session and then described how he had looked in the mirror and had become anxious by observing his hair hanging over his left eye. He began to experience micropsia and saw me and my psychiatric books appearing small. He again thought of the bocce ball incident with his father and of the childhood testicular retractions and micropsia. He now revealed that in the latency

micropsia experiences, not only the television set but the books in his mother's bedroom (where he liked to read while lying on his mother's side of the bed) appeared small. The books involved were his mother's collection of pornographic tomes, which had aroused his incestuous sexual wishes toward her and his sexual curiosity, much as my psychoanalytic books did at the present time. He had frequently masturbated while reading his mother's books on her bed.

I suggested that the micropsia had likely occurred in latency as a defensive distancing from his oedipal wishes. When he did masturbate on his mother's bed during the adult analysis, the fantasies generally had been of being seduced by an older woman, a disguised mother surrogate. In such fantasies he was the innocent child (his wish in the second adult analytic micropsia episode). We were then able to look back and to understand more about the first micropsia experience in the adult analysis (he was going to study while lying on his mother's bed). Also, to be small himself (which he occasionally felt during micropsia episodes), or to see the world as small, meant a return to childhood and obviated the necessity of having to leave his mother or assume responsibility for his incestuous desire for her. In so doing, he not only dealt with his unresolved separation problems, but he regressively represented his incestuous oedipal desire for the mother, which had recently been heightened by his marriage and his own desire to become a father. Recall of childhood ball games and of the transient blindness experiences followed. In the blindness episodes, he would awaken in the dark and feel that he could not see. At such times, he would call out and attempt to awaken his parents. From his associations to this, we were able to extend an ongoing reconstruction about his conflicting wishes of wanting and not wanting to see (and to be involved in) the parental intercourse, and to relate his early fantasies or observations to his testicular retractions and castration anxiety (the hair over his eye and the ball games).

This material led to further feelings of competition with and rage at his father. A fragment of a dream from the night before

emerged, in which he recalled kissing a pretty female cousin (sister, mother) while an older doctor, an analyst, died and was buried. He thought of me as the analyst he wished to bury. As he said this, the episode of micropsia ceased. He spoke of feeling more able now to tolerate his oedipal rivalry and was less fearful of my hurting him. The wish to bury me in the dream was also seen as relating to wishes to incorporate my testicles so that he would be assured of impregnating his wife after the termination of the analysis.

Again, oedipal castration anxiety appeared to trigger the micropsia. Here the books which appeared as tiny (the small print of the original micropsia episode) were seen as containing forbidden sexual knowledge (his own incestuous desires) which had to be distanced and projected onto the mother in the masturbatory fantasies. The memories of micropsia while watching television were seen as screens for the other forbidden experiences of looking (pornographic books, primal scenes). The forbidden looking was also related to the other defensive alteration of vision in childhood, the hysterical blindness episodes. Finally, visual and testicular phenomena were once more seen as connected.

The Fifth Episode of Micropsia

About a month after the fourth episode, while we were in the process of discussing the impending termination of the analysis, I was away for a week's vacation and returned with a suntan. In the first session after I returned, Mr. A told me that he had been more aware of his love for his wife during my absence and had enjoyed his sexual relations with her more than ever before. He mentioned having driven his father-in-law, who had been visiting him, to the airport the night before, and then he related a dream of defeating this man in a game of chess. He was frightened by his triumph in the dream but also felt proud of himself. He mentioned the impending termination of the analysis and felt that he had improved tremendously.

At this point, he recalled another dream from the preceding evening. In it, his wife (who, in reality, became pregnant about a month later) had given birth to a pretty baby girl. The baby had glasses on, which magnified everything ten times in size. The baby also had a penis, or a large, erect clitoris, as well as an enlarged breast on one side. Mr. A associated the different sized breasts with the differences in the sizes of his own testicles and also with the difference between his own and his father's scrotum. He thought of the idea of a woman with a penis and of his fears of observing the differences between the sexes in the past (feminine castration). The glasses struck him as odd and he mused about his testicles being magnified ten times, feeling that in that way they would never get lost. This would also give him "balls" as big as his father's and the analyst's. He spoke then of having experienced micropsia since early in the session and related it to fears of being unable to impregnate his wife, which he now felt were unrealistic. Fleeting fears of my hurting him (cutting off his testicles) recurred, and he thought of the old wish to be in perfect harmony with me.

I noted his anger and his feeling of having been abandoned by me because of my vacation and the impending termination, and I spoke of his fear of not being enough of a man without me. I further observed that his fears and his presentation of himself as the helpless child in perfect harmony with me were defensive responses to the castration anxiety aroused by his love for and his sexual performance with his wife, and by his dream of defeating his father-in-law (father, analyst) in chess and having "bigger balls" than we did. His micropsia cleared up then and he spoke of it as serving a function at once opposite to and yet similar to the glasses in the dream. Instead of magnifying differences (as between the sexes) and thereby heightening his awareness of the idea of castration, it minimized such differences and diminished his fears. Yet the magnification idea in the dream pointed out his greater sense of potency as a man.

The minimization of the differences between the sexes, of the

idea of castration, clearly seemed the function of the micropsia here. Once more, we may also note the connection between micropsia and ideas about the testicles.

REVIEW OF THE LITERATURE

Perhaps the earliest psychoanalytic paper referring to micropsia and related phenomena was one by Ferenczi (1927) on "Gulliver fantasies." In this paper, he discussed dreams of giants and dwarfs and noted: "The sudden appearance of giants or magnified objects is always the residue of a childhood recollection dating from a time when, because we ourselves were so small, all other objects seemed gigantic. An unusual reduction in the size of objects and persons, on the other hand, is to be attributed to the compensatory, wish-fulfilling fantasies of the child who wants to reduce the proportions of the terrifying objects in his environment to the smallest possible size. . ." (p. 44). This formulation is similar to my own in Mr. A's episodes of micropsia.

Inman (1938), in a very short paper, described material based on interviews with the mothers of two latency children who experienced micropsia in situations involving the presence of their mothers and of stimuli involving feeding. He related the phenomenon to a reactivation of the early breast-feeding experience. The sensation of objects becoming small and receding into the distance was equated with the movement of the breast away from the child and/or with a decathexis of the mother's breast after satiation. He envisioned such experiences as being related to an oral fixation, resulting from a prolonged breast-feeding period. What he failed to account for was why such a presumed reactivation of the early breast-feeding sensations led to micropsia. One could equally well postulate an oedipal incestuous wish arising in the mother's presence, with the castration anxiety that was aroused being defended against by means of regression to an earlier mode of perception.

In the classic paper describing the phenomenon that now bears his name, Isakower (1938) spoke of sensations in the

mouth, skin, and hand, which were generally associated with falling asleep. He further delineated a blurring of distinctions between what was internal and external, and he related patient descriptions of a round object coming near, swelling to gigantic size, and then gradually becoming smaller and shrinking up to nothing. Isakower noted that such states frequently occurred in his patients during childhood and in febrile periods and that when they recurred in adult life, they often brought back childhood memories. These episodes he likened to the *déjà vu* experience and to the epileptic aura, in the sense that the sensations described included a sense of familiarity, of having often happened before. Isakower noted the heightened sense of self-observation and the distancing from the sensations in such experiences, which gave them an aura of unreality. He suggested that such episodes were closely related to depersonalization. He conceptualized these phenomena as occurring because of cathectic shifts that come about at the time of falling asleep, with a shift of cathectic energy from the external world into the bodily ego and with a revival of early ego attitudes from the period of sucking at the mother's breasts and falling asleep satisfied. He, like Inman (1938), sees the large objects approaching the patient as the breasts prior to suckling and the smaller ones receding as the decathected breast after the infant is satiated.

An important contribution of Isakower's is his theory that the phenomenon he describes is a consequence of a defense against oedipal incestuous masturbatory fantasies which are re-activated on falling asleep. He does not offer an explanation of why certain patients (and not others) experience such a phenomenon or why the libidinal cathectic shifts result in this specific phenomenon (and not in others), except for a brief statement to the effect that the phenomenon transforms something real and anxiety provoking into something unreal and less frightening. I believe that implicit in this statement is the notion that unconscious fantasies of denial must be operating in order to produce the phenomenon. His observation that this phenomenon seems related to *déjà vu* and to depersonalization fits in with this type of

formulation.

One additional problem with Isakower's formulation is that it is primarily in libidinal terms, even when he describes the occurrence of micropsia in two different patients (one who on awakening saw the world as looking small, distant, and dead, as if overwhelmed by an earthquake; another, a schizophrenic, who was hungry and to whom the world felt unreal and small). He likens such sensations to end-of-the-world delusions, which we would now certainly see as being related to underlying aggressive (not simply libidinal) drive derivative wishes.

Bartemeier (1941) described a woman in her twenties who had first experienced micropsia at age ten. He conceptualized the experience as follows: "The symptom represented a compromise between her aggressive tendencies [which resulted from a prolonged nursing period with a consequent intensification of, and inability to express, oral sadistic desires] and the defense against them. The object moving into the distance and becoming smaller signified both the effect of her aggression and the removal of the object beyond the carrying power of her destructiveness" (pp. 581-582). The patient also utilized a magic gesture (as did Mr. A with his eye-blinking) wherein she would look at the back of her hand and end the micropsia. She had used her eyes (in identification with the angry looks of her mother) as a means of frightening her sister, who suffered from strabismus. The mother had repeatedly warned the patient that sadism toward the sister would lead to damage to her own eyes. The patient also expressed the belief that the life had gone out of her mother's eyes when the mother had given birth to a younger brother when the patient was ten years old—before the initial onset of the micropsia. In his delineation of the unconscious fantasies involved and in his elaboration of the genetic importance of eyes for his patient, Bartemeier's formulations are of interest and value. His concentration on the presumed oral conflicts, to the exclusion of the oedipal ones, however, is at variance with my findings.

Lewy (1954) described a schizophrenic adolescent boy, whose

periods of micropsia were linked with his acute psychotic episodes. He explained the micropsia in terms of a withdrawal of libidinal cathexis from the outside world. The libido was seen as being invested then in the self (a narcissistic regression). Lewy mentioned the idea that micropsia may represent a defensive projection of the feeling of smallness (or disintegration) within the ego onto the external world, with the internal situation being thus perceived subjectively as a change in the objects of the outside world. He saw this as placing micropsia alongside of depersonalization and observed that his patient suffered from both states. He, too, related micropsia to the reactivation of a primitive ego state involving the receding breast. As noted before, cathectic shift explanations merely restate the phenomena in different terms rather than explaining them or the specificity of the symptom choice.

Greenacre (1955), in her book on Swift and Carroll, spoke of the changes in body size so common in the works of these two men and noted: "The problem of changes in body size . . . based on phallic functioning are reflected characteristically to the total body, much reinforced by observations of pregnancy . . ." (p. 115). Her observation of the importance of visual overstimulation is certainly in accord with my findings with Mr. A.

O. Sperling (1957) described a number of patients in whom Isakower-like hypnagogic hallucinations were followed by dreams which yielded associations that he felt threw light on the meaning of the preceding hypnagogic hallucinations. He concluded that his material confirmed the oral nature of such phenomena but he did not relegate such oral experiences to the first year of life. He emphasized that weaning does not simply refer to the breast and bottle, but also to later thumb-sucking. The experiences in question, he believed, referred to such later oral weaning episodes: "the phase of thumb-sucking preceding sleep can be followed by an analogous phase of hypnagogic fantasies and hallucinations, which represent a symbolic substitute for the forbidden oral gratification" (p. 122). This formulation is of interest inasmuch as it does not invoke the depth of regres-

sion that other authors have postulated.

M. Sperling (1959), in a paper dealing with the phenomena of objects coming closer and of objects receding from view, related the former to conflicts over oral sadistic impulses and the latter to an anal conflict, in which there was the danger of losing the anally retained objects, "which, to the patient, meant losing omnipotent (anal) control" (p. 307). She viewed these perceptual changes as akin to symptoms that not only serve to fulfill specific instinctual needs but also function to prevent an "imminent break with reality by limiting it to the sphere of the specific pathological perception" (p. 307). In this sense, her formulation is similar to Lewy's (1954). She, too, observed that the oral problems expressed in the symptoms of one of her patients did not date from the first year of life. Rather, they were related to a reactivation of weaning conflicts precipitated by the birth of a sibling in the patient's third year. Sperling also noted her patients showed a marked visual curiosity which she related to parental nudity. This was also seen in the case of Mr. A.

Anthony (1960), in discussing naturally occurring and experimentally induced micropsia in children, noted that "during the middle years of childhood, there is a transitional phase during which stability and constancy (in the size and shape of objects) are present but only shakily established, so that under pressures from within or stresses from without a resumption of earlier, more plastic and primitive conditions may result" (p. 65). He additionally observed that in adults, object stability suffers during periods of psychological and physiological stress, such as times of diminished wakefulness or consciousness. He described numerous experiments designed to cause apparent shrinkage in the size of test objects (circles), with such perception of shrinkage being the greatest in children between the ages of four and nine. He cited experiments in which the circles underwent "defensive" shrinking when unpleasant content was introduced into them. In adults, Anthony noted, the apparent magnitude of an object is relatively independent of the actual magnitude of its retinal image, whereas in small children the

apparent magnitude is much more dependent on the size of the retinal image, "so that a greater shrinking of the object, even the near object, takes place when it moves away. . . . This rapid shrinking of the object might be interpreted as an actual shrinking of the object. If this leads to ideas of the annihilation of the object, one can envisage this as another source of separation anxiety" (pp. 72-73). Here, however, he was implying that the fantasies are a by-product of the state and are not responsible for the production of the state itself.

Anthony collected seventeen cases of children who had micropsia (seven with epilepsy and ten with psychological problems). The psychogenic group had an onset of attacks between the ages of six and eight years. Precipitating emotional factors were more common in the psychogenic cases but appeared nonspecific. Some of the subjects could bring on attacks by staring fixedly at television, by focusing intently on the printed line while reading, or by focusing intently on an intermediate object while looking farther away. Since these latter precipitants seem to be similar to ones involved in Mr. A's latency attacks, it is unfortunate that we do not have in-depth material on these children to see if these factors screen more important psychodynamic elements. Anthony can thus be said to see micropsia as a defense involving a regression to a state of visual perceptual instability and inconstancy. In addition, he sees this regression as proceeding back to latency, not to the earliest oral period.

Schneck (1961) described an adult male in psychotherapy who had frequent episodes of micropsia between the ages of six and eight. The micropsia was viewed as helping the patient to feel big vis-à-vis the people around him, in order to cope with feelings of weakness and inferiority. It was also seen as a defense against the anxiety aroused by oral-sadistic wishes toward objects and as a means of symbolically representing the patient's sense of separation from objects. In other papers on the subject, Schneck (1969, 1971) described adult males who experienced micropsia in hypnotherapy sessions and who had experienced micropsia in adolescence (again while watching films and tele-

vision). The sense of detachment seen in the latter patients leads me once more to connect such states with depersonalization.

Miller (1963) mentioned a number of cases in which micropsia and other alterations of the body image occurred when "an ego-syntonic character attitude was effectively challenged, either by a realistic experience, or as the result of confrontation during the process of treatment" (p. 77). He viewed such confrontations as instituting intrasystemic conflicts[1] within the ego, which lead to transient disturbances in the body image as the "ego-syntonic body image is alienated via the intensification, within the ego, of the relatively dormant, more realistic body image" (p. 81). The clinical material included in the paper highlighted the role of libidinal and aggressive oedipal level conflicts and the attendant castration anxiety as being the precipitating factors in such episodes of micropsia.

Woodbury (1966), in an interesting paper on altered body ego experiences (including micropsia, depersonalization, and the Isakower phenomenon), described a patient with perversion symptoms who had such experiences. These episodes occurred during analytic hours when: (1) the patient talked of losing something (castration anxiety) or someone (separation anxiety); (2) the emotions in the transference were strong but ambivalent (in other words, when intense anger was aroused); and (3) when the patient felt tempted to withdraw, regress, and sleep (p. 275). Woodbury saw the patient's subjective perceptions of the changes in his own size and in the objects in his environment as being related to the cathexis with which the self and objects were invested at such times: ". . . the important objects become large and the unimportant ones become small and disappear. . ." (p. 278). Unfortunately, Woodbury seems to have neglected the role of the patient's unconscious fantasies and concentrated instead on the manifest thoughts. He viewed the childhood stage of inconstancy of object size and shape, which he referred to as visual perceptual primacy, as intensified (fixated)

[1] Here his ideas parallel those of Jacobson (1959) in her conceptualization of depersonalization.

in such patients because of inborn constitutional factors and because of the mothers' having inhibited the manipulative exploration of their bodies and objects. Thus, the altered body ego experiences were seen as resulting from a regression to an oral state in which visual perceptual primacy predominates. This explanation of such altered ego states again primarily involves libidinal cathectic shifts. But Woodbury's description of different organs (tongue, penis, clitoris), which are capable of changing size and which are seen serving an organizing function for the body ego, in terms of size and shape constancy, is pertinent to the organizing influence I have indicated in Mr. A's testicular movements with respect to disturbances in size, shape, and position constancy.

In an earlier paper (Myers, 1976b), I described a patient who suffered from episodes of depersonalization. During such experiences, she perceived herself as split into observing and participating selves. By means of an unconscious fantasy of disavowal involving the drive derivative wishes attached to it, the participatory self-representation in this patient was both seen and felt as being tiny and far away from the observing self-representation. These states (which were genetically related to an earlier tiny imaginary companion which the patient fantasized about from early latency until adolescence) seem to me to be closely related to the episodes of micropsia.

DISCUSSION

In this paper, micropsia is defined in a descriptive sense as a state in which objects appear smaller than usual to the observer and may also be perceived as receding from view. If we examine Mr. A's experiences of micropsia during analysis, we see that the reactivation within the transference setting of drive derivative wishes from the oedipal period was the common precipitating factor in all of the episodes. In addition, the clinical data reveal the genetic significance of the interrelationships between the early traumatic visual occurrences (parental nudity, observations of the parental "defects," reading the mother's porno-

graphic books, possible primal scene observations, and the injury to the left eye in the bocce ball incident) and the marked testicular retractions which, incidentally, were also perceived visually as well as through other sensory modalities. Both series of events aroused intense castration (and separation) anxiety. Anxieties referrable to one group of paired organs (the testicles) were displaced onto, and were symbolically represented by, anxieties referrable to another group of paired organs (the eyes).

Historically, Mr. A's testicular retractions led to a sense of inconstancy regarding the size, shape, and position of his testicles. This sense of inconstancy was most pronounced during his oedipal and latency years, but was still present to a lesser degree during the course of the adult analysis. Although it was clear that the material in the analysis which dealt with the sense of perceptual inconstancy about his testicles occasionally contained displaced references from his childhood confusion about the size, shape, and position of his phallus (in tumescence and detumescence), the majority of such references pertained to the sense of the testicular inconstancy per se. At the same time that testicular perceptual inconstancies were most distressing to the patient, he was also undergoing the normal transition from visual perceptual inconstancy (with respect to the apperception of the size, shape, and position of objects) to constancy. During these years (generally ages four to nine), there is a progressive maturation of the central ability to interpret the peripheral visual perceptual data received by the retinas in a constant way. This enables the individual to judge consistently that an object's size does not change even though it moves farther away from or comes closer to the self. As Anthony (1960) has noted, the introduction of conflict-laden material into a testing situation led to an experimentally induced visual shrinkage (micropsia) of perceived objects in the children tested. The fragile sense of visual perceptual object stability and constancy underwent a regression to a previous level of object inconstancy and instability in such children.

I see much the same regressive mechanism operating in

Mr. A's episodes of micropsia. Anxiety in children, as Bell (1961) has observed, is one of the determinants of testicular retractions. In the prototypical oedipal situation, in which Mr. A would masturbate while lying on his mother's side of the parental bed reading one of her pornographic books, considerable castration anxiety was aroused. From our reconstructions during his analysis, it is likely that this anxiety was accompanied by testicular retractions (and further anxiety) in latency. Since this situation involved both the eyes (in reading and looking) and the testicles, a great number of unconscious connections were built up between these paired organs. It is likely that micropsia occurred on a number of such occasions and that the memories of micropsia while watching television are screen memories (although programs with sexual or aggressive content could easily have triggered off such episodes). After the bocce ball injury at age eight, which cemented the connection between "balls and eyeballs," the continuing visual overstimulation, which led to heightened castration anxiety, was dealt with by an experience (micropsia) involving the conflict-ridden area of visual perception itself. It is of interest, in this regard, to recall that a number of the articles in the literature in this field refer to early visual traumata (*cf.*, Bartemeier, 1941; Greenacre, 1955; Schneck, 1961, 1969, 1971). In these articles, however, no mention is made of concomitant testicular retractions, but most of them antedate Bell's (1961) and Blos's (1960) earliest expositions of this topic.

In order to understand the specificity of the symptom choice (micropsia) in Mr. A, we must turn our attention once more to the clinical data. In so doing, we observe that a number of important unconscious fantasies are delineated in these experiences. These fantasies clearly defend Mr. A from his intense anxieties and are, I believe, the generative force behind the appearance of the micropsia itself. In a schematic form, these fantasies may be represented as follows: (1) "It is not simply I who am small and inadequate and whose testicles and penis are tiny, far away, and unmasculine, it is also you (father, analyst). Besides, if you are far away, I do not have to see and to be made

aware of the disparity in the sizes of our genitals (as I did as a child when I saw your giant scrotum and penis) and to feel castrated." (2) "I not only hate you and wish to kill you (father, analyst, mother) because you are my oedipal rival, or because you have chosen and slept with my oedipal rival with his bigger testicles and penis, but I also love you and wish to protect you from my fearsome rage by keeping you safely at a distance." (3) "If we are all small and distant, I need not see that men and women have different genitals and need not fear the threat of being castrated, as my mother and sisters were." (4) "It is not you (mother, father, analyst, testicles) who have abandoned me because of my unacceptable anger and my incestuous wishes, it is I who have sent you away and can magically control you (and what I wish to see and not to see) and bring you back by blinking my eyes."

What I am suggesting in this schema is that micropsia serves to ward off castration (and separation) anxiety by means of a defensive denial in fantasy. I see the unconscious fantasies expressed above as leading to the emergence of the micropsia. This is accomplished by means of a regressive alteration of the ego functions involved in the maintenance of the stability and constancy of visual perception (more accurately, the apperception of the size, shape, and position of objects) in an individual whose visual perceptual apparatus has been involved in the types of conflicts seen in Mr. A's case.

The utilization of the mechanism of denial in fantasy and the modification of ego functions in the service of defense are reminiscent of what Arlow (1959, 1966) has described in two of his papers. In his 1959 paper, he noted how the *déjà vu* phenomenon occurs as the result of several defensive activities of the ego which combine to ward off the anxiety associated with the revival of a memory, wish, or fantasy. Such memories, wishes, and fantasies are treated in the *déjà vu* experience as "unreal, dreamlike or already past" (p. 625). Arlow commented on how the origin of the disturbance is projected onto a current situation, which then functions in the manner of a screen memory. He

went on to observe: "To these defenses is added the consoling thought with its corresponding affect, 'Don't worry, you have been in this kind of dangerous situation before and emerged safe and alive. The same will happen now' " (p. 626). This type of statement corresponds to the schematic fantasies I have described in Mr. A's episodes of micropsia. Similarly, in his paper on depersonalization-derealization, Arlow (1966) elucidated a fantasy in which the anxiety-provoking, predominantly aggressive drive derivative wishes attached to the participating aspect (as opposed to the observing aspect) of the self-representation were displaced onto the external world and then disavowed. My previous communications on depersonalization (1976b, 1977) have followed this line of thought.

By concentrating in this paper on the genetic interrelationships between my patient's traumatic visual experiences and his testicular retractions, I have not meant to imply that such interrelationships are to be seen as a general rule in cases of micropsia. This is obviously not the case, as many instances of micropsia occur in women. What I do wish to state, however, is that perceptual disturbances in one area (as may occur in conjunction with early illness or surgery) which are symbolically linked to disturbances in the eyes or in visual perception, through the medium of oedipal masturbatory fantasies, may interfere with the development of visual perceptual stability and constancy and may predispose a patient to episodes of micropsia in latency and in adult life. In addition, when we do see episodes of micropsia in an adult analysis, we should be aware of such genetically relevant disturbances during the oedipal and latency years.

SUMMARY

Episodes of micropsia, which occurred during the analysis of an adult male patient, are described in detail. The clinical data reveal the genetic significance for the development of micropsia in this patient of the interrelationships between a series of early traumatic visual occurrences in the patient's oedipal and latency

years and his marked testicular retractions. Anxieties arising because of the sense of perceptual inconstancy of the testicular size, shape, and position became displaced onto and symbolically represented in the symptom of visual perceptual inconstancy (micropsia). Masturbatory fantasies from the oedipal and latency years were seen to bridge the gap between the testicular and ocular areas and were found to be of dynamic significance in the onset of the micropsia during latency and in the reactivation of this symptom in the transference setting during the adult analysis.

The castration (and separation) anxiety aroused by the masturbatory fantasies was warded off by a series of unconscious fantasies of denial, which led to a regressive modification of the ego functions involved in visual perception (and to a loss of the sense of stability and constancy of the size and position of visually perceived objects) in the episodes of micropsia. The modification of the functions of the ego in the service of defense, which occurred in my patient's micropsia, is closely akin to that seen in such altered ego states as the *déjà vu* experience and depersonalization. In women and in patients in which testicular retractions are not of marked intensity, perceptual disturbances in other areas which are linked symbolically through oedipal masturbatory fantasies with the eyes may interfere with the development of visual perceptual stability and constancy and thereby may predispose the person to later episodes of micropsia.

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Conflict and Somatization: Psychoanalytic Treatment of the Psychophysiologic Response in the Digestive Tract

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CONFLICT AND SOMATIZATION: PSYCHOANALYTIC TREATMENT OF THE PSYCHOPHYSIOLOGIC RESPONSE IN THE DIGESTIVE TRACT

BY ROBERT A. SAVITT, M.D.

Somatization of intrapsychic conflicts, as manifested in the mouth, the stomach, the small intestine, the large bowel, and the anus, is described in this long-term study of the psychoanalytic treatment of three patients with peptic ulcer, regional ileitis, and ulcerative colitis respectively. The theoretical and practical aspects of treatment are considered, and the efficacy of and indications for psychoanalysis as the treatment of choice are discussed.

The process of somatization may become manifest in any organ system of the body. In the course of medical practice, the physician sees the physiological consequences of this process almost daily. In this paper, the process of somatization as it applies to the digestive tract is discussed in connection with patients who underwent psychoanalytic treatment and in whom some aspects of the somatization process were expressed in the mouth, the stomach, the small intestine, the large bowel, and the anus. Three cases are presented: a patient with peptic ulcer, whose analysis was terminated sixteen years ago; a patient with regional ileitis, whose analysis ended eight years ago; and a third with ulcerative colitis, who was treated from 1950 to 1954.

PATIENT A (PEPTIC ULCER)

Patient A was a twenty-eight-year-old married engineer. He was inclined toward bisexual behavior and had entered analysis because of conflicts over increasing homosexual interests which threatened his career as well as his marriage. Anamnesis re-

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vealed a history of peptic ulcer, although the ulcer was not causing the patient any difficulty at the time he entered analysis. The ulcer had first appeared when the patient was seventeen. At that time he complained of tarry stools and "coffee grounds" vomiting. He recovered from these symptoms after going to the country for a vacation on the advice of a physician. There were several subsequent recurrences, each diagnosed as peptic ulcer, the diagnosis confirmed by x-ray. When the patient was twenty-three, he was advised to have a gastrectomy, but he refused. He then married a nurse on whom he became emotionally dependent.

In the third session of his analysis, he reported a dream in which he desired homosexual union with the analyst by having the analyst penetrate him anally with his phallus. He reluctantly came to realize the unconscious meaning of this key dream only after a lengthy period of analysis. In the transference he responded to the analyst as if the analyst were a bisexual parent, representing both mother and father. The analyst was to "feed" him in a maternal fashion by inserting his phallus = breast into the patient's anus, unconsciously conceived as a mouth. In fact, for some months prior to entering psychoanalytic treatment, the patient had had frequent homosexual encounters in which fellatio and anal intercourse were prominent.

I have described this case in greater detail elsewhere (Savitt, 1969). What I wish to emphasize here is how the frustration of his wish to turn the analysis into a homosexual seduction led to a dramatic reliving of an earlier traumatic rejection by his mother, which had had serious psychophysiological consequences. In the course of his analysis, through the process of resomatization, this conflict reactivated the peptic ulcer from which he had suffered previously.

As gradually reconstructed, the history revealed that he had been conceived at a time of marital discord and that his mother had wished to abort him but had been prevented from doing so by religious scruples. In his early infancy, his mother did not feed him or take care of him. While she remained aloof and

cold, a number of devoted female relatives supervised his care. By contrast, his father was warm and loving: he played with him, fondled him, and kissed him. When the patient was six, his mother died. This was felt as the ultimate rejection. The father then emigrated with the boy from South America.

At five, the patient was seduced by a sailor who penetrated him anally. Homosexuality was part of his life thereafter, although he did marry at twenty-three. With his wife, he was capable of having intercourse of a predominantly preoedipal quality.

About a year before the patient began psychoanalytic treatment, his father died. This was a major trauma, a loss that disrupted his tenuous psychological security and reactivated a hitherto unrecognized mourning for his mother. A frequent lament since his mother's death had been, "Poor me, I am an orphan." He had been in a state of perpetual mourning for her, which he never resolved until the analytic work helped him to clarify various conflicts which had disorganized his life. With the loss of his loving, warm, maternal father, he was overwhelmed by an object hunger that intensified his homosexual impulses. His homosexual encounters represented desperate though unsuccessful attempts to restore the lost object. He became a homosexual Don Juan, a pattern of behavior that threatened to destroy his career and marriage and finally brought him into psychoanalysis.

In talking about his father, he described numerous anal masturbation fantasies in which he pictured his father inserting his phallus into his anus, exactly as it appeared in regard to the analyst in the first dream, reported earlier. This fantasy was extremely gratifying and made him feel as one with his father; it served to undo the painful reality of himself and his father as two separate entities. In the transference, a wish to fuse with the analyst was prominent. The patient had often masturbated by inserting phallic-like objects into his anus; when thus filled, he felt like a "whole" person. During intercourse with his wife, he would have a fantasy that his father was mounting him anally.

This fantasy made it possible for him to consummate the act. During the early phases of the analysis, the analyst was substituted for the father in the fantasy. From evidence reported earlier, I consider this an "anal hunger" (Savitt, 1969, p. 1032), a derivative of an early overwhelming oral hunger.

During the analysis, the patient suffered from very severe anal itching, and he developed anal verrucae at the time of the analyst's first vacation. This was interpreted as a somatized expression of his intense anal longing for the analyst. The patient wanted the analyst to see the warts, touch them, probe them, and treat them. He felt that the analyst's role as physician made it incumbent upon him to do so. This was analyzed as a further attempt to transform the analytic procedure into a homosexual affair. At the suggestion of the analyst, the patient consulted his internist, who confirmed the presence of anal warts and prescribed local applications of anti-pruritic powder. As the anal wishes were analyzed in the transference, the warts disappeared and the itching became minimal.

This experience I regard as a somatized response, a regressive longing for the emotionally nurturing object, the analyst, who was absent and had, in the patient's fantasy, replaced the maternal father. How strong was his need for the analyst to assuage his emotional hunger can be seen by the fact that later in the analysis he reported instances when he practically hallucinated the presence of the analyst. Whenever he did not see the analyst for two consecutive days, he experienced a tremendous sense of emptiness. He missed me, yearned for my presence, and looked for me wherever he went; sometimes he thought he saw me, only to be disappointed when he got a clearer look at the person whom he had misidentified. He frequently expressed the wish to eat the analyst and to be eaten by the analyst. He yearned to be engulfed and absorbed by the analyst, so that he could be reborn a whole person.

During certain analytic sessions in which the wish for fusion with me as maternal object was intense, the patient reported that he felt as if he were fused with the couch in a state of semi-

stupor. These observations may be interpreted in Lewin's (1950, pp. 102-107) terms as a regression during the analytic situation to a wish for union with the breast, a feeling of blissful satiation and a sense of engulfment by the couch-mother. In fact, at the end of each of the analytic sessions in which he reported this altered state of consciousness, the patient felt that it was an effort to "peel" away from the couch. The regression, however, was easily reversible, and the patient would leave the office fully cognizant of his surroundings and all that had happened. During the episodes described above, he would experience a change in body image: subjectively, he felt as if his mouth, face, hands, anus, and body swelled to enormous size. This was seen not only as a fantasy of conversion of the body into a phallus, but also as the result of satiation from the analyst as "feeder," an infusion of self-esteem (milk) and a mutual engulfment and merging with the analyst-mother.

In the course of the analysis, the patient revealed a striking example of an earlier somatization of the oral zone. At sixteen, about a year before he developed his stomach ulcer, he had experienced an overpowering need to suck. It was as persistent a desire as his earlier wish to suck his thumb, which had lasted until he was twelve. This need to suck seemed beyond his control; while sucking, he pulled at the buccal mucosa of his right cheek until a buccal papilloma developed. He had "created" in this papilloma a breast-nipple equivalent which he could mouth and suck at will. This constituted an internal maternal breast that could not be taken away. But it was a "dry breast" which gave no nourishment; it was as nongiving as his mother had been. Consistent biting, chewing, and sucking enlarged and macerated the papilloma; ultimately, it had to be removed surgically. With the loss of this part-object breast substitute, he sustained another oral deprivation, which may have been a factor in the original somatization of his oral conflicts that led to the peptic ulcer at age seventeen.

During the course of his intense hunger for love as expressed in the transference relationship, the peptic ulcer recurred.

Jacobson (1964) has stated, "In a patient's associations, imagery and memory material referring to oral deprivations may express deprivations during infancy which were not merely oral in the narrow sense of the term but may have been experienced in the entire realm of the complex mother-infant interrelationship. Frequently, psychosomatic manifestations associated with such 'oral' memory material gives us special clues to the early infantile past" (p. 36).

It will be recalled that the patient sought to make of the analysis a homosexual relationship. He had given up his homosexual behavior soon after the analysis began and had brought his dependent wishes promptly into the developing transference neurosis. By being repeatedly frustrated in his homosexual desires in the analytic situation, he relived the deprivation and rage of the earlier infantile relationship with his mother. Just as his mother had been unavailable to him as a physically and psychologically nurturing object, I too became an ungratifying, frustrating object. I was portrayed as the bad, aloof, rejecting, nonloving mother, against whom he directed his rage and murderous wishes. Just as his mother had died, he wished me to die. During this period of frustrated fury, he developed a peptic ulcer with typical "coffee grounds" vomiting and tarry stools. His conflict had once again become somatized.[1]

With the recurrence of the ulcer, it now became clear that the patient had a masochistic need to become sick with life-threatening illness in order to test how much the analyst really cared for him—how much he wished to rescue him, to love him and

[1] Margolin (1951) described the case of a patient who had had a gastrostomy: the gastric physiological processes could be observed through the large fistulous opening created by the surgery. He noted some of the reciprocal relationships between physiological stomach response and transference manifestations. Fenichel (1945, p. 245) called attention to the permanent hunger for love and its frustration as a factor in the etiology of stomach ulcer. Pathological tissue alteration occurs as a consequence of a psychogenic hunger which makes the person act as a physiologically hungry individual does in a sham feeding. The mucosa of the stomach then secretes in anticipation of a feeding which never comes about. Mirsky (1958) elaborated on this in his classic study on the etiology of duodenal ulcer.

"feed" him. Feeding meant yielding to homosexual relationships. It was repeatedly interpreted for the patient that this homosexual yearning was the latter-day façade for the earlier infantile need for love and acceptance from his mother, the kind of acceptance he had in reality received from his father. He came to see that his wish to manipulate and subjugate the analyst by seeking to compel a homosexual response was his way of restaging his futile childhood struggle with his rejecting mother.

In the course of the analysis, he also became able to separate the maternal and paternal components in the transference and to relinquish the concept of his father as a "two-in-one" parent. This facilitated the analysis of his relationship to his wife, whom he could now accept as a loving and giving person. His peptic ulcer healed. There has been no recurrence in almost twenty years.

On a few occasions after termination, he did consult the analyst, usually in connection with some current problem. Most often this concerned his competition with his wife in relation to the children. He felt that he was more of a mother to them than she was, and this led to quarreling. Before each visit, he experienced increasing "heartburn," presumably caused by gastric hypersecretion. In each instance, a few hours of consultation proved sufficient to resolve the current conflict and alleviate the symptoms.

PATIENT B (REGIONAL ILEITIS)

A thirty-two-year-old married male, the father of two children, was referred by his physician because of regional ileitis and periodic barbiturate addiction. The bowel pathology, confirmed by x-ray studies, had existed for eight years and was characterized by abdominal cramps and frequent loose, nonbloody stools, which could be controlled by paregoric. Dependency on barbiturates antedated the ileitis by about ten years. On two occasions the patient had required short periods of hospitalization for barbiturate detoxification. At the time he started analysis, he

was taking three grains of seconal nightly.

The patient's history revealed that he had been conceived premaritally. This unwanted pregnancy had forced a loveless marriage on his mother, from which she extricated herself by abandoning her child and husband when the patient was two years old. He was then raised by his paternal aunt, a strict, compulsive woman who was punitive and demanding. Because he was often away for months at a time, the father was a shadowy figure in the patient's life.

In the early years of his childhood the patient received occasional letters from his mother, devoid of endearing terms and never expressing any wish to see him. Until he was eight, she sent him small Christmas gifts. After that, all communication ceased. Like the peptic ulcer patient, he thought of himself as an orphan.

At times he would hear about his mother from relatives. In this way, he learned that she had remarried. When he was twenty-three, in response to his yearning to see her, he traveled to another part of the country in order to visit her. She greeted him in a matter-of-fact way, as if he were a stranger. He was relieved to find that she had no other children: he could take some comfort in the thought that he was her only child and in that way he was special. But he found himself raging at his mother's indifference. Shortening an expected two-week visit to just three days, he returned home. Several months later, he developed severe and frequent diarrhea which was diagnosed as regional ileitis.

Because of extreme loneliness, he resolved to create a family of his own. He married a motherly woman several years his senior and proceeded to father two children, toward whom he was very solicitous. Like Patient A, he competed in the "mothering" care of his children and often wished he had breasts with which to suckle them.

A repetitive memory from age seven revealed his extreme hunger for affection: one night he had crawled into his aunt's bed while she was asleep and had begun to suck on her nipples.

It was a disappointing "dry breast," and he was punished for his forward behavior.

The early transference relationship was of a clinging nature. In a repetitive dream he pictured a little girl dangling over a precipice and being rescued by an outstretched arm. The face of the rescuer was not visible. The analyst was identified as the rescuer whose face could not be seen. Another dream dealt with a caged hamster that was being fed with wet, spoiled food. He associated this to his daughter's pet hamster which was fed a concoction his daughter called "mother's food." He envied the love and care his daughter lavished upon her pet, while he saw himself as an imprisoned child deserted by his mother. What his mother had given him in infancy was conceived as "spoiled food." Subsequent work showed that his ileitis and diarrhea expressed a fantasy of ridding himself of the undesirable introjected mother. Also, the drugs he took represented the "spoiled" food which came from the mother's evil breasts.

After a few months, with the analysis of his feelings concerning the loss of both parents and his rage against the mother's "dry breast," the symptoms of regional ileitis subsided. It took more than a year of further work to free him from his dependence on barbiturates. The patient then remained relatively free of symptoms for the remaining five years of analysis. He suffered a relapse, however, six months after termination of treatment. This relapse will be discussed later.

PATIENT C (ULCERATIVE COLITIS)

About twenty-five years ago, when the patient was almost nineteen years old, he was referred for analysis by a colleague who had seen him in consultation four years earlier. The doctor diagnosed the condition as the early stages of ulcerative colitis. The patient was advised to enter psychoanalytic treatment, but the attending physician had rejected the suggestion. The colitis persisted, and when the attending physician suggested a colectomy, the patient's parents insisted upon psychiatric consulta-

tion. The consultant recommended a period of psychoanalytic treatment before any radical surgical procedures were undertaken.

The family relationship was one of the most salient features of the patient's history. He was the only child of parents who were utterly and "selfishly" devoted to each other. They excluded him from any genuine family experience and turned his care over to the maids in the household. In contrast to the two previous patients, who had suffered actual loss or separation from the mother, this patient experienced psychological abandonment. It would appear, however, that the trauma of this abandonment was perceived by Patient C as intensely as the other two patients had perceived their abandonment.

When the patient was fourteen years old, he was sent off to a military academy to "hasten his development into manliness." At the academy he found himself isolated and unable to compete in the rigorous sports activities. He was frightened by the rigid discipline. Within two months, he developed severe obstipation which did not yield to medical measures. He returned home and was hospitalized shortly afterwards for bloody diarrhea.

In the four years between the diagnosis of the ulcerative colitis and the time he entered analysis, the patient had been treated by intensive medical measures, including antibiotics and corticosteroids. At first the steroid therapy seemed to be helpful, but the intervals of bleeding became more frequent, necessitating hospitalization for transfusions. After a while, the side effects of steroid therapy became too troublesome and the treatment had to be abandoned.

When first seen, the patient was in so extreme a state of physical debilitation that it was decided to modify psychoanalytic technique by having the patient come to the office two or three hours a week and sit facing the analyst. The analyst's role was actively supportive. Only very gradually was there any probing to deeper levels, using dreams. The patient was terrified by the prospect of a colectomy. Many of his dreams dealt

with the theme of the destruction of the body and with castration anxiety. He welcomed psychoanalysis as an alternative to colectomy. His attitude was cooperative and he rapidly developed a positive transference.

After approximately three months, there was a gradual lessening in the number of stools and in the bloody diarrhea. At this point, technique was changed: the patient was placed on the couch and free association was employed. In the sixth month of analysis, while the patient was expressing rage against his parents for sending him off to military school, his symptoms worsened, and he had to be hospitalized for a transfusion. While he was in the hospital, a minor surgical procedure was performed at the muco-cutaneous junction of the ano-rectal area because of ulceration and infection. This incident created a crisis of confidence about the value of analysis, but after six weeks the patient decided to go on with treatment. In the ensuing three and a half years of analysis, the material concerned his sense of helplessness, his preoedipal and oedipal yearnings, and his rage.

Because the patient had been ill between the ages of fifteen and nineteen, he had missed much of his normal adolescent development. He had few friendships and a limited social life. After the symptoms of his colitis became manageable, he matriculated at a local college in a part-time, modified scholastic program in which he did well. He also formed some friendships. Eventually, he was able to have several satisfactory sexual experiences, which heightened his self-esteem. After two years of college he left to enter the family business, learning it rapidly and assuming positions of increasing responsibility. Because of his father's compulsiveness and rigidity, however, there were frequent quarrels. In the quarrels the patient found that he was able to verbalize his anger, which he had never dared do before. Despite the emotional tension of the quarrels, there was no recrudescence of the symptomatology of ulcerative colitis. The patient eventually left his father's firm for a firm of a similar nature where he proved his mettle and showed that he could

earn his own living.

Psychoanalytic treatment was terminated after more than four years, by which time the patient had clearly demonstrated maturation, with satisfactory progress in the economic, social, and sexual aspects of his life. During the last two years of analysis, the number of his bowel movements had decreased to one to three well-formed stools daily, with no bleeding. His internist acknowledged his return to good health, but cautiously wondered if this was merely a remission, with complications to come later.

Two years after termination the patient asked to see the analyst for several weeks of additional work because he had fallen in love with a widow and thought he might marry her. The woman was five years older than he and had two children. We discussed how the situation corresponded to his earlier verbalized need for a ready-made family as well as to his wish to become dependent upon an older, motherly woman who would treat him like a child. The patient decided to continue the relationship with this woman, whom he eventually married. The marriage has gone reasonably well. Physically, he remains in good health.

DISCUSSION

The dominant themes of being abandoned ("I am an orphan") and of rageful reactions toward frustrating parental figures ("the dry breast") were common to all three patients. Patient B, who suffered from ileitis, was, in fact, the most deprived of all. In his infancy, he had been deserted by both parents and left in the reluctant care of an angry aunt. This element may account for the fact that he suffered a relapse after experiencing a further real separation, i.e., termination of the analysis.

In evaluating the psychodynamics of these three patients, whose psychological conflicts led to somatization of portions of the alimentary tract, it is well to bear in mind the following. The infant's alimentary tract serves as the major avenue of communication between mother and child. More than being the

tract which ensures physiological survival, the oral cavity is the one perceptual zone which at birth operates with great specificity. It is the "cradle of perception" (Spitz, 1965, p. 82). Brody (1956) writes, "The tensions that are aroused by hunger are in the first instance physiological. They bring in their train a kind of psychic hunger that is not relieved by food alone. . . . The feeling of hunger comes in this way to arouse expectations of sensory experience beyond those related to the food itself" (p. 331). These experiences are "precursors to the abstract concept of mother" (Mushatt, 1975, p. 86). Spitz (1955) describes "the experiential world of the primal cavity. It is the world of the deepest security which man experiences after birth, in which he rests encompassed and quiescent. It is to this world that man escapes when he feels threatened . . ." (p. 236). This may account for the universal proclivity toward addiction (Savitt, 1963).

For Patient A, who suffered from the ulcer and had been rejected by his mother even before he was born, we may assume that the oral cavity very early became the site for experiencing major frustration and tension. Physical survival was made possible by the many surrogate mothers, the devoted female relatives. But the lack of maternal object constancy may have predisposed him to conflicts, as manifested by prolonged thumb-sucking and, later, by an insatiable urge to suck at the mucosal lining of his cheek, an activity which resulted in the development of a buccal papilloma. It may be speculated that since neither the thumb nor the papilloma provided nourishment to assuage the stomach's ever-expectant wish for satiety, the persistent conflicts eventuated in a peptic ulcer through the process of somatization.

What preserved Patient A was the fact that his father was utterly devoted and attentive and, in consequence, became psychologically the "two-in-one" parent referred to earlier. In subsequent development, the patient identified with this bisexual image of a parent, which led to a confused and diffuse sense of sexual identity and sexual roles. Patient A's craving for objects

was a manifestation of his psychic hunger which had an almost addictive quality. The thorough analysis of the patient's first dream demonstrated how the transference wish for a sexual relationship with the analyst was a façade for a more primitive oral hunger, in which the anus equaled the mouth and father's phallus equaled the breast. The vicissitudes of this primitive oral yearning clarify the phenomena of somatization involving the patient's mouth and anus.

Schur (1955) cites the example of the hungry infant responding to the absent breast and the missing mother as if it were a traumatic situation. In such a situation the pattern of maturational development may be reversed, and infantile types of diffuse, vegetative discharge phenomena may reappear. "The ego loses the capacity of secondary process thinking. It uses unneutralized energy and desomatization fails" (p. 128). Further, Schur says that his hypothesis "links resomatization to the prevalence of primary processes and the simultaneous failure of neutralization" (p. 128). This type of reversal can happen at any stage of life in an individual with a fragile homeostatic balance and, in fact, it is my hypothesis that this is what occurred in all three patients described in this communication. It is particularly well illustrated in the case of Patient A.

When Patient A's father died a year before he started analysis, he lost the "maternal" male object whose phallus symbolized the breast. He then became overwhelmed by an urgent need for homosexual coupling in which fellatio and anal intercourse occurred with great frequency. Ego regression ensued, with an intensification of primary process thinking and behavior. In this context, resomatization of the conflict in the form of a peptic ulcer occurred. His hunger for the phallus as symbolic breast was insatiable. With the gratification of his psychic hunger through homosexual activity, a tenuous form of homeostatic balance was established, and a desomatization with healing of the ulcer occurred. By working through his sense of object loss in the transference, he was able to deal adequately with the process of desomatization: homosexual relationships were no

longer required, and he could now turn to his wife as the more adequate and gratifying object for the assuagement of his psychic and sexual hunger.

Melitta Sperling (1959, 1969) demonstrated how separation from the mother can bring about the onset of attacks of ulcerative colitis in predisposed individuals. This happened in the case of Patient C when he was sent off to military academy. Sperling (1968) regarded "the occurrence or recurrence of psychosomatic symptoms during the analysis . . . as transference phenomena indicating a change from overt acting-out into somatic acting-out" (p. 253). This occurred in the case of Patient A, who gave up homosexual activities soon after analysis began but then directed his pregenital needs into wooing the analyst. When this wish was not gratified, he became enraged and treated the analyst as if he were the rejecting mother. It was during this time that the peptic ulcer reappeared.

These findings emphasize the need for analysts to concentrate on the somatic symptoms that appear in the course of treatment. Mushatt (1975) believes that the study of these symptoms is often neglected during treatment. Accordingly, the patient "tends to retain greater potentialities for reactivation of neurotic patterns under stress . . ." (p. 103). Deutsch (1959) has made similar observations.

Weinstock (1962) made a survey of twenty-eight ulcerative colitis patients treated by psychoanalysis. Twenty-two were symptom free for periods ranging from three to eighteen years. Six of these required interruption of treatment and rehospitalization because of increase in severity of symptoms. When psychoanalytic treatment was resumed, the patients went on to complete remission. This is precisely what happened in the case of Patient C, described in this report.

Daniels, et al. (1962) emphasized the value of having the patient who has been treated psychoanalytically for ulcerative colitis return for consultation during times of emotional and physical stress. In the case of Patient B, his bowel symptoms and his addiction to barbiturates recurred several months after treat-

ment. Although he knew that he could return for further therapy and was urged to do so by his internist, he refused because he felt that he had been abandoned by the analyst. Although the termination had been gradual and planned for a long time in advance, it had nonetheless been equated with the traumatic abandonment by both parents during the patient's early childhood.

The separation-individuation process appears to have been worked through successfully in the cases of Patients A and C. They were able to emerge from the "protective shield" and the "symbiotic orbit" described by Mahler (1968). This, unfortunately, was not the case with Patient B. Analysis apparently had remained for him unconsciously a source of (emotional) nourishment. A more prolonged psychotherapeutic relationship might have been helpful.

SUMMARY

The process of somatization is a universal phenomenon that may become manifest in any organ of the body. This paper focuses on the somatization of intrapsychic conflicts as manifested in the digestive tract. Clinical material from the psychoanalytic treatment of three patients illustrates the somatization process as it affects the mouth, the stomach, the small intestines, the large bowel, and the anus. The impact of separation and object loss is emphasized in all three cases.

For psychosomatic disorders of the digestive tract, classical or modified psychoanalytic treatment has its proper place among the therapeutic choices available in medical practice. Certain alimentary tract problems fall within the province of clinical medical therapy or surgery, as well as within the province of psychiatric treatment. Cooperation between the three areas of competence is essential. When a gastrointestinal disorder has not responded to treatment by the gastroenterologist and when radical surgical intervention is contemplated, it is sound

medical practice to give the patient the benefit of psychoanalytic consultation before a final decision is made.

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Reasons for the Freudian Revolution

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REASONS FOR THE FREUDIAN REVOLUTION

BY LAWRENCE FRIEDMAN, M.D.

Freud's revolution may be viewed as the discovery of a way of locating in the mind objective entities which can be studied like physical things. If Freud's is representative of scientific revolutions, perhaps what Thomas Kuhn has described as a change of paradigm might generally consist of the demonstration of new entities. This particular revolution occurred in the setting of a prevalent concern about the entities underlying all of the sciences. Because of his genius for structural thought, Freud was able to respond satisfactorily to a challenge that all the sciences were facing. It is that common challenge rather than a popular exemplary model, such as mechanics or hydraulics, that shaped Freud's theory.

The philosophy of science is not a tribunal. Science judges itself. The philosophy of science is an attempt to understand what scientists do, and it advances by a respectful examination of theories which have seemed fruitful. If the psychoanalytic revolution was fruitful, it should teach us something about how hypotheses are formed. To draw lessons from such a complex theory as Freud's, it is necessary first to construct a hypothesis about the essential functioning of the system. The hypothesis I use is illustrated in previous papers (Friedman, 1976b; Friedman, 1977a, 1977b) and in what follows.

THE ISOLATION OF A PSYCHOLOGICAL ENTITY

Studies on Hysteria (Breuer and Freud, 1893-1895) investigated an entity consisting of the memory of a trauma. That entity is

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enmeshed in a larger, whole-mind process of synthesis or discharge. The entity within the mind was later portrayed as a repressed wish. But even before thus refining it, the theory emphasized its distinctness as an entity. Repression, i.e., separation from the rest of the process, was hypothesized even before wishes came on the scene. Breuer proposed, and Freud (hesitantly) accepted, that the separation could be explained in terms of weakness of the synthesizing process. That was the basis of Janet's complaint of plagiarism. But Janet was more one-sided in emphasizing process rather than the segregated entity.[1]

It is illuminating to consider the brief moment in the development of Freud's theory between the time he postulated a noxious entity and the time he replaced it with a conflict of wishes (1892-1895). During this time, a conflict of wishes was implicit in Freud's account. But he did not spell it out. As Jones (1953, p. 285) says, the "idea of a volitional repression dawned gradually." In *Studies on Hysteria,* Freud was content to describe the relationship of noxious ideas and ego as one of incompatibility, even though his understanding of it as an instance of "moral cowardice" showed that he *could* have defined it more precisely. With regard to *Studies on Hysteria,* what is important is the incompatibility—the unassimilability—the separateness of the idea, rather than the reasons for the barrier. Whether the traumatic idea is inadmissible to consciousness because it is simply frightening, because it is embarrassing, or because it is self-defeating, does not seem to matter. What matters is that it is kept separate from other mental processes. Indeed it is a very formal treatment of the problem and not at all the poetic *Sturm und Drang* search for conative conflict that

[1] Janet (1919, pp. 235-239) conceived of the "idea" as primarily a command, propelled by instincts. Higher grade, deliberative functioning requires more energy than lower grade functioning. If enough energy is supplied, ideas are synthesized with each other; if energy is deficient, they are more multiform. Janet's accusation that the Freudian catharsis is simply a rewording of his own conception of reversing dissociation (Jones, 1915, p. 381) ignored the difference between a phasic theory, in which an idea, conceived of as a thing, may in a sense be eliminated, and a process theory, in which the idea is adjusted or melded into the whole. Freud's theory ultimately combined both aspects.

is sometimes imagined to have been Freud's point of departure.

Freud's (1892-1893) order of priorities can further be seen in the casual way he used the notion of the "distressing antithetic idea," which he had borrowed from Charcot, who had borrowed it from Reynolds (*cf.*, Andersson, 1962, p. 54). (It is also to be found in Herbart [*cf.*, Ribot, 1886, p. 41].) In his very early writings, this term marked the place that would later be occupied by the whole history of intrapsychic conflict. According to Freud's use of the concept, assumptions that future events and one's own efficacy will be satisfactory are always surrounded by thoughts that, instead, unfortunate events will occur (antithetic ideas aroused by expectations), and one will perform incompetently and shamefully (antithetic ideas aroused by intention). These dismal ideas are normally balanced by the predominant, healthy ones, but in neuroses they may be intensified for a number of reasons, including an unexplained lowering of self-esteem.

As regards antithetic ideas aroused by expectations, the consequences of intensification are just what we would expect, namely, "a generally pessimistic frame of mind" (Freud, 1892-1893, p. 122). Obviously, the concept of antithetic ideas would never have been introduced solely to reach this conclusion, which explains pessimistic thinking by a propensity to think pessimistically. What Freud found useful is the notion of an intensified antithetic idea aroused by *intention*. With regard to such ideas, Freud saw two possible neurotic effects. If intentions and intensified, associated antithetic ideas were combined with each other, the result would be a "distrust of the subject's own capacity," manifested in a *folie du doute,* though Freud added, as though he were simply elucidating the distrust, that the antithetic idea subtracted from the volitional idea and caused "weakness of the will" (1892-1893, p. 122).

But the whole discussion was really designed to introduce those intensified, antithetic ideas produced by intention, which were dissociated from consciousness. Such an idea "can put itself into effect." It "establishes itself as a *counter-will*" (Freud,

1892-1893, p. 122; see also, Breuer and Freud, 1893-1895, p. 92). It was for this explanation of the apparently counterpurposive activity of his patients (Breuer and Freud, p. 95) that Freud welcomed antithetic ideas.

Whereas the formula concerning antithetic ideas produced by expectation is a simple tautology, the formula for antithetic ideas produced by intention is almost sleight-of-hand. On a common-sense level it is mildly persuasive until we ask what precisely the antithetic idea *is*, and what, in fact, it is antithetic *to*. In the formula for self-doubt, the antithetic idea is a pessimistic expectation, and what it is antithetic to must be another expectation. I suppose one can continue to picture the antithetic idea as a pessimistic expectation, even while it "weakens" the will, on the grounds that hopelessness diminishes striving. But what kind of idea is it that, being put into effect, produces an opposite *striving*? Surely that is not just an expectation. When an expectation is fully in effect, it is simply a fully believed expectation. If, on the other hand, an idea is such that its realization is a purposeful deed or will, then it must have been a volitional idea to begin with, antithetic not to an expectation about one's ability, but antithetic to a volition.

Janet could assume that an idea of any kind is primitively an imperative. According to his account a dissociated idea would function naturally as a command. However, once Freud had distinguished between volitional and nonvolitional ideas, this path was no longer open to him. Thereafter, if dissociated ideas were considered autohypnotic suggestions, it remained to specify whether and why the suggestion was for an action or a hallucination.

I apologize to the reader for belaboring what has been obvious, even from the vantage point of psychoanalytic theory a bare few years later. I dwell on this equivocation between expectations and wishes—this unconcerned ambiguity about expectant ideas and volitional ideas—because if we can see an area where Freud was lax, this may teach us which matters he was more attentive to. For at least three years Freud entertained the hypothesis that

a doubt about one's ability, if unchecked by other thoughts, naturally turns into a *decision* to fail. This, I submit, is not the kind of formula that an investigator would propose who was currently focusing on the nature of intrapsychic conflict, and I have argued elsewhere that it was a stage of theory-making in which the wholeness of the mind was just about to give way to its division into parts (Freidman, 1977a). During this period of time, Freud's theory included ideas which arose from mere logical possibilities; and it included a will which really sprang from nowhere. Such evidence suggests that his initial interest was to outline a system that handled separate, interfering ideas and purposes, whose origin was at that time of secondary importance.[2]

It was only after the separateness of the noxious idea was firmly established that the logic of the situation demanded that the antithetic idea be treated as seriously as the main idea. At this subsequent point, the theory finally concerned itself with the origin of the "counter-will."

I certainly do not mean to deny that empirical findings affected the theory's development. Freud's first experiences, be-

[2] This probably also explains why Freud as a therapist continued practicing suggestion, despite his allegiance to Breuer's cathartic technique, a fact which has puzzled historians (e.g., Andersson, 1962, p. 90). The theory was not ready for the practice. Breuer's discovery was first used to *isolate* the entity. The nature of the entity was of secondary importance. Therefore, treatment was first directed toward exorcising the entity. The theoretical implications of abreaction per se were only gradually worked out and only then did Freud rediscover it for his practice. These theoretical implications have to do with visualizing the traumatic entity as acting from within, rather than against the mind process, i.e., making it a part of the mind rather than a foreign body. Only after that was established theoretically, could one reasonably use suggestion to make the patient do a piece of psychical work rather than to relieve symptoms directly (Freud, 1924, pp. 42-43). This is the reverse of Jones's rule (1953, p. 51) that new techniques lead to new theory. No doubt that happens, but the situation is not always as neatly empiricist as that.

It is true that Freud said that he abandoned hypnosis and suggestion because of therapeutic failures (1924a, p. 27). General experience suggests, however, that therapeutic failures do not necessarily by themselves discredit methods of treatment that are attractive for other reasons. Freud himself adds other reasons for having abandoned the techniques, e.g., his feeling of inaptitude for hypnosis and discomfort with the deliberate dishonesty of suggestion.

ginning with the story of Anna O, told him about memories, and he only gradually came to hear about wishes. The volitional history of antithetic ideas took a while to reach his ear. But when it did, there was a slot in his theory waiting for it, and conflict and censorship were already in place to serve their purpose. Hartmann (1956, p. 277) accepted Freud's assertion that he disowned the hypnoid hypothesis because he was thinking motivationally. I believe that we have reason to add that he was able to think motivationally because he already had spent some profitable time thinking structurally.

Despite a superficial similarity between Freud's first formulation of antithetic ideas and Janet's hypothesis, there is an important difference which reveals Freud's characteristic approach. Janet was concerned that wherever the ideas came from, there was more or less synthesis, because there was more or less synthesizing power. Freud was concerned that wherever the ideas came from, they maintained a certain separateness, despite their involvement in a common process, and that meant that the process itself could be seen as arising out of certain entitized systems.[3]

[3] Pollock (1976, p. 137) holds that Breuer indulged in more psychological speculation than the modest and empirical Freud, partly because Breuer was more removed from the practice of psychotherapy. If that were so, one would have expected Freud to immediately center his thinking upon abreaction, which had been Breuer's main clinical discovery. As we have noted, he did not, and I have tried to show that he did not do so precisely because he was not an "empiric," but a speculator—a theory builder. Breuer wrote the theoretical chapter of *Studies on Hysteria*. But my contention is that Freud was, if anything, more theoretical than Breuer, more systematically following the theoretical needs of the moment and temporarily ignoring other empirical problems (e.g., the difference between expectations and desires among antithetic ideas). When he later picked up the question of where oppositional ideas come from, it was as much a theoretical next step as it was a result of experience. Freud took this step not just because he listened to his patients, as Stewart (1967, p. 33) makes it seem. The origin of antithetic ideas was something that had to be looked for. According to the way the concept of the antithetic idea was originally formulated (imprecisely), the memories that Freud had already heard from his patients were irrelevant. Even the drift away from the hereditary theory of dissociation, which we can see in the discussion of antithetic ideas, was not just a result of the empirical evidence that some very able people were subject to hysteria, but resulted

On the other hand, where information about the history of pathogenic ideas was lacking, as in phobias and some neurasthenias, Freud, like Janet, discussed those disorders in terms of process theory—synthesis and working-over of libido in the psychic process (Freud, 1894a, p. 193). (The discussion anticipated current process theories, such as that of Gendlin [1964]). Further empirical evidence was necessary before a comprehensive theory of symptom-formation could be propounded. Freud used this temporary mystery about the psychogenesis of phobias and neurasthenias to flesh out the process aspects of his theory, and for that reason he was probably less impatient than he otherwise would have been to find a psychogenesis for those neuroses. Later, having analyzed process into developmental phases, Freud was in a position to look for the ways in which his memory entities could be transformed into various syndromes. Those entities—now perceived as persistent wishes and fantasies—could at last be correlated with at least some of what he had for a while considered to be nonideational neuroses.[4]

We have noted that the original entity—trauma, idea, wish, wishful fantasy—was chiefly marked by its polymorphous manifestations covering both physical and mental areas. (It is not accidental that "vicissitudes" has become the shibboleth of psychoanalysis.) As variations on a given entity were worked out, the forces that affect it were also spelled out, beginning with an ego that at first resembled an institutionalized *amour propre,* but became progressively more specialized. Elaborating on the interplay of a dischargeable entity versus countervailing forces made the picture become progressively one of wishes more or

also from the new availability of an alternative to the hereditary theory, namely, the foreign-body depiction of trauma, which gave dumb clinical experience its tongue and allowed it to speak to Freud. Janet also listened to his patients. But his theory made him less interested in how normal ambivalence and the strength of distinct wishes affected the hypnoid state.

[4] In saying this, I am declining to accept at face value Freud's own statement (1924a, p. 26) that a psychotherapeutic impasse is what led him to attribute a physical rather than a mental causation to neurasthenia and phobias. After all, he had allowed paranoia a mental causation, despite what must have been very limited therapeutic success.

less modified by institutions, or by other wishes, and by internal representations of reality. Thus all psychic phenomena could be described as the expression of the wish-entity undergoing modification from its environment (*cf.*, Wyss, 1966, pp. 104-105; Ricoeur, 1970).[5]

The notion of compromise formation, which was finally set down as a paradigm, was implicit in the theory from the beginning. Freud's theory viewed mental phenomena as expressions of a wish-entity interacting with something else. The ultimate definition of the wish is left to the patient as he free-associates in the course of a psychoanalysis. That is why Ricoeur calls psychoanalysis a *semantics* of desire. In this respect psychoanalysis ends up examining an entity which, in a sense, defines itself. The theory states how it functions in the system, but its precise description is (ideally) the patient's[6] (*cf.*, Friedman, 1975).

This, then, was Freud's answer to the nineteenth century problem of how we can make a nonarbitrary definition of elements. One can readily see how it differs from other attempts, such as Marxism, positivism, and historicism, although it approaches most closely to the last.

THE EMPIRICAL FUNCTIONING OF EARLY PSYCHOANALYTIC THEORY

In Freudian theory the mind is regarded as an entity that can

[5] E. B. Holt (1915) was probably the first to recognize the central significance of the wish in Freud's system; he compared it to atomic theory (p. 47). But precisely because Holt treated the wish as a process and not as an entity, his beautiful essay misinterpreted Freud along the lines of functional psychology; that is, he interpreted only the process aspect (anticipating Pribram, 1976). See also, Ritvo (1970, p. 202), who says that all mental process amounted to wish-fulfillment in the *Project for a Scientific Psychology*.

[6] Note, in this regard, Andersson's (1962, p. 58) point that Freud and Charcot differed from Bernheim in relying on the patient's meanings, rather than defining the mental happening entirely in terms of the hypnotizer's meanings.

be divided into other entities. The whole mind is a divided entity that is characterized by principles of conflict and synthesis (*cf.*, Friedman, 1977a). That much was anticipated by prepsychoanalytic philosophy, which, in Germany, had often referred to the synthesis as apperception, and which, as in the voice of Herbart, had said that if the parts are real, their sharing of the same stage must be represented by conflict. A theory that ignores conflict will emphasize unity at the expense of examinable parts—it will be a process theory, and its variables will tend to be restricted to the categories of more and less, as in Janet or Meynert. Such a theory may satisfy a philosopher, but it will provide little empirical foothold.

In order to say something particular about process, one must be able to trace the impact of external events through the mind process. In order to do that, one must find the parts of the mind that carry that influence and trace the history of those parts; and that requires an identification of parts or entities.

Right from the beginning, Freud's theory generated those parts. The first such entity was a memory of a specific kind. There are an infinite number of memories one might single out. What makes Freud's "memory" a *thing* is the fact that it shows itself in various ways, physical and mental, and is demarcated from the flow of experience by conflict—a demarcation that announces itself in the resistance of the memory to consciousness.

Corresponding to the memory are specific events in a person's life, which can be looked for empirically. Thus Freud's entities enabled him to make specific discoveries about important events in the lives of his patients. His theory spotlighted traumas, pointing to events which could be studied for lawful correlation with psychological states. One example is the correlation of childhood seduction with hysteria, which was shortly after disproved—an empirical fate that could never overtake such purely philosophical theories as Herbart's. The hunt for the trauma was an empirical investigation inspired by a theoretical construct (which had been suggested by an empirical phenomenon). It is not simply because Freud "listened to his patient" that he

knew that there was something to hunt for.[7] Others had listened, too, but with no entity in mind to give reality to an underlying regularity which could be studied; they had been at a disadvantage.

Next Freud examined the array of clinical symptoms in traditional functional syndromes and tried to organize them as manifestations of a memory entity undergoing different processes. The result was the theory of defenses. But he was unable to locate the memory entity in several illnesses—neurasthenia and the phobias—and turned his attention to the process that deals with the entity. He postulated a prepsychological phase of the entity that could be expressed either in representation or in anxiety, depending on whether it was taken up and worked over by the mental process or not. Worked over entities, he postulated, could be represented psychologically and then gratified or frustrated, or else worked over less and segregated by dissociation (Freud, 1894b).

This energic elaboration of the process in turn led to a redefinition of the psychological entity as a wish. It was the wish that had many embodiments and constituted an empirical entity, whose "vicissitudes" could then form the basis of an empirical study (*cf.*, Stewart, 1967, p. 136). After Freud had established the wish as an entity, he was able to use dreams to examine the process that deals with wishes.[8] This in turn led him to an empirical correlation between dream phenomena and conscious associations.

Freud had already realized the possibility that age variations could account for different processing of similar entities. Traumas at different times in life were handled in different ways. Now that the entity was a wish, he could look for the way age affected desires. This set the stage for the discovery of regularities in psychological (sexual) development, which in turn

[7] Freud (1924a, p. 21) said that *Studies on Hysteria* "hardly went beyond the direct description of the observations," but this was the modesty of a man whose higher level theory was so elaborate as to obscure the novelty of its elements.

[8] Amacher says that only when Freud saw that wishes were involved did he become interested in dreams (cited by Ritvo, 1970, p. 202).

inspired him to hunt for the disguised wishes that had eluded him earlier (fantasies, etc.).

LESSONS FOR THE PHILOSOPHY OF SCIENCE

Philosophers of science search for the criterion of better and worse among theories and for the reasons why theories are changed. Empiricists demand of a truly scientific theory that it be possible to invalidate it or its component parts (Popper, 1974). But they cannot agree on what the validation and invalidation procedure consists of (Lakatos and Musgrave, 1970).

Thomas Kuhn (1970a, 1970b) believes that confirming and disconfirming are procedures that relate particular descriptions to general theories, rather than relating either to reality per se. During intervals of what he calls normal science, a theory is assumed, and what is confirmed or disconfirmed are ways of making the theory square with the data: he calls this "puzzle-solving." At certain periods in history, anomalies arise that create dissatisfaction with the theory. Kuhn's special point is that it is extremely difficult to say what differentiates an as yet unsolved normal puzzle from an anomaly. Whatever it is, Kuhn claims that it is not a signal that forces the abandonment of the old theory. Rather, there is something in the evolution of thought that allows the data to be seen (at least by some observers) in such a different way that the discrepancy does not appear to be satisfactorily solvable by the old theory, but makes it look like a normal puzzle for a new theory.

According to Kuhn, the new theory requires a new Gestalt. It cannot be simply described in terms of the old theory, and ultimately it cannot actually be proved. It is conveyed to those who are receptive as a new way of solving puzzles, and when it becomes the standard and accepted theory of its science, that science will continue to be taught by example and practice of solving puzzles in the fashion prescribed by the theory.

Psychology, according to Kuhn, has not matured to the point at which evolving paradigms are generally accepted by the sci-

entific community. Accordingly, schools of thought multiply, the scientific community never shares a consensus on a paradigm, and there is no unilinear development of theory. This observation seems distressingly apt. But Kuhn may have drawn too sharp a line between preparadigmatic and paradigmatic thought.[9] In general, the *genesis* of a paradigm is what is least clear in Kuhn's account.

Psychoanalytic investigation, whatever one may feel about its "scientificness," has certainly been more empirical than, for example, Herbart's speculations, and even its critics often take a good many of its terms as simple facts of the mental world that present puzzles which the critics feel better able to solve. If we could show that Freud's theory is an example of scientific paradigm formation, we might have a better idea of what a paradigm is.

We have seen how Freud was able to pose for himself problems in the genesis and interrelationship of symptoms by postulating an underlying entity with variable modifications. That postulation allowed him to divide the continuum of psychological phenomena into supposedly natural categories. There is little point in thinking about an arbitrary collection of adjectives, but one can profitably think hard about real things. One can hunt for influences on them and discuss regularities in their interrelationship. Therefore, Freud (1900) very explicitly set out to deal with the mind as though it were an ordinary *thing* in the world: "The unconscious is the true psychical reality; *in its innermost nature it is as much unknown to us as the reality of the external world, and it is as incompletely presented by the data of consciousness as is the external world by the communications of our sense organs*" (p. 613). Just five years earlier, Durkheim (1895), trying to lay a foundation for sociology, had written that "social phenomena are things and ought to be treated as things" (p. 27).

[9] At the end of his career, Popper (1974, p. 981) has come to believe that the demarcation between "metaphysics" and science must be roughly rather than sharply drawn.

This must be an early phase of every science. We would never have advanced to quantum physics without it. If a photographic plate had no more claim to "thing-ness" than the shadows in the laboratory, nothing significant would have happened in that laboratory. Of course, the underlying reality of these "things" is what the science progressively defines. Their ultimate nature cannot be shown at the start of the investigation. But the assumption that they have an underlying reality is the *basis* for observation.[10]

This is also true in psychoanalysis (*cf.*, Freud, 1924b, p. 57; 1900, p. 613). The underlying entity, whether it is instinct representative or raw, primitive wish, is known only by its manifestations, as are all objects or entities. But it is by viewing the mind as composed of such entities (and as itself being such an entity) that Freud was able to pose puzzles and propose solutions. As with all paradigms, one shows the entity by the way one specifies important puzzles and goes about solving them. With this in mind the psychoanalyst seems much less arrogant when he says that the truths of analysis can be perceived only by those who submit to it. That is how paradigms are taught and shown.

The Freudian revolution was the discovery of psychological entities that could be seen in multiple guises. Investigation of those entities constituted what Lakatos (1970) called a research program, which culled data and regularities out of emotional life.[11] Perhaps we can generalize and say that scientific revolu-

[10] When Freud does what all scientists do, i.e., attributes "thing-ness" to what he is studying, Wyss (1966, p. 450) mocks him as reviving Aristotle's entelechies.

[11] Lakatos's description of scientific theories as research programs ought to attract the interest of psychoanalysts, who are continually attacked for the supposedly unscientific suspiciousness with which they view doctrinal modifications. Their parochialism can be defended on the grounds that psychoanalytic theory is a special way of looking for empirical data, and its essence (about which, of course, there might be disagreement) has to remain identifiable in order to carry out that project. Those who feel that the notion of orthodoxy is totally inappropriate probably regard scientific theories as patch-works gathered from empirical data. Their difference from orthodox attitudes may be analogous to the difference between a road map and the game known to children as a treasure hunt. A road map is put together piece by piece from assembled bits of isolated information. A treasure hunt is a sequence of puzzles, the solution of one leading

tions and paradigm formation consist in the discovery of new types of entities or objects. That would be consistent with Cassirer's (1957) view that thinking advances by finding conceptual intermediaries between ourselves and experience, concepts being the epistemological counterparts of objects or entities.

Since a concept supposes an entity that underlies an infinite array of phenomena, no formal definition can be given it without tacitly including the notion of "thing." One cannot make a list of the properties of an actual thing because they are infinite. There are, for instance, innumerable tests that will never be run on it and potential reactions to circumstances that will never occur. To describe it, one can only mention a few of its properties and indicate that they belong to a thing. Accordingly, one illustrates the wish by its "vicissitudes" (or, as Freud said, the unconscious by the data of consciousness). One cannot set out a formula for it, and as Freud pointed out, it is in this respect exactly like any other natural thing.[12] Speaking poetically, we could say that every natural thing has a hidden aspect just as the mind has an unconscious. But in the first place, "hidden" should not be taken as literally as it was before Kant. And in the second place, the unconscious (insofar as it can be "made" conscious) is itself the manifestation of something still more "hidden" (for instance, an instinct representative).

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to the discovery of the next and, ultimately, to a sought treasure. Errors in a road map can be corrected on the spot by a mere erasure and substitution. Tampering with the clues of the treasure hunt before it is completed will completely destroy it. The most intolerant critics of orthodoxy may be viewing as a road map something that is more akin to a treasure hunt.

[12] Freud wrote that in the light of what was learned from hypnosis, the unconscious no longer remained a philosophical conception, but became something actual, tangible, and subject to experiment. Elsewhere (1924b, p. 217), he wrote, "Analysts, too, refuse to say what the unconscious is, but they can indicate the domain of phenomena whose observation has obliged them to assume its existence." He explained (1924a, p. 57-58) that the natural sciences do not begin with clear-cut definition. Terms are explained to begin with by reference to the realm of phenomena from which they are derived, and are made clear and constant by progressive analysis.

THE TIMING OF THE PSYCHOANALYTIC REVOLUTION

Why did the Freudian revolution occur when it did? I have suggested that thinkers of the nineteenth century were generally in quest of natural entities (Friedman, 1977b). But I have also argued that entity-hunting is the universal procedure of science (Friedman, 1976b). What was special about the nineteenth century?

1. Possibly, we must give some credit to the sheer accumulation of philosophical sophistication. Issues of mental atomism and wholism, although debated from very early in Western thought, had been worked on more and more specifically, and the experience of coping with more and more difficulties may have rendered models increasingly adequate.

The picture of philosophy as *advancing* may bring a smile to the reader's face. The alternative and currently more popular view is that styles of thought are not strictly comparable with each other and thus cannot be viewed as more or less advanced. The virtue of the popular, relativistic approach is that it highlights the central, organizing principles prevalent at a particular time, rather than viewing earlier beliefs as rudimentary attempts to do what later thought finally accomplishes.

Foucault (1971) has presented a very compelling picture of a shift between the sixteenth and the twentieth century in the sort of thing the intellect sought—the kind of thing that was felt to constitute knowledge—i.e., the form it was felt an explanation should take. Foucault argues that the various sciences are born out of their contemporary premises, rather than being inspired by the lure of their "objective" subject matter. In his view, the subject matter itself is a creation of history. Thus he sees nineteenth century organicism as a decision to seek hidden, invisible realities that structure appearances and provide the individual with identity.

Foucault presents his own rather difficult theory of the significance of psychoanalysis and the human sciences. But if we

were to take just so much of his general attitude as would bear upon the approach presented in this paper, we would have to say that psychoanalysis arose in the nineteenth century because the nineteenth century was *sui generis* an age of entity-hunting. If I can be forgiven a crass and oversimplified way of putting it, the mind had to become an entity on its own, not because there was no longer a Divinity for it to mirror, but because mirroring or representing something was no longer of interest—it was no longer felt to be explanatory.

The idea that thinking unaccountably reaches toward totally different goals in different historical periods is a difficult one to accept. In its favor are the evident profusion of man's creative works and the open-endedness of history. But we will certainly not accept it until we have tried every way to demonstrate the existence of continuities. Thus, Foucault has been attacked by Piaget (1970) for ignoring the transformational relations between one system of thought and another. Hayden White (1973a, 1973b) tried to reduce Foucault's creative, new epistemes to the sequence of changes determined by the forms of human grammar, thus unifying the history of ideas, in effect, as ringing the changes on possibilities of predication. What is particularly interesting to observe is that Foucault's earlier epistemes bear a striking resemblance both to Piaget's (1951) prelogical stage of infantile thought and to Lévi-Strauss's (1966) "savage thought." Although Lévi-Strauss strongly sides with Foucault against the discrimination of thought as more or less advanced, *his* defense of "savage thought" includes the finding of similar styles in our current sciences. All of this strongly suggests that however different their styles of approach, the various epistemes have been trying to attain at least something of the same goal. To me, Cassirer's (1957) picture of the progressive objectivization of knowledge most satisfactorily describes what all of these writers have brought forward as evidence. That is why I think that we cannot do without the factor of increasing sophistication over time, in the sense that men do gradually realize, for instance, that arbitrary classifications will never take

on a natural endorsement no matter how long pursued.

2. An argument could be made that eighteenth century secularization diluted the explanatory dynamism previously supplied by theology and thereby created a need for a new way to understand the direction of natural processes. The disintegration of the unified, medieval world-view that distressed the nineteenth century sociologists (Friedman, 1977b) might have inspired a search for new natural units or objective entities (as it clearly did in sociology)—entities which would contain their own principles of development. That would set the stage for the elaboration of psychoanalytic theory which, I have tried to show, is a combination of process and entity conceptualizations.

3. Since psychoanalysis is a theory concerned with individual persons, one would have to consider what in the times favored a focus on the individual. The mind-body problem, for instance, seems to become an issue in history to the extent that the individual is the center of the intellectual and artistic stage, as, for example, in Classical Greece. We have seen that the nineteenth century was preoccupied with the organic. To some extent organicism or historicism *is* just such a focus on the individual. The organicist bias also favors theories that balance static and process elements.[13] In this way, sociopolitical developments may have helped to pave the way for psychoanalysis.

4. Nineteenth century successes in the physical and biological sciences probably made the human sciences seem more likely to pay off. Pribram (1976) has cited the sudden advance in brain anatomy and neurophysiology which, in turn, may have been influenced by improvements in microscopy, etc. I believe that the so-called Helmholtz school was less a formulation of a structure or model than a declaration of confidence that organic events could be explained.[14]

[13] Gedo and Wolf (1976, p. 43) give credit to the German philosophers—Kant, the Romantics, Schopenhauer—for making the humanist perspective scientifically respectable.

[14] Galaty (1974) has shown that the members of the Helmholtz school were not trying to reduce organic phenomena to physical categories, but were inspired by the belief that organic and specifically neurologic phenomena were subject to the

5. Functional illnesses had to be isolated before constants could be found within them. That separation itself required the accumulation of knowledge about organic illnesses to set them off from functional.

6. All of the foregoing influences probably converged upon a specific, intrapersonal understanding of hypnosis and hysteria, which is generally recognized to have been the launching pad for psychoanalytic theory. Given that understanding, certain problems were set for the investigators: What determines the outcome of a suggestion? Is it a predisposition? What is a predisposition? How can one conceptualize a mind with divisions that are customarily thought of as mind-like? In other words, how can a unitary mind be decomposed into parts? [15] Furthermore, Breuer's experiment raised questions about the special effects of a certain kind of ideo-affective expression (catharsis) on subsequent behavior. The paradigms then current did not suffice to elucidate his observations.

7. The most popular account is the one about which we should be most cautious. If my argument is correct, it is a mistake to say that psychoanalysis imitated models of mechanical success in physics or economics.[16] In the first place, as Mandelbaum (1971) has shown, the nineteenth century was not especially a mechanistic age. Secondly, mechanism itself can be viewed as a paradigm for a deterministic system rather than as a model in its own right (*cf.*, Galaty, 1974).[17] I have suggested that Freud did not start with a picture of a machine, but with

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a priori Kantian categories of explanation. Cranefield (1966) adds further evidence that these thinkers were not simply reductionists.

[15] Ellenberger (1970) has pointed out that there was a burgeoning of poly-mind theories at the time.

[16] See, for example, Arlow (1975, p. 520). Amacher (1965, pp. 73, 81) also feels that, except for repression, Freud's basic picture of mental functioning up through 1895 was borrowed from his teachers. I believe that the "exception" marks a radical revision. If I am correct, Bernfeld (1944, p. 349) exaggerated the theoretical source provided by the school of Helmholtz.

[17] The Helmholtz school presented more of an epistemological than a mechanistic program. On the relationship of mechanism to the general project of explanation, see Meyerson (1908).

the notion of entity, and in pursuing it he built a system which in some respects, but only some, could be viewed as machine-like. He himself contrasted his outlook with mechanical views (1924b, p. 216). The ways in which then current biology influenced Freud should not be oversimplified. Of course, terms and concepts in one branch of biology are likely to resemble those prevailing in others, as, for example, in Jackson and Darwin's theory that increased nerve energies require discharge (Andersson, 1962, p. 152). It is not with this trivial currency of terms that we are concerned, but with the empirical functioning of the theoretical system. Meynert's psychology was also set in similar terms and produced little of empirical value.

PERSONAL DETERMINANTS OF THE REVOLUTION

Why was Freud the one to develop the new paradigm? There are, first, some obvious and general reasons. Besides boundless ambition, which Freud possessed, the particular first step in the new science required far more theoretical elaboration than would any subsequent observations. Freud was a towering figure as a theorist. Very few men have shown such a combination of specific creativity and attention to theoretical demands (*cf.*, Jones, 1953, p. 384). And still fewer have combined that theoretical competence with the kind of empirical interest that Freud had; rather they would have become speculative philosophers. Gedo and Wolf (1976, p. 13) say that Freud considered getting professional training in philosophy. Jones (1953, p. 384) even suggested that Freud used the *Project for a Scientific Psychology* to work off excess philosophizing zeal that would otherwise have undermined his clinical investigation. Surely, one of the reasons for Freud's discoveries was that he lived in an age that respected science more than philosophy and that tended to direct him toward empirical investigation.

Besides the matter of intellectual prestige—that is, aside from where it seemed that the great problems would be solved—Freud probably had his personal reasons for restraining his

speculative bent. Jones (1953, p. 384) believed that Freud held a tight rein on his speculative urges until he had found an empirical fulcrum. Freud may have felt that without the iron discipline of observation, his ambition and his speculative powers might run away with him (*cf.*, Wittels, 1931, p. 80).

But what is more specifically involved in his discovery is that Freud had a structural turn of mind and a structural focus of interest.[18] The author of *On Aphasia* is clearly the man to find new entities, and thereby a new paradigm. The kind of mentality required for the discovery of psychoanalysis is the same kind that would perceive that " 'Perception' and 'Association' are terms by which we describe different aspects of the same process. But we know that phenomena to which these terms refer are abstractions from a unitary and indivisible process. We cannot have a perception without immediately associating it" (Freud, 1891, p. 57). Freud recognized that there was an *entity,* of which perception and association were facets or aspects.

Freud concerned himself with systems or structures as the ultimate objects of study. (This, I think, is the explanation of the Freudian trait that Jones [1953, p. 97] described as going directly from particulars to general concepts, or universals, without passing through the realm of the statistical.) Early in his career Freud recognized that perception was no entity and could not be studied unless he found an entity that was reflected in perception. Until that was done, perception was an arbitrary abstraction.[19] Later, he turned the same insight to account in

[18] It seems to me unlikely that such a strong bent was a mere second choice stemming from a feeling of inadequacy in physiology, as Bernfeld (1949, p. 42) has suggested. Another suggestion by Bernfeld (1949, p. 41) is that Freud's direction was inspired by his technical inventions (see also, Trosman, 1976, p. 230). But the inventions could as well be used as evidence of his structural point of view.

[19] Andersson (1962, p. 69) believes that Freud's initial attacks on Charcot's and Meynert's brain localization theories merely represented modification of the slightly older anatomical enthusiasm by the current physiological way of thinking. Although such an influence may have been at work, the nature of Freud's criticism was at least as logical as it was physiological, and, as it applied to Meynert, it merely recapitulated an older argument of Herder (*cf.*, Cassirer, 1957).

building psychoanalysis: an affect or an idea is not an entity and cannot be studied unless we can find an entity of which both are reflections. Only then can their relationship (and others) be studied.[20] When Freud encountered in his seduction hypothesis the same disappointment that the Royal Commission (*cf.*, Friedman, 1977b) found in hypnosis (both were the result of "imagination"), Freud, unlike the Commission, was ready with an underlying entity—fantasy—to carry the investigation further.

THE FUTURE

The question of origins is doubly significant for psychoanalysis. In the first place, to the extent that we understand the currents upon which psychoanalysis floated into history, we can have some idea about the direction in which today's tides are carrying it.

In the second place, an understanding of the origins of psychoanalysis can itself influence our next theoretical moves. If, as George Klein believed (1969, p. 48), Freud's drive theory was primarily developed to unify mind and body, rather than to put entities into process, we may seek to replace it with a supposedly purely psychological theory. If, like Gill (1976, pp. 95-96), we regard the constancy principle to be really a neurological principle, rather than an aspect of "thing-hood," we may invite neurophysiology in to revise it. If we believe, as does Holt (1976, p. 162-163), that Freud borrowed a mechanical preconception from Helmholtz and Brücke, we will not let the same preconception impose itself on our new theories, although if we saw those scientists as deliberately conforming to logical criteria of explanation as both Galaty (1974) and Cranefield (1966) do, we might not be in such a hurry to restructure.

The critiques of Peterfreund (1971) and Schafer (1973a, 1973b) both hinge upon the attribution of a mechanistic genesis

[20] Bernfeld (1951, p. 30) points out that the phylogenetic principles which Freud utilized in his Petromyzon study he later applied to the ontogenesis of mind, which I take to show that Freud realized that structure can be perceived in process.

to psychoanalysis and an unscientific anthropomorphism to the machinery. If one viewed the matter differently and, for instance, regarded a degree of anthropomorphism as inevitable in a partializing theory of a whole mind, one would be more cautious and self-critical in presuming to be able to dispense with such blemishes (*cf.*, Friedman, 1976a).

Of course, as with all historical perspectives, if there is a bias in current historical views of the origins of psychoanalysis, that bias itself reflects the spirit of the new age. The reason for the endless animadversions against "the mechanical model" to which we are treated by many theoreticians is that mental entities are in considerable disfavor. Entities are thought to be natural only if they are neurophysiological. Among therapists there is a turning away from structural components of theory of the mind and a noticeable comfort and feeling of virtue when dealing with process.

Perhaps this is a reaction to a previous overemphasis upon structure, or maybe it is a simple continuation of the battle between vitalistic and static modes of thought. In any case, the signs point to an abandonment of the quest for entities within the mind (*cf.*, Schafer, 1973a, 1973b). If my suggestion about paradigms is correct, this means that few new paradigms for a theory of the mind are likely to emerge in the near future. There are, perhaps, some exceptions: Holt (1976), Klein (1969), and Bowlby (1969) have offered possible candidates. A major contender is the Piagetian "schema." Piaget (1951), like Fechner and Freud, has found an entity with multiple expressions and has traced it through a process of development. What is particularly exciting is the way he has interdigitated process with entities in the very definition of a "schema." We wait to see how paramount needs and affects can be included in the picture.

In the meantime, it is likely that some psychoanalysts will go on with the puzzle-solving problems of Freud's old system, while others look for entities of a largely psychosomatic nature. (Rubinstein [1976, pp. 261-262] insists that new models of psy-

choanalysis must be compatible with physiology, by which he means that mental entities must be potentially physical entities.) Such entities surely can be discovered. A new kind of affect entity might gradually be elaborated as the workings of the limbic system are explored. A new kind of idea entity may emerge from the relationship between action systems and receptive systems, such as Pribram (1971) is developing. The development of new consciousness entities via cerebral disconnection experiments can be witnessed in the debate about how to describe the association of right and left brain functioning (Margolis, 1975; Puccetti, 1975). In each case, we should be cautious about identifying these entities with Freud's concepts of affect, idea, and consciousness. We might consider the possibility that these discoveries represent the founding of a new science, or the picking up again of an old neurophysiology, with observable entities slightly different from those dealt with by psychoanalysis.

We should study that possibility attentively. The furniture of the mind, which Freud's theory delineated, has become such an accustomed part of our intellectual scenery that we are likely to think of it as a perceptual given, which it certainly is not. We are unduly disposed to treat clinical data as theory-free observation. There is a powerful tendency to believe that what Freud was doing with his theoretical speculations was enriching and embroidering his clinical discoveries. To balance this optical illusion, which is the likely fate of any theory that successfully establishes useful entities, the background and history of Freud's theory provides a necessary counterweight. It shows us the theory as a *way of perceiving* the separate items in mental life that we can make discoveries *about*.

SUMMARY

An empirical psychology requires not only a description of the processes of mind but the isolation of mental entities that are real, meaning that they are not arbitrary collections of adjectives, but instead correspond to regularities in the behavior of

several types of phenomena, which can be conceptualized as the manifestations of the entity. Freud built his theory on such entities, concentrating at first on keeping them distinct, in contrast to Janet, who concentrated primarily on the over-all synthesis within the mind. By building a psychology upon objective entities within the mind and proposing a synthesizing process that deals with them, Freud was able to satisfy the nineteenth century demand for legitimate, natural entities.

With such entities and a process to deal with them at his disposal, Freud was able to organize functional, mental illnesses in a nonarbitrary fashion and divide the continuum of mental life in a way that selected certain aspects of a person's life as especially and specifiably consequential. Empirical regularities suggested hypotheses, and the hypotheses suggested the existence of further empirical regularities. This procedure might be the usual format for scientific revolutions. Finding new entities may correspond to Kuhn's emergence of new paradigms.

Of the many aspects of the nineteenth century that would be likely to promote the psychoanalytic revolution as thus conceived, the popularity of mechanistic scientific models is not the most relevant. Of the several aspects of Freud's mind that would be likely to promote such a revolution, a gift for structural thinking seems the most relevant.

Mental entities are not currently fashionable. Those who do not dispense with entities altogether tend nowadays to look for physical ones. In applying the findings of their researches, we should be wary about substituting their very similar terms for the terms of psychoanalytic clinical observations, since clinical discoveries are not simply percepts, but are arrangements of entities selected by Freudian theory.

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The Binding of the Son: Psychoanalytic Reflections on the Symbiosis of Anti-Semitism and Anti-Gentilism

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THE BINDING OF THE SON: PSYCHOANALYTIC REFLECTIONS ON THE SYMBIOSIS OF ANTI-SEMITISM AND ANTI-GENTILISM

BY HOWARD F. STEIN, PH.D.

Jewish ethno-religious history is analyzed as one pole of an interdependent Judeo-Christian system of opposition and symbiosis, in which reciprocal dissociation and projective identification function homeostatically to make history recur and to perpetuate what are ostensibly separate traditions. The nature of identification with the Father and with the Son is explored in the two traditions. Anti-Semitism and anti-Gentilism are seen as mirror images, reflecting what is ego-dystonic and ethos-dystonic in Christianity and Judaism. It is argued that the Abraham-Isaac relationship is paradigmatic in Judaism and that throughout Jewish history, the Jewish people have accepted both the sacrificial role of Isaac and the punitive role of Abraham, with the paradoxical consequence that martyrdom is the unconscious symbol of survival.

Contemporary social re-emphasis on ethnic identity (*cf.*, Stein, 1975a; Stein and Hill, 1973, 1976, 1977) suggests that an important underlying factor in the persistence of cultural difference is the insistence on such difference, which is expressed in boundary-maintaining symbols, emblems, totems, and rituals. In this study of the continued reassertion of Jewish identity, which now combines the ethno-national with the ethno-religious emphasis (Stein, 1975b), I suggest that to focus exclusively on Jews would be a major methodological error; that what must be scrutinized is the often fatal symbiosis between Jews and Gen-

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This paper, respectfully dedicated to Weston LaBarre, is part of a comprehensive psychoanalytic-anthropological study of ethno-American cultural traditions, an earlier portion of which was funded by the Maurice Falk Medical Fund in the author's capacity as Fellow in Ethnicity, Racism, and Mental Health. Current research is being supported by the Nashville University Center-Spencer Foundation.

tiles (that is, non-Jews) in the reciprocal, simultaneous preservation of each group's "own" identity and that of the repudiated "other." Not despite traditional enmity, but because of it, each group utilizes and needs the other against which to define itself; the two are interdependent.

As Loewenstein (1951) observed in his classic psychoanalytic study, *Christians and Jews*, anti-Semitism is rooted in the shared history of Judaism and Christianity, "a cultural pair." The phrase is felicitous, for it goes to the heart of the dynamic inseparability of two traditions that insist on the inviolability of their sacred boundaries and their separate integrity, yet are unable to live either with or without one another. Loewenstein argues that while the Christian stereotype of the Jews has undergone numerous accretions of cultural content since early Christianity, the underlying core of the conflict lies in Christian ambivalence toward the heavy conscience derived from Judaism, exacerbated by ambivalence toward the dogged survival of Jews for nearly two millenia of Christian persecution.

While I am in agreement with this oedipal interpretation, I wish to expand it by inquiring into those Jewish cultural psychodynamics that perpetuate Jewish stereotypes of Christians. What is in fact repressed within each tradition is magically discovered and struggled against in the tradition of its opposite. Just as Christians recoil against their debt to the Jews (superego), Jews in turn recoil against a similarly unspoken debt to Christianity: the successful Christian revolt against that repressive moral burden—the Law and its suffocating strictures—that Jews dare not admit to be *their* wish (id). For beneath the compulsive Jewish loyalty to "the intellectual tyranny of authoritarian tribalism" (LaBarre, 1972, p. 591) lies a simmering recalcitrance and an occasional open volcano of revolt against an obsessive Sabbatarianism that encompasses every moment of every day of the week.

Because of the constant danger of the uncanny recognition of the dissociated as part of oneself, Jew and Christian alike must reaffirm "what I am" by emphasizing "what I am not," the ritual

confirming the myth of difference through the re-presentation of sense data. Boundaries of personal ego and cultural ethos are thereby (temporarily) shored up and what is inside clearly distinguishable from what is outside (ego-syntonic and ego-dystonic, respectively). Nevertheless, the degree of recognition of underlying likeness and attraction is attested to by the extent of insistence on difference and revulsion. While what is perceived to be culturally alien is dynamically ego-alien (that is, split off), the affective valence of secret attraction is reflected by the energy invested in the countercathexis of repudiation. This relationship of "antagonistic acculturation" (Loeb and Devereux, 1943) has interlinked two traditions for nearly two millennia. Clearly, what must be vigilantly kept outside the boundary of ego and ethos is something externalized yet unconsciously internalized. The incompleteness of the externalization (paralleling the incompleteness of the introjection of one's parent-tradition) is what has caused the persistence of Judeo-Christian symbiosis. Each needs the other outside to do its dirty work, but not so distant as to be unavailable for fascination and contempt. The wider systemic boundary of projective identification *subsumes both groups.*[1]

Perpetuation of the "oppositional process" (Spicer, 1971) and intergroup "dissociation" (Devereux, 1975) are essential to the intragroup stability and solidarity of each group and to the intrapsychic stability of each group member. Gentile anti-Semitism and Jewish anti-Gentilism are cultural defense mechanisms necessary to sustain each group. The systematic relation-

[1] Irving Goffman (1963) has made the identical theoretical point in his sociological analysis of "stigma." Only superficially does "stigma" denote two discrete groups, stigmatizer and stigmatized, ingrouper and outgrouper, normal and abnormal, good citizen and outcast. Rather, stigma encompasses "a pervasive two-role social process in which every individual participates in both roles. . . . The normal and the stigmatized are not persons but rather perspectives" (p. 138).

The officially stigmatized group (e.g., Jews, in the context of dominant Christendom) must deal with its discreditation. But since stigma is a systemic pathology of relationship, both groups are alternately ingroup *and* outgroup, and hence are *mutually* discredited irrespective of institutionalized status and relative power, and rationalized myths of superiority by the dominant group.

ship between Jews and Gentiles implies that one cannot be adequately discussed without at least *implying* the other; I hope to make the implications explicit.

Among the "dissociative" characteristics and consequences of dysfunctional ethnic identity, Devereux (1975) includes: (1) the reduction of an individual to "one-dimensionality" (p. 66); (2) the highly ritualized, "insistent, and even obsessive clinging to one's ethnic (or any other 'class' [in the mathematical sense]) identity" (p. 67); (3) hypercathexis of ethnic identity, with the subordination or exclusion of other components of identity, as a means of shoring up a flawed self (p. 68); (4) the creation of a closed-system identity; and (5) the "obliteration of individual distinctiveness" (p. 65). ". . . a hypercathecting of one's ethnic identity leads . . . to the annihilation of the individual's real identity. . . . Yet, man's functionally relevant dissimilarity from all others is what makes him human: similar to others precisely through his high degree of differentiation. It is this which permits him to claim a human identity" (p. 66).

From a psychodynamic point of view, the basis of Jewish-Gentile opposition lies in a reciprocal dissociation, which can be approached through an exploration of the oedipal paradigm of each tradition. The analysis of Jewish-Gentile symbiosis can begin with a discussion of the significance Jewish tradition places on the father-son relation. Some recent comments by Rabbi Benjamin Z. Kreitman will serve as a "text" and a point of departure for a comparison of the Jewish identification with the Father, the Christian identification with the Son, and the relationship of this difference to intergroup stereotyping. Note in this passage that the reaffirmation of ethnic Jewishness is synonymous with a reaffirmation of an identification with the austere father and the patristic deity. This rebinding to the tradition transparently expresses the Jewish oedipal paradigm. Rabbi Kreitman (1975) writes:

> Many have let their ardors of Jewish loyalty be cooled by indifference and unconcern. Others, more sensitive, have begun to give expression to their doubts and fears about the reasons

for Jewish survival and fears over what perils may be imposed on their children, bearing a Jewish identity.

The issue over which the American Jew agonizes now is not alone whether he should continue to be a Jew but over the question whether he has the right to impose this frightful choice on his descendants.

In Biblical terms the question is: Must we respond affirmatively to the command of destiny: "Take your son, your favored one, Isaac, whom you love and go to the land of Moriah and offer him there as a burnt offering" (Genesis 22:2).

. . . We are the precipitates of centuries of suffering, of pain and heroism. Unlike other areas and other centuries, the American Jew living in an open society has a choice and an option. His position is akin to that of the first Jew, Abraham, whose decision to be a Jew was free from the coercion of fate, birth and the shame of betrayal. Our response at this juncture bears an extraordinary historic character.

To remain silent to the demand of "Take your son" in this hour is to surrender to the demonic in life. Not only will the Jew be diminished but humanity will be diminished as well. Even to the most secular-minded, the stubbornness of the Jew in continuing to exist and be a creative force gives faith for tomorrow.

Emil Fackenheim, who has given much thought to the theology after the Holocaust writes: "To be a Jew after Auschwitz, and to bear witness against them in all their guises. It is to believe that they will not prevail and to stake on that belief one's life and that of one's children."

Given the nature of human evil, the choice of not being a Jew for the sake of the future security of one's children becomes an even more frightening decision. Fackenheim uncovers the dreadful possibilities of such a choice: *"By choosing for our children not to be victims* (read *Akedah.* BZK) [we] may be exposing them to the possibility, or the likelihood that they will be murderers"[2] (pp. 6-7).

It is the readiness to bind over the next generation that is

[2] For a broader discussion of the theology of Fackenheim, see "The Ingathering" in Stein and Hill (1977).

troubling. To be a Jew after the Holocaust—not merely Auschwitz, but the cumulative Holocaust of Jewish history—is not only to defy "them" but to fear that future generations of "us" will become "them," the demonic adversary. Jews must bind over their children as potential victims or sacrifices to insure that they will not join the enemy. This does not reflect a faith either in tomorrow or in one's children, but the dread of both. To save oneself and one's children, one must sacrifice them; without this, so goes the unerring logic, both Jews and the remainder of humanity will be diminished. The future security of one's children lies in their maximum vulnerability, which is subsequently transformed into an identification with the father (aggressor) who so graciously spared his son (and children). Vulnerability becomes security, as son becomes father, and all become the children of the God of Israel. Such is the substrate of the creative force that gives faith for tomorrow, that makes for stubborn persistence, that makes Jews so valuable to humanity.

This "rewriting" of Rabbi Kreitman's passage—a passage representative of much modern Jewish thinking—is not intended to be cynical but to make explicit the grave doubts that underlie the prescription for security. I would argue that to succumb to this prescription is to surrender to the demonic in life through a historic "acting out," rather than to transcend it by working the conflicts through. In the act of protecting one's children and safeguarding their future, one condemns them to the very fate one would consciously (and conscientiously) avert. One constantly dares and gambles with fate, and when Holocaust comes, one is able to protest one's innocence. It is "they" who are persecuting "us." What we fail to recognize is that "they" are playing the father-persecutor role for us; we are then the innocent son, awaiting a totemic ram in the brush and rescue from above. In choosing to bind over our sons, we place them in peril: survival becomes a way of inviting self-destruction; placing in jeopardy is a means of preparation for coping with danger.[3]

[3] Although I shall be discussing the traditional father-son Jewish paradigm, I suggest that much of the mother-daughter relation in Jewish tradition has

The ritualized sacrifice of Isaac does not compel God's indebtedness to Abraham's descendants, although this was His promise, a price for protection (*cf.*, Schlossman, 1969, p. 88). Beneath the official promise of chosenness for fruitfulness and conquest, lies the unconsciously censored promise of chosenness for perpetual sacrifice and victimization. Israel was the "suffering servant" long before the Suffering Servant figure of sixth century B.C. Deutero-Isaiah. The coeval existence of moral masochism (martyrdom-sacrifice) and identification with the aggressor (acceptance of the overwhelmingly demanding and repressive Covenant) has its Judeo-Christian mythic archetype in the persons of Abraham and Isaac. According to tradition, God's promise of fertility to the aged Abraham and Sarah was contingent on the acceptance of the Covenant that required circumcision. But what was *explicitly* a token sacrifice to the Father was *implicitly* an insufficient offering. Neither the displaced sacrifice of the totemic ram (from Abraham through the Temples)

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the same emotional valence. In her unpublished short story "A Sign from G-d," Florence Hamlish Levinsohn has a passage that supports this hypothesis. Her protagonist says: ". . . having been the firstborn though not a male, I have often felt a certain kinship with Isaac. I have wondered many times if God did not appear to my mother and instruct her, Take now thy daughter, thine only daughter, whom thou lovest, and get thee into the land of Moriah, and offer her there for a burnt offering upon one of the mountains which I will tell thee of. Sacrilege? A woman offering a sacrifice of her daughter? Perhaps. To an atheist what is sacrilege? I felt I had been saved from the sacrifice. Perhaps it was only the martyrdom my mother practiced that led me to that belief, but . . . I carried about for many years the belief that, there, but for the grace of God, would I have been sacrificed on the altar. Having been saved, I must now withstand a thousand tests to prove the felicity of that earliest judgment. I had been chosen among many who had been so chosen, one of the many firstborn who were chosen. . . . The great test of faith and love, that had been given to the father first, then to the mother was now to be given to the firstborn, as it should be. If we are to inherit the kingdom, or the hearth, depending on our sex, surely a test of faith and love is in order" (quoted with permission). Martyrdom, victimization, and reparation—and the perpetuation of "tradition"—are shared both by males and females. What this passage makes so abundantly clear, even as fiction, is how the secular dramas of everyday Jewish life closely follow and give meaning to, even as they are given meaning by, the larger-than-life dramas of sacred text.

nor the "token" ritual offering of the foreskin in circumcision served as adequate substitute for the continually valent repressed wish that would be satisfied with nothing less than full elimination of the son—either through the father's envy of the son's threat, or through the son's need for punishment due to guilt over envy of the father.

Each accretion of ritual following ritual, new defense replacing old defense—from human sacrifice of the firstborn male, to animal sacrifice, to the abolition of animal sacrifice and the institution of personal pietism, to the self-sacrifice of Jesus on the Cross—was less a "theological advance" than symptomatic of the fact that the conflict underlying the *Akedah* had never been sufficiently countercathected by myth or ritual. The more intense the wish and the more inadequate current defenses against it, the more elaborately it had to be defended against and disguised through the proliferation of stronger rituals that regulated volatile father-son and God-human relationships. The lineage of Mosaic, Priestly, Talmudic, and Orthodox Jewish *Halachah* (Law)—"behavior modification" in increasingly more paralyzing dosages of external regulation toward instinctual extinction—attests to the need for overbearing constraints to keep in check an overbearing wish. This, in turn, generated the very opposite of its intent, namely, a recalcitrance and latent rebellion toward the very authority it had set up to combat the unacceptable wish. The original intent (sacrifice of the son), though officially repudiated, is unavoidably "smuggled" back into the very tradition that has manifestly transcended it. Unwittingly, or rather, unconsciously, the Jewish people themselves came to be the perennial sacrificial victim (masochistic identification with the vulnerable and guilty son) *and* those who demand of others increasingly numerous and severe sacrifices and renunciations (sadistic identification with the omnipotent father).

To overemphasize the overt differences between Orthodox Judaism and Pauline Christianity over the subject of sacrifice is to fail to discern the persistence of sacrifice in Judaism even in

its absence. LaBarre (1972) notes that the faith of Pauline Christianity lay "in the mystery of [Jesus'] sacrificial death, a faith invented and promulgated by Paul" (p. 608). LaBarre continues:

> In a curiously masochistic identification with his Messiah, Paul proclaimed that Christ was a human sacrifice that God had commanded to mollify God's wrath (Romans 3:25). If Abraham had abolished human sacrifice of the Firstborn, and later Jews had abolished even animal sacrifice, Paul restored human sacrifice—but now with a jumble of symbolisms of the archaic scapegoat, Paschal lamb, the murdered son-god of the Great Mother, and the Orphic Dying God who was eaten to confer immortality! (pp. 608-609).

While in the literal sense it is true that Judaism abolished human and animal sacrifice and that through Paul, Christianity reinstated the former, in the psychodynamic sense Judaism *never* abolished the *original* sacrifice. The nature of the sacrifice transformed the sacrificial dyad of literal father-son, Abraham-Isaac, God-father (son), into the relationship between God and the entire people of Israel. Jews, in sadomasochistic identification with both father (and Father) and son, became the Jewish Paschal lamb who, as scapegoat, takes away the sins of the world. Christianity continued the displacement and dissociation of the sacrifice; Judaism became the religion of a people who *remain the sacrifice itself*. For Pauline Christianity, no longer was the terrible, transcendent Father unapproachable. Human helplessness and sinfulness in the face of divine wrath was alleviated and the chasm bridged by a Son whom the Father Himself had sent to redeem an otherwise unredeemable mankind through His death and resurrection. Through the crucified and resurrected Christ (resurrected by God Himself), mankind had a chance at salvation. Judaism has no such vicarious sacrifice and magical victory. The Jewish people are their own offering, their lives their own expiation, to the Father whose agents they remain and whose conscience (Law) they have internalized.

In his paper, "Circumcision as Defense," Schlossman (1966) argues that the Covenant of Divine Mercy toward God's chosen people was contingent on the "acceptance of the foreskin as a token sacrifice in lieu of the son" (p. 351). The totemic ram becomes the substitute *full* sacrifice; circumcision becomes the *token* sacrifice. Earlier pagan instinctual indulgence was supplanted by the austerity of instinctual renunciation before the demands of Yahweh. Schlossman cogently asks:

> Did Abraham on the occasion of becoming a father remember his childhood envy and wishes to destroy his father? It seems plausible that he made peace with his father's spirit by offering a sacrifice, the foreskin of himself and his sons. The young father propitiates the envy of the God representing his father by sacrificing a piece of his son's penis, in fantasy an extension of his own. Instead of taking, he gives; and since he gives a part, God will not take all (pp. 351-352).

Elsewhere, Schlossman (1969) summarizes Shalom Spiegel's reconstruction of the *Akedah* as follows:

> 1) Abraham did sacrifice Isaac on Mount Moriah, 2) God resurrected him, 3) Abraham in his zeal proceeded to sacrifice him again. This was stopped by the Angel of the Lord, 4) the reason for the sacrifice was a transaction—an exchange of Isaac for His indebtedness to the descendants of Abraham in the future; when in trouble, the Jews could call on God's compassion and mercy by reminding him of the Akedah (p. 88).

On archaeological and manuscript-textual evidence, LaBarre (1972, p. 593) suggests that there were likely many Abrahams, in fact eight centuries of them, from 2100 to 1300 B.C. This would seem to support the Spiegel-Schlossman argument of multiple sacrifices of Isaac, though not necessarily by the "same" man.

I question Schlossman's suggestion that "circumcision appears to be the last phase of a particular evolutionary process of sacrifice to the gods" (1966, p. 351). Human sacrifice was replaced by displaced offerings to be sure; but the next stage became self-

sacrifice—from austere instinctual renunciation to the Christian self-offering of Jesus the Son to God the Father. I suggest that the ancient "cruel rites" never disappeared; rather their form changed. Among the Jews, such sacrifice ultimately took the form of self-victimization as the eternally suffering servant who was punished from without. With early Christianity, Jesus became the "lamb of God" (*Agnus dei*) who came to "die for us," in order to take away the sins of the world (*qui tollis peccata mundi*). The dangers of bisexual and oedipal reinstinctualization and reprimitivization were never fully bound by a tradition of shared myth and ritual. Primeval conflicts underlying ego and cultural *structure* led to the need for subsequent *restructuring*.

LaBarre (1969) asks: ". . . can a society never modify the cultural superego, the Sacred Past? Not so long as it insists that salvation comes only through allegiance to the sacred past! Cultural compulsions constrain societies as firmly as compulsive systems bind the individual neurotic" (p. 170). Each successive mythico-religious re-solution becomes a new defense (countercathexis) elaborated to replace those currently inadequate to cope with the "Ur-anxieties" (castration, parricide, destruction) that remain repressed. The new solution, as a compromise, becomes part of the problem, further compounding it, generating secondary anxiety and the need for more rigid defense to cope with the pseudo problems posed by new myths, taboos, prescriptions, and proscriptions. Personal history and cultural history become homologous examples of vicious cycles that proliferate into spirals of pathology. Essentially, the psychohistoric and ethnohistoric paradox is that, precisely because they are inadequate compromises, no amount of sacrificial tokenism, no abundance of rams, no once-and-for-all redemptive son, is sufficient. The disguised return of the repressed makes of any "mystery on the mountain" a perennial mystique that substitutes reality distortion for reality testing.

Here the superordinate place of the shamanistic, rabbi-prototypical Moses in Jewish tradition might well be re-examined (*cf.*, Reid, 1972). He has been the central patriarchal figure in

the mythic revelation and consolidation of the Covenant and the Law and in the social transformation of scattered Semitic pastoral tribes into the "nation" and "peoplehood" of Israel. He is respectfully (never affectionately) known as "*Moshe rabenu*," Moses our Teacher, a son-become-father lawgiver of his people through the transmission of the Law of God. (He is in no way an intermediary in the manner of Jesus who interceded as the son in behalf of God's children; rather, Moses is the mediator between God and Israel, the medium who conveys the will of God to His people, a father rather than a son figure.) With a refocusing on the sacrifice and *Akedah* of Abraham and Isaac (through its later expressions in *Halachic* Judaism and Christianity), Moses and the Law do not so much recede in importance within Jewish tradition as they become historically subsequent psychodynamic and cultural secondary elaborations on the oedipal theme of sacrifice. Symbolically and ritually, they represent efforts to cope with the nuclear conflict at the core of Jewish history.

It makes perfect sense that Jewish tradition should focus on Moses and litigious-pietistic adherence as a culturally elaborated *defense* against its deeper conflicts—except, of course, that such adherence perpetuates the very conflicts it would cure by repression, creating the very opposite effect of the desired defense. The defense process psychodynamically, culturally, and historically seems akin to Hans Selye's "disease of adaptation," bringing further harm as it offers compromised (and decompensated) protection. Protection (defense) by adherence to the Law makes for short-term safety and long-term self-induced vulnerability, since the most strenuous adherence is never enough. And when calamity befalls the Jewish people, it is not to the tyranny of the Abrahamic *Akedah* that one looks, but to the need for stricter law, observances, and penances because, as the Prophets long ago exhorted, Israel has fallen into error—away from the Law. The Law as solution becomes a barrier to the uncovering and transcending of the real, as opposed to the pseudo (though experienced as real), problems.

In his recent book, *Messengers of God,* novelist and essayist Elie Wiesel (1976) traces the Jewish Holocaust back to the first Diaspora, the expulsion from Eden. It is as though everything is retroactively presaged—as myth has a habit of doing with its retrospective connections, condensations, explanations, and falsifications.[4] Wiesel wryly protests the severity of God's treatment of Adam: "Poor man: punished for nothing. And he wasn't even Jewish." Moreover, Wiesel, who makes of the survivor syndrome endless allegorical works of art that compete with the reality they commemorate (and keep alive), chooses *Isaac,* son of the first Jew, Patriarch Abraham, to call "the first survivor." With Abraham and Isaac the Holocaust paradigm was set; just as with Eden, the paradigm of unmerited expulsion and diaspora was irrevocably set in motion.

Wiesel utters in a Jewish idiom what is in fact the human condition. He voices the narcissistic protest that insists that the universe is here for us, that it owes us our existence in (preoedipal?) Paradise, that we are at its center and deserve thereby to be taken care of. Jewish ethnocentrism of specialness is but a single ethno-religious example of a species-wide narcissistic anthropocentrism that believes and hopes that deity and universe are on its side. However, by virtue of inherent maturational processes (separation-individuation) within the human animal, coupled with the early defeats reality confers upon infantile

[4] LaBarre (1972) states that "in folkloristic terms the past *explains* the present, not the reverse; to suppose past tradition *sustains* present folklore requires retrospective falsification of revelation. We believe what we believe about the Unknown partly for historical reasons, and partly for projective psychological, not cognitive reasons. Cognitive science is essentially anti-historical; it seeks ahistorical validities on grounds of *present* testing, not of traditional authority or of sacred *past* revelation. More than any other, this epistemological shibboleth of *ground for belief* critically distinguishes the adult mind from the infantile authoritarian personality" (p. 598, n. 33). Later: "The sacred culture of any society is the storehouse of its emotional and intellectual defeats in the forgotten past. Sacred culture is the autistic side of history" (pp. 634-635). The "past" becomes an excuse that, via projection, removes responsibility for choices in the present; one does not so much test the present to see what it holds, but applies formulas and bromides of the past because the past is assumed to sustain the present. Sense of history is confused with history itself.

omnipotence and omniscience, whether or not our ancestral "tribe" had an Eden and an expulsion in its origin myth, we are all "Jews."

Wiesel and much of Jewish tradition have denied the accusation of oedipal "original sin," namely, disobedience to the Father. Abandonment, banishment, exile, come undeserved—despite an equally traditional litany of guilt. Job has lived up to all religious obligations; what God has visited upon him is patently unfair. But then, the Voice out of the Whirlwind does have the last say: Who are oedipal mortals to question the unknowable and awesome will of the Father? Self-justifying myths of noble origin notwithstanding, what unites Jews with all mortals is the unavoidability of "original sin," of the loss of innocence, repeated anew with each generation. To speak, as does traditional Christian theology, of "original sin" as a historical event whose consequences we must forever suffer because of our descent and thereby our inherent unworthiness is to commit the selfsame error Freud (1912-1913) made in *Totem and Taboo* (and later corrected), namely, the "projection of the Oedipal conflict into the purely mythological past history of mankind" *(cf.,* LaBarre, 1968, p. 65), a Lamarckian displacement of recurrent personal history and guilt onto a past deed for which one is not culpable. What begins ontogenetically as infantile fantasy is subsequently repressed and returns in the acceptable phylogenetic form of "racial memory." Such idiosyncratic or cultural absolution is a defensive means of exonerating oneself and/or one's tribe. One bows contritely to the unalterable past and to its ineradicable persistence in the present.

This is precisely the form of the *theological* excuse that Jewish tradition has conferred upon Abraham and Isaac and on subsequent tradition. It is not our oedipal conflict resolution that has made us what we are, but the will of God. LaBarre (1972) writes:

> Father Abraham seems to stand as the symbol of some great prehistoric revolution in religion—the abjuring of human sacrifice for animal victims. Behind the legend of Abraham and Isaac

> lies the old Semitic practice of child-sacrifice, surviving in Phoenician Moloch-worship into historic times. . . . The later interpretation that, through his conflicting commands, God was merely testing the faith of Abraham, even to the sacrifice of his cherished son, rescues God from the theological dilemma of inconstancy over the centuries, but hardly enhances God's moral dignity. Historically the supposed wishes of "God" did change; but psychologically, and with better eternal human consistency, the "inconstancy" of God on Mount Moriah is better seen as the *ambivalence* of Abraham in counter-oedipal conflict over his son, for fatherly love of sons is by no means unwavering. On the deepest level, the *Akedah* or "binding" of god and man, father and son in society, must rest on that initial *religio,* the oedipal bargain between father and son in the human incest taboo. On Mount Moriah, Abraham became not merely the "Father of faith"—literally of Judaism, Christianity and Islam—but, symbolically, the father of all human society. "And he shall turn the heart of the father to the children, and the heart of the children to their fathers," says Malachi 4:6. The Father (Abraham himself projected) tells the father to kill his son; but, again, the Father tells him not to (pp. 558-559).

Judah Halevi cried: "Israel is the martyr-people; it is the 'heart of the nations,' feeling every pain and disorder of the great body of mankind" (LaBarre, 1972, p. 588). To understand this exclamation is to understand the meaning of being a Jew. George Santayana's dictum that those who forget the past are condemned to relive it, is raised to epic proportions. But its meaning is reversed: remembrance of the past (*Yizkor*) becomes preparation for its terrible recurrence. The past is asseverated as a guide to the present and the anticipated future. The template of "the lessons of history" assures continuity of the myth of the past in the present. Every "test" passed is penultimate to the final test that is awaited. It is only a matter of time until the timeless prediction (and decree) is confirmed; disconfirmation only postpones the inevitable, it does not create radical disbelief. An obsessively documented litany of anti-Semitism is continuously up-dated.

But why the belief that something dreadful must happen to

Jews? Jews ask "why us?"—but why the questions, unless there is certainty about victimization, not only that it will occur, but that it should, because somehow it is deserved? (see Glazer, 1975; Ozick, 1974; Podhoretz, 1976; Wiesel, 1974). Worry and chronic dread have characterized Jewish future orientation. It is hoped that what is feared will not happen, but it is certain to happen. The imminent coming of the next pogrom or the next attempted "final solution" is more certain than Messianic Redemption. In one short story, Isaac Bashevis Singer, in fact, speaks of Death as the Messiah. No calamity is unthinkable; rather, it is expectable.[5]

In Jewish cultural psychology there is no single Day of Judgment at the end of time. Franz Kafka (1946) wrote, "Only our conception of Time makes it possible for us to speak of the Day of Judgment by that name; in reality it is a summary court in perpetual session" (p. 169). The demand for sacrifice can come at any time. So heavy is the burden of guilt that when anything goes wrong in the world, Jews are certain they will be blamed—and feel a keen sense of responsibility even if the ominous finger is not pointed from without. To bear the burden of being a Jew is to assume an awesome importance. It is to be the Chosen

[5] After the completion of this paper, Rabbi Azriel Fellner brought to my attention two essays most apposite to the present discussion: "American Jewry—The Ever-Dying People" by Marshal Sklare (1976) and "Faith and the Holocaust: A Review of Emil Fackenheim's *God's Presence in History*" by Michael Wyschogrod (1971). Sklare argues, citing Simon Rawidowicz's early essay, "Israel: The Ever-Dying People," that each generation of Jews everywhere feels that it is the last, that the people of Israel are incessantly preparing for the end that in fact never arrives. Wyschogrod concludes that "For believing Israel, the Holocaust is not just another mass murder but, perhaps, the final circumcision of the people of God" (p. 293). This circumcision has exacted an unspeakably greater offering than that which Schlossman (1966) discusses. But, as I have suggested, an ever-dying people, offering themselves to the Father-God, will never have a "final circumcision." Golden Ages or periods of calm are mere interludes between Holocausts. No solution is ever final. Speaking as a Jew, I shudder at the thought that Fackenheim's Judaism of defiance elevates the wrathful Hitler himself to be the true God of Israel. Jews are not to survive merely in spite of him, but because of him. Surreptitiously (unconsciously), Hitler becomes the metaphor for the God of History. It seems that in our guilt-ridden modernity, we have become more self-punitive than the primitive Yahwists.

representative of God the Father on His earth, to do His will, to possess a delegated power no others can attain. But it is also to assume an importance derived from the magical omnipotent *powerlessness* of the victim-son.

Within Jewish tradition, introspection is highly valued; it is a cornerstone of Jewish "inwardness," of which Sigmund Freud is a modern exemplar. Yet tradition does not acknowledge the practice of projection onto non-Jews of those "alien thoughts" incompatible with normative inwardness and righteousness. (It is one of the revolutionary breakthroughs of the *father* of psychoanalysis that Freud did not allow himself the protective luxury of such self-deception.) Judaism uses Christianity projectively, mirroring the Christian use of Judaism. Victim and victimizer, exploited and exploiter, are both necessary in their mutual exploitability for the sadomasochistic embrace. Could it be that the Jewish people have survived, not *despite* persecution (as official culture avers), but *because* of it? Victimization itself has become a way of life (see, for instance, Saul Bellow's early novel, *The Victim,* 1947; Hannah Arendt's *Eichmann in Jerusalem,* 1963; and Robert Alter's *The Masada Complex,* 1973). Fear of persecution vies with and is exaggerated by the need for persecution. To celebrate victim-as-hero is to insure that there will be future victims. To persevere through courting destruction is to gamble psychopathically with the future—one's own and that of one's progeny. Persecution confirms the sacrificial meaning of Jewish existence. In a sense, the individual, in being bound to tradition, is "sacrificed" for the sake of the persistence of group identity.[6]

[6] Following Freud, Schlossman (1966) notes that "puberty rites are used to strengthen the taboos against incest and parricide, and tighten the bonds between father and son" (p. 341). Initiation rites attempt to reconcile inherent antagonism between generations, to create intergenerational solidarity and a mutual commitment to the well-being of society. However, the very severity of initiation rites attests to the intensity of conflict and to the need for the fathers to *bind* the sons to their will: to make obedient men out of potentially rebellious boys. The need for ritual attests to the depth of the problem which society, through its elders, attempts to solve (magically) once and for all. Through the sons' identification with the (father) aggressor, the fathers need fear less rebellious

Rose (1973) writes "of the convoluted hypothesis that the Jewish community is held together by the threat of anti-Semitism, that each time emancipation seems close to fulfillment, some new persecution 'saves' the Jews from total disappearance" (p. 17); thus the paradox of survival through persecution, self-preservation through the persistent threat of annihilation. If it is true that external oppression is necessary to preserve the Jewish people, then forces within Jewish culture sustain and precipitate conditions whereby such costly self-preservation is achieved. In the long run the memory of slavery and the anticipation of victimization are more attractive than emancipation, freedom, and survival itself.

We might pose the ethical question of one's right to impose the burden of the past, with its implication of a particular future, on one's children. But an *ethical* question of choice is absorbed in an *ethnic* question of continuity. The burden must be transmitted, as part of the self-chosenness of being a Jew. The issue of ethics is itself part of the rationalization of concern for the future of one's children, covering the deeper mistrust of what one's children may do in that future. One protects oneself, claiming to have only their best interest in mind. There are, it seems, only two alternatives: victim or victimizer; none other is considered. Moreover, the entire process of assuring Jewish continuity is based on contradictions that must be denied and on the entire process being shrouded in sacred mystery and duty. What are some of the deeper realities that tradition

aggression from the sons; such aggression is repressed, displaced, and sublimated. Death and Resurrection, as a common initiation rite theme, expresses the fathers' insistence that the initiate submit and symbolically die as a son, and be reborn as a father and ally of the father-generation. Yet, despite the intensity of such counteroedipal ritualization, envy and fear persist in the fathers, who, as Walsh and Scandalis (1972) brilliantly argue, unconsciously arrange for the sons to be placed in jeopardy as potential victims of the acts of external enemies through displacement of the fathers' unconscious (and unconscionable) wishes. Society (i.e., the prerogatives of the fathers) is protected through the sacrifice of many of its young males, either in ritual or in the self-defense of the *patria* in warfare. The success of ritualization is tenuous and temporary at best—hence the need for subsequent and continuous reaffirmation through more ritual.

attempts to obscure?

To begin, one might pose a simple, straightforward question: Why is the father so frightened of his son? It is a fact of human development that parents see the child, toddler, adolescent, or offspring of whatever developmental stage not only as the child is, but as he is *re-experienced* by the parents. Parents see themselves *in* their child. The father who sees in his son the potential man who might challenge and displace and kill him has had his own childhood oedipal conflict reawakened and must cope with it—and does so partly through the child. He, the father, is now his son, challenging *his* father. But he is also the father, envious of his son, wishing to destroy him, preventing later challenge by pre-emptive attack. We have learned from the Freudian method of psychoanalytic investigation that when a fear is voiced seemingly in excess, behind it lies a wish that has been repressed and phobically denied in order to defend against the conscious recognition of it. The wish to murder one's son, and, through identification with the son, the wish to murder the father, are, in fact, the deeper sources of the fright and dread.

In binding over his son, the father is saying: "Unless we (fathers) subdue them (the sons), they will kill us." The father must force the son to become like the father, bound together in a tradition that protects each against the other and against the wishes of each. Through identification with the father, born of guilt, the father is able to avert a conspiracy of son(s) against him. The son's identification with the father is nonetheless uneasy, because Biblical example confirms his own private and familial fantasy: the father was prepared to go through with the murder and sacrifice of his son. Theologians say that *God* had commanded Abraham to make the sacrifice to test his faith and that, in fact, by providing a substitute offering (the ram), God thereby declared the older sacrifice of firstborn males null and void. Psychodynamically, however, God's voice was Abraham's own—in every Jewish generation from Abraham through the present; the substitute represented the son, and the ritual, a displacement of the father's intention.

Christianity takes this one step further in the passion of Jesus: the Lamb of God is Jesus himself who sacrifices himself to God the Father. There was no substitution, no vicarious sacrifice. Institutionalized Christianity quickly superimposed the additional interpretation that, although Jesus came into the world to die and although his crucifixion was preordained, it was the Jews who killed Christ. The Jewish people represent the feared father who kills the son (or Son) with whom Christians identify (in addition to the father), and who serves as a mediator with the distant and punitive father. Christians, of course, share the universal conflict of fathers and sons and cope with it in the form of an alternate oedipal paradigm, projecting onto the Jews the source of their existential problems. Hence such mottoes as "The Jews killed Christ," "The Jews are just asking for it" (i.e., to be persecuted); and hence the bewilderment and anger Christians often feel—and explosively express toward Jews—concerning the Jewish "denial of Jesus." The latter reawakens their own doubt as to whether there really is an intermediary between themselves and the omnipotent Father. The persistence of the Jews is a persistent challenge to their own beliefs. After all, wouldn't *everyone* want to be saved from the wrath of the Father by the kind, gentle Son (not to mention the Holy Mother, so important in Latin, Byzantine, and Oriental Catholicism)? Evidently not.

I do not have the competence to enter the fray over Biblical scholarship concerning the historicity of Jesus, or over the historical "responsibility" of the Jews or anyone else for the death of Jesus (*cf.*, Cohn, 1971). I do not advocate historical nihilism, but rather suggest that, following Erikson (1968), what is "real" is phenomenologically or experientially subordinate to and in fact defined by what is "actual." People act on the basis of what they believe to be true, what they need to believe. Ethnic history is a myth about what the world is felt to be like, such feeling and conception fusing with the world. Just as for the Jews, slavery, persecution, victimization, homelessness, suffering, and the like are archetypal, timeless themes, so for Christians the

legend of the life of Jesus is relevant to their lives irrespective of whether it "really" happened two millennia ago.

As a brief aside, I suggest that corrective historical documentation, while valuable in itself, is powerless to dispel deeply needed and deep-seated stereotypes which cannot be altered by new evidence. Discussing the "causal misperception" involved in stereotyping, Campbell (1967) writes:

> It has to do with the relationship between the content of the stereotype and the hostility felt toward the outgroup. The naïve ingrouper perceives the different characteristics of the outgroup as causing his hostility. . . . He feels that were it not for these despicable traits, the outgroup would be loved. The outgroup's opprobrious characteristics seem to him to fully justify the hostility and rejection he shows toward it. The social scientist sees the opposite causal direction: Causally, first is the hostility toward the outgrouper, generated perhaps by real threat, perhaps by ethnocentrism, perhaps by displacement. In the service of this hostility, all possible differences are opportunistically interpreted as despicable, and the most plausibly despicable traits are given most attention. . . . Remedial education in race relations focused on denying or disproving stereotypes [for instance, correcting historical distortions as in the case of Jewish and Christian history] implicitly accepts the prejudiced ingrouper's causal conception rather than the social scientists' and is undermined where actual group differences are found (p. 825).

In the present context, Jews and Christians are both ingrouper and outgrouper bound up in a reciprocal adversary system of mutual stigmatization based on a shared father-son conflict.

If, as the psychologically insightful theologian Eckardt (1974) argues, Christianity retains a vested interest in the "Jewish rejection of Christ," since, without it, Christian ideology would crumble, then one might argue that Jews have an equally vested interest in the denial of Jesus as the Messiah which sustains that ideological edifice. If, as Eckardt suggests, Christianity is erected on a Big Lie—that the Jews rejected and killed Christ—which

in a sinister way prepares for and justifies persecutions, then one might argue that Jews have too long protested their innocence with respect to an act whose historic factuality is irrelevant, but whose recurrence in each generation is built into the very fabric of being human.

If anti-Semitism is "the symbolic reenactment of the crucifixion of Jesus," wherein Christians have "fought for almost two thousand years to get Jesus off our backs," if in accusing the Jews of spurning and crucifying Christ, "the charge represents our own below-conscious wish to kill Christ and to dispose of him once and for all" (Eckardt, 1974), and finally, if anti-Zionism and anti-Israelism are Christian acts of self-destruction, then one could plausibly argue that Jewish anti-Gentilism is a mirror image of Christian accusations. Jews, as father-representatives, kill Christ, the son and Savior; their continued commitment to the father and the binding over of the son for sacrifice (or at least vulnerability and victimization) attest to the persistence of the mythic-historic past in the present.

The Jesus that Christians have sought to get off their backs is not Jesus-the-Son, but the demeaning conscience or superego of Jesus that represents the will of God-the-Father. We recall with some horror that that very angry young man, Adolf Hitler, symbolic of adolescent rebellion and rage against all fathers (real and symbolic) (*cf.*, Erikson, 1963), referred to conscience itself as a "Jewish blemish." Just as I see as simplistic the Christian allegation that "The Jews are asking for it" so I cannot single out the Jews for special responsibility for the existence of conscience.

But in the stereotype lies a grain of truth. Jews have long prided themselves on being the conscience of humanity, indeed, of possessing a superior conscience. This has boded good and ill. Conscience can serve as a guide or as an inner oppressor: as guide, it balances permission with restraint, instinctual expression with sublimation; as inner oppressor, it forbids severely, circumscribing all of life with taboos and inhibitions and penances. Overweening conscience produces self-righteous moralism

that is hasty to point out defects and infractions of morality in others, infractions which one would like to get away with but must repress. In a sense, Jews not only set an example for the world, but the Gentile world persists in setting a negative example for the Jews; that is, they represent what a good Jew *is not*. The moral Jewish world is contrasted with the immoral non-Jewish world.

It is difficult enough to try to be the conscience of another person, let alone that of the whole world; one is not only the watchdog of the morals of others, but must constantly keep oneself under surveillance, leaving little time or energy for much else. Not unexpectedly, those who are constantly reminded of their inadequacies and failings, of their sins of omission or commission, begin to feel persecuted rather than chastened, victims of another's conscience, and, again not unexpectedly, will wish to free themselves of this burden. What is true clinically is equally true for intergroup relations. For Jews to assume the role of moral arbiter of humanity's bad conscience is not to stand *with* others, but *against* them, reminding them of Jewish moral superiority and, by extension, of Gentile moral inferiority. It is a subtle form of Jewish anti-Gentilism. The doctrine of the Jews as the Chosen People is often expressed as haughty pride, if not arrogance: Jews are morally and otherwise superior to Gentiles (smarter, more tolerant, more inventive, more successful, more ethical, etc.).

It is difficult for any son to identify with a father who "lords it over him" by displaying his unreachable and unsurpassable attainments. The splendor and magnificence of the father leaves little conflict-free room for the son's initiative. And it is even more difficult for a son to identify with a father who demands fastidious obedience to the point of the son's allowing himself to be sacrificed (or his manhood severely restricted) for the sake of the father—while the father protests that it is for the son's own good. However we may wish to evaluate St. Paul clinically or theologically, it must be admitted that his sense of sin and guilt associated with patristic Judaism was overwhelming; only

by adopting the *immanent* sacrificial *and* risen Son Jesus as his guardian spirit could he cope with the *transcendent* Father and His Law.

Jews have insisted that there is no mediation with the omnipotent Father. One must *capitulate,* submit, in order to be saved or deemed redeemable. The abyss cannot be bridged. Christianity, however, has insisted that if life is to be endurable, the chasm *must* be bridged. That bridge is Jesus, whom God Himself sent as *His* emissary to intercede for mankind, the Father Himself reaching out toward His sinful children and offering to redeem them. I hasten to add that in Medieval Catholicism, Byzantine Orthodoxy, or Calvinism, much of the idealized reassurance of assistance through Jesus the Son (at the behest of God the Father) was made secondary by the return of the (repressed) patristic psychology and theology associated with the very "Old Testament" Judaism that was now vilified and had purportedly been superseded. *This* Christian Father God was a transcendent, distant, exacting, vengeful father, a severe judge, not the "good father" who forgave more than he exacted. The point is, however, that Judaism *openly* identifies with the Father whom one must confront face to face in the bleakness of direct relation.

If "no Jew can contemplate the murder of the Father and his replacement by the son" (LaBarre, 1972, p. 597), no Christian can contemplate the murder of the Son and his replacement by the Father. That is, no Jewish son could allow himself to partake in patristic divinity save as servant of God, while no Christian father could allow himself to imagine being one who crucified Christ the son. Jews stand as defender of the prerogatives of the (transcendent) father, obeying His command to sacrifice the son; Christians stand as champion of the (immanent) vulnerable, crucified son, seeking ways of circumventing the constricting Law of the Father.

The relation between Judaism and Christianity can perhaps be summarized in a "formula" which identifies significant attributes of the respective religions and at the same time explains

why these very attributes have been seized upon for purposes of stereotyping, exclusion, and conflict. The formula reads: Jews *overtly* identify with the Father, and *covertly* identify with the son; Christians *overtly* identify with the Son, and *covertly* identify with the Father. The overt aspect dominates official and consciously recognized religious life and the values of ordinary daily life; the covert aspect dominates the unconscious life, being largely denied, repressed, dissociated, and projected.[7] For example, Christians angrily accuse the Jews of killing Christ, of crucifying "our Lord," etc. Christians, consciously identifying with the Son, vehemently deny that *they* have evil wishes and intentions toward their children, especially their sons. They deny identification with the father who, at least in fantasy, would like to do away with his potential competitor(s). They project, dissociate, and displace their own internalized father onto the Jews who, through projective identification, come to embody and personify those abhorrent attributes which a good Christian cannot acknowledge as being part of the self. Christians do not murder their sons, only Jews do—from Jesus to the Host Desecration and child-murder accusations that have haunted Jews for centuries. Christians project their oedipal and counteroedipal wishes onto Jews, thereby becoming innocent. They accuse Jews of doing what they unconsciously wish they could do; attribution to Jews is an externalization of what cannot be consciously accepted, but what also cannot be lived with-

[7] For present purposes, I omit the heterodox, subversive, antinomian, and countervailing undercurrent of mysticism that sought to breach the abyss and overcome the distance through merger with the Godhead—a Godhead that was in imagery and function as much maternal as paternal. The uncompromising severity of Jewish, Christian, and Muslim orthodoxies with their omniscient, omnipotent, and unrelentingly demanding deity led to subterranean, rebellious mystical movements within each tradition (Kabbalah, Gnosticism, and Sufism, respectively) as a means of counterbalancing the official religion that demanded much but gave little (*cf.*, Scholem, 1961). One could carry this a bit further and note, following Freud (1929) in *Civilization and Its Discontents,* that rebellion and neurosis are inevitable consequences of the normative pressure for cultural conformity; our neurotics, psychotics, rebels and prophets tell us in the extremism and deviance of their behavior what is present but repressed and disguised in the normal members of society.

out. Jews play the role of the father and Father for the Christians. Here the "grain of truth" is distorted and exaggerated by the stereotype of Jews which makes them into unidimensional murderers, molesters, and prototypes of evil.

Jews respond to the accusation that "the Jews killed Christ" by denying it; the Romans were responsible for the crucifixion and besides, Jesus was not the real Messiah in the first place. Christians and Jews claim innocence for the prototypic crime. While Christians deny allegiance with the Father against the Son, Jews deny (project, etc.) alliance with the Son against the Father. Jesus is, after all, a false prophet, a false Messiah, worthy of neglect, nothing better. It is the duty of Jews to obey God's Law, to accept the burden and gift of Chosenness. Jews are a "nation of priests," abiding by the Mosaic Covenant—a covenant that has *not* been superseded. The function of Rabbinic-Talmudic pilpul (a sacred exegesis that has taken the modern-secular form of scientific disputation) is to explicate the will of God through studied attention to His text.

Jews are not rebellious sons, they are obedient sons. Yet obedient sons must suppress and abort their own rebellions and, in becoming fathers, suppress the rebellion of their own sons, as well as the rebellion *of those who symbolize identification with the Son rather than the Father.* Christians thereby come to play the role of the errant and heretic son and Son for the Jews. The "grain of truth" is reciprocally magnified so that Christians become unidimensional prototypes of rebellion, rage, revenge, and persecution. While Jews identify with the Father, they certainly do not wish to be perceived as wrathful, unyielding, exacting the very lives from their sons (and that of others' sons). Jewish tradition emphasizes that God is one of "justice and mercy," "full of loving kindness." Abraham may have wished to rid himself of his son Isaac, but tradition rewrites the motivation so that it comes from without as a command from God. Jews consciously identify with the "good father," while often acting according to the introjected dictates of the archaic "bad father." Christians are adept at noticing the latter and then identify the Jews

exclusively as the "bad father" rather than as both.

In a superficial sense, one might say that Christian theology is more psychologically honest in its admission that we are all sinners against both the Father and the Son, while Judaism only concerns itself with sins against the Father. But Christianity then disqualifies and rejects its own insight by projecting its own guilt and sinfulness onto Jews who bear the entire burden of evil thoughts and deeds against the Son. Judaism, however, disqualifies its own protestation of innocence when it exhumes the parable of Abraham and Isaac to allegorize Jewish history and justify its persistence through the binding over of future generations. It can be endlessly debated what the Jews did or did not do to Jesus. But we do know how Jewish tradition, inside and outside formal religion, approaches the father-son relationship. From expulsion from the mythic Eden through the annual recitation of sins on the Days of Awe, Jews confess an abundance of sins against the Father. As remorseful and patient children, they ask for forgiveness of the mighty Father. But there is no acknowledgment of sinfulness toward their children. God's commandments and the legends of His relation to mankind are able to mask human intentionality.

In a tragic symbiosis, Jews as "Christ killers" and Christians as "Jew baiters" and persecutors fulfill one another's stereotypes and expectations, as mythic history continues to recur. Jews avenge the father, while Christians avenge the son.[8] While anti-

[8] The Jewish-father and Christian-son distinction extends even to the different conceptions of the Messiah. Jews, of course, regard Jesus as a false Messiah and await what might be called a secular-worldly Messiah in the tradition of Moses or the Macabbees to rescue the Jews. While the Jewish Messiah is conceived as a *representative* of God, certainly not God himself, the Christian Messiah is the Father himself become Son who then offers himself to the Father. While I need not debate the obvious logical contradiction of the latter, its psychological message is, as the passage in the New Testament goes: "God so loved the world that he gave His only begotten Son." The Christian Messiah is simultaneously God himself and the Son who was sent by the Father as the Prince of Peace to *mediate for man* the problematic relation between man and God, to help man overcome the awesome distance. Because of the different psychologies involved, Jews must reject Jesus because he was not a "father figure"; and Christians must

Semitism is a Christian act of self-destruction, Jewish anti-Gentilism is a Jewish act of self-destruction. Each group hates that aspect of itself that it sees in the other. Each nevertheless needs the other to symbolize what is repudiated or exorcised from the self. No "final solution" can ever entirely exterminate those very people who are necessary to maintain one's own self-definition. Those who are "superior" need others who are "inferior" in order to sustain their feeling of superiority. *Herrenmenschen* could not exist without *Heerdenmenschen*. And in a macabre way, Jew and Gentile need each other to represent what one's own are not. Jews make the Gentiles as much *"Goyim"* as the Gentiles make Jews feel like "Jews."

Both compete, as in sibling rivalry, for God's favoritism, for the countenance and affection of God the Father, each claiming divine chosenness, each claiming to be the genuine "Israel" (with Christianity as the "New Israel"). As competing "children of God," each sees the other as fallen into error and wrong belief.

Further complicating the Jew-Gentile, Father-Son problem is that while Jewish tradition identifies with and takes the part of the Father, ambivalence is not absent. Ambivalence toward the son is simply clearer. The wish to be rid of the Father, the demanding Lawgiver, is in part reflected in the seeming excess of laws, prescriptions, proscriptions, taboos, that traditionally circumscribed literally every human act. This psychologically obsessive and compulsive attention to detail has the quality of "undoing": it attempts to reverse, compensate for, or make restitution for unconscionable deeds and "alien thoughts" (since thought is equated with intentionality of committing the deed). Tradition must accumulate a veritable mountain of "Thou Shalt's" and "Thou Shalt Not's" only when those who create and continuously re-create that tradition must defend against some unspeakable (and unconscious) deed(s) or wish(es). Ritual

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accept Jesus because he was a "son" and not (exclusively) a "father" (*cf.*, Reid, 1972).

piles upon ritual, as each attempt to cope with the underlying anxiety is never sufficient to dispel it, creating in its stead secondary and tertiary sources of anxiety concerned with the perfect performance of the ever-increasing rituals.

I suggest that this holds in the Judaic tradition from the pre-Mosaic period, through the official codifications of the Law, through the dominance of the *Mitnagdim,* and persists in modern secular form in science and scholarship (see, however, Bakan, 1965). The search for the right teaching, teacher, formula, law, or guru—literally, *ortho doxos*—is interminable. Scrupulous attention to "legalistic detail" tries to cope with the rebellion of the son against the father, the psychological equivalent to the *Christian* wish to "get Christ off our backs." Freud (1934-1938) pursued this theme in his speculative study, *Moses and Monotheism.* Whether or not one accepts Freud's thesis that it was the ancient Hebrews who killed Moses the lawgiver, a specific historic act, I find it necessary to accept the deeper, more timeless proposition that sons imagine themselves rising up against their powerful fathers—later to atone for it by religious expiation. In attempting to discern and follow the letter of the law one tries to alleviate the guilt. On a less theoretical or abstract level, one need only recall the eighteenth century Hasidic movement as (in part) a rejection of rabbinic scholasticism and power; or the attraction that the *Haskalah* (Enlightenment) and the opening of the ghetto and shtetl doors *from without* had for young Jews seeking to escape the oppressiveness of Jewish traditionalism.

Jews and Christians both are oedipal animals, something we inherit by virtue of being human. Jews and Christians differ in how the father-son conflict is resolved and symbolized, a major mechanism of which is Christian anti-Semitism and Jewish anti-Gentilism. But is there any way out of the conflict, the vicious circle of respite, waiting, and persecution? Surely the answer is not the simple reversal of "conversion" or "assimilation," which would mean choosing the side of the redeemable son rather than that of the punitive father. Nor, incidentally, would a "new"

Christian salvation be achieved by identification with the powerful father rather than a masochistic-Pauline identification with the vulnerable, though "saved," son. Rather, the solution lies in something of a "union of opposites" wherein the Christian would not need the Jew to hate, the Jew would not need the Christian to hate, and each would not suffer with self-hate. Surely genital male maturity cannot be derived either from phallic power borrowed from (and thus still possessed by) the father, or from the son's regression to (feminized) masochism and powerlessness. To be a man in Freud's dictum of "love and work" seems possible in neither tradition.

LaBarre (1972) writes: "It is useless to hate the past; a man can only struggle to recover from it, and to modify as we can what time has made of us. Will Jews ever have outlived the usefulness of taught anger and memorized anguish? Or are they chosen forever to be the lightning rod of other men's miseries?" (p. 587). As I have suggested, the chosenness is not a wholly passive, but often an invited affliction. If to be a Jew is to be a victim, what happens if the victim psychology (and pathology) is no longer there? Is the "lightning rod" the only thing to sustain a Jewish identity? And perhaps the most terrible question: What is there to justify a continued separate Jewish identity? And similarly: If the Christian no longer needs the Jew to embody all of the Christian's dissociations, what justification for the persistence of a separate Christian identity? Can reciprocal projection give way to mutual identification, toward a common future in which "forgiveness," "tolerance," and even an ideology of "ecumenism" are no longer necessary? Can the traditionally homologous ego splitting and "culture splitting" become superfluous because what was once phobically dissociated is reintegrated in ego and ethos alike?

La Barre (1972) writes that "only a Greek could have written *Prometheus Bound,* and only a Jew the *Book of Job*. The one advances the claims of the power-seeking son, the other the power and majesty of the father. But in the dialogue of father and son, the omnipotence and narcissism of both must yield if

moral maturity is to arise in either human estate" (p. 590).[9] If fathers could trust themselves enough not to fear their sons or the sons of others, there might no longer be the need to bind over the son. Conversely, if sons could trust themselves enough not to fear what they fantasize doing to the father, there might be no need to make restitution to the father and subsequently wish to rebel further. In Dietrich Bonhöffer's sense, we should "come of age" and relinquish our childhood and the religions that help to sustain and perpetuate it. To become one's own *authority* as a *man* is no longer to need the authoritarian defense of identification with *God* or with a *Son of God*.

Gentile anti-Semitism and Jewish anti-Gentilism are defenses that prevent us from being fully human. They are symptoms of

[9] See also Erikson's (1964) discussion of the concept of "mutuality" as a relationship in which each member enhances the strengths (rather than exploits the weaknesses) of the other, and in so doing enhances his own identity toward a common future identity. In my own psychoanalytic "mythology," I find the relationship between Hans Sachs and Walther Von Stolzing in Richard Wagner's opera *Die Meistersinger* to be exemplary of the mature father-son relationship I have in mind. The wise elder shoemaker Sachs is dean of the Mastersingers, but he does not jealously guard his supremacy and demand strict adherence to traditional musical convention and rules. He supports his young protege Walther, who clearly has new musical ideas; he helps Walther to polish and discipline himself, without acting as the unreachable disciplinarian. He sees in Walther the future of music (just as he himself is the gifted consummation of its past), a future with which he also identifies. He is thus an ally of that future, not its obstacle and enemy. Sachs is, shall we say, the "good father." Sixtus Beckmesser, whom Wagner unmistakably identifies with the critic Edward Hanslick as the stereotypic Jew, represents the "bad father," the father who jealously guards what he has, who tries to gain from others by illicit means, and who insists that the young abide rigorously by the cumbersome old rules. Beckmesser is a stickler for "the letter of the law." While I find Wagner's virulent anti-Semitism repulsive, I think it a mistake to dismiss his entire tirade. We must look behind his abusive language for what is symbolized and, for him, personified by "the" Jew. The Jew embodies the image of the legalistic, exacting, conniving, distant, oppressive, retributive, vengeful father who will not allow his "son" to become a "man" without relinquishing his individuality. In the relationship between Sachs and Walther, I discern the mutuality between generations that transcends the inevitable inequalities and conflicts built into the oedipal animal. Despite Wagner's Pan-Teutonic ideology, the intimately personal relationship between Sachs and Walther transcends the issue of Christian and Jew and strengthens the bond of mutual identification between father and son (*cf.*, Lipman, 1976).

our incompleteness and our struggle with the half we have rejected at such terrible cost. Only one who is whole can allow wholeness (indeed, otherness) in another. The answer is reintegration. We are all fathers and sons, both. The fateful question for Jew and Gentile alike is whether we shall persist in sustaining our venerable pseudo identities by living parasitically off of the projected and lived-out identities of others.

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A Form of Acting Out in the Narcissistic Transference

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A FORM OF ACTING OUT IN THE NARCISSISTIC TRANSFERENCE

BY SHELLEY ORGEL, M.D.

In a session shortly before the summer vacation, a patient who had been in analysis for several years spoke in many different ways and on various levels of his fear of my cutting myself off from him. For instance, he saw me as his phallus and was afraid of feeling castrated; he saw me as a breast that was leaving him cold and hungry; he saw me as a need-satisfying object who was leaving him alone with his mounting, uncontrolled desires and his anxiety in the face of frustration. He also saw me as leaving him in order to punish him for his sexual acting out and because of my disappointment at his lack of progress. His anxiety intensified as I listened in silence to his recital. Finally, he said that he wanted me to say something.

I stated that he wanted me to say his next thought for him to confirm our oneness—as though we were two minds with one thought. He replied that his next thought had been, "I don't want anyone to come between us." He felt that the interfering person was female. "I've put five years into this," he said, "and I don't want anything or anyone to wreck the treatment."

I pointed out that this was what he wanted to believe *I* felt and that he wanted me to say exactly these words to *him*. He replied, "It's about time I understood this—how I need you to join with me to feel whole—not to be terrified of being alone."

The reason for reporting this interchange is to illustrate a particular technical problem imposed by the narcissistic aspect of the transference. Often, with this sort of patient, a premature relief from anxiety may be brought out by the analyst's entirely correct and seemingly appropriate comment. It may be helpful to consider whether the patient sees the fact of the comment's being made as proof of the omnipotence of the grandiose self and the correctness of the comment as evidence of fusion of self- and object representations: the object is voicing the feelings

and thoughts of the subject as though they were one and the same.

When my patient had to say himself what he wished to elicit from me, he had to acknowledge that we were not magically united. In his case, this fantasy protected against fears of loss of stability of masculine self-representations. These were shored up by the constant presence of need-satisfying objects and especially the analyst, whose empathic responsiveness often had the effect of enabling the patient to maintain omnipotent fantasies of fusion.

The form of the comment the patient made and wished to hear from me also affirmed his wish to use the analyst as an external superego, the superego-ego tension acting as a reassurance of ultimate protection and the maintenance of a desired bond. The feeling of being gently criticized is very reassuring to such patients, offering a promise of narcissistic perfection and endless envelopment in an idealized parental imago.

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Dale Boesky

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BOOK REVIEWS

THE ANNUAL OF PSYCHOANALYSIS. A Publication of the Chicago Institute for Psychoanalysis. Volume II. New York: International Universities Press, Inc., 1975. 420 pp.

This second volume of an important new venture happily maintains the high level of scholarly research that typified the papers in the first volume. The twenty papers are arranged in eight sections: psychoanalytic history, psychoanalysis and philosophy, clinical theory, developmental psychology, clinical psychoanalysis, interdisciplinary research, psychoanalytic education, and application. One expects mixed quality in such a diverse grouping of topics and authors, but the editors have done their job well here. Not only are most of the papers interesting; half of them are superior, and a few are truly outstanding.

The historical section begins with a fascinating paper by Meyer S. Gunther and H. Trosman describing Freud's expert testimony on war neuroses at a hearing conducted in 1920 by the Austrian government. Wagner-Jauregg also testified at this hearing, and we are given a beautiful example here of Freud's incisive wisdom and exquisite tactfulness.

M. Grotjahn's paper is another excellent historical report, which concerns the *Rundbriefe* that circulated among the "Committee of the Six Ringholders" between 1920 and 1924. Carl Schorske's scholarly "Politics and Parricide in Freud's Interpretation of Dreams," the plenary address to the American Psychoanalytic Association in December 1971, is included here in expanded form.

We are indebted to the editors for their decision to publish in English a critique of the repetition compulsion and death instinct written forty years ago by Heinz Lichtenstein and translated for this volume by the author.

Leo Stone's paper, "The Assessment of Students' Progress," is a superb distillate of this gifted psychoanalytic educator's thoughts about the current state of psychoanalytic education and his ideas about key reforms in student assessment, desirable qualities in the young analyst, lessening of academic rigidities, and other issues.

The section on clinical theory begins with M. Basch's paper on perceptual transformation in the service of defense. H. Krystal presents a most useful discussion of developmental and regressive aspects of affects. P. Ornstein gives a good summary of H. Kohut's work, but does so in a proselytizing style. P. Tolpin's paper presents an intriguing discussion of the regulation of anxiety and the anxiety-reducing function of pleasure.

The section on developmental psychology begins with an important and subtle consideration of learning and identification from the developmental viewpoint by W. W. Meissner. This paper is a promising continuation of Meissner's earlier studies on identification which not only integrates much prior work by other authors into a novel configuration, but extends recent theory of object relations and the self to learning processes.

M. Tolpin reconsiders the Daedalus myth in an elegant discussion of certain developmental vicissitudes of grandiose fantasies and includes excellent examples from the life of Churchill and Tolstoy. This section concludes with R. Stoller's paper on extreme femininity in boys.

A. Ornstein's clinical paper applies Kohut's ideas to certain aspects of repetition in narcissistic personality disorders. The section on clinical papers includes a posthumous presentation of a paper by M. Sperling on acting out characterized by the blunt and lucid style of this veteran clinician.

E. Hartmann has contributed a superb review of recent sleep research that particularly stresses the relation between S sleep and D sleep to variations in sleep requirements, dysphoric affects, and sleep functions.

The section on psychoanalytic education contains J. Kavka's first-class discussion of the educational use of the first case conference to enhance the candidate's empathic capacities. Kavka uses richly detailed vignettes to show how new knowledge about narcissistic conflicts can help undo interferences with empathy. This paper is followed by Lucy and Ralph Zabarenko's ambitious attempt to integrate a variety of psychoanalytic concepts related to pedagogy. The volume concludes with papers on applied psychoanalysis by H. Lichtenstein and P. Seitz and a quite valuable report by D. Meers on his work with black ghetto children.

One can only congratulate the editors of this promising new

annual and wish them equal success for years to come. It is already a valuable addition to our literature.

DALE BOESKY (DETROIT)

A CONSIDERATION OF SOME LEARNING VARIABLES IN THE CONTEXT OF PSYCHOANALYTIC THEORY: TOWARD A PSYCHOANALYTIC LEARNING PERSPECTIVE. By Stanley I. Greenspan, M.D. (Psychological Issues, Vol. IX, No. 1, Monograph 33.) New York: International Universities Press, Inc., 1975. 107 pp.

The present monograph is a welcome addition to what has become a distinguished series of volumes. It attempts to bring some sense of integration and perspective to the amalgamation of several important areas of psychological thinking.

During the closing years of his distinguished career, David Rapaport became convinced that the most basic gap in psychoanalytic understanding was the absence of a theory of learning. While he did not feel that contemporary learning theories were adequate to bridge the gap, he indicated some of the first steps in that direction by envisioning the learning process in terms of structure formation. Greenspan takes the process an important step further and attempts to integrate the stimulus-response/reinforcement approach to behavioral learning theory with some aspects of psychoanalytic theory. The important questions to be asked are: First, how well is it done? And second, how valid is the undertaking?

The answer to the first question is clear and unequivocal—the undertaking has been carried off very well indeed and with considerable ingenuity. Not only does Greenspan demonstrate skill and imagination in picking the spots where integration can be meaningfully undertaken, but he demonstrates much insight in working these issues through. He also manages to raise a number of provocative and interesting questions in the course of his discussions.

As for the second question, the answer is more complicated. Greenspan approaches the problem of integration of psychoanalytic and learning variables from the behavioral theorist's perspective, which, of course, means that his objective is to show that analytic variables can be translated into behavioral terms. Thus one might be able to explain fixed maladaptive patterns of behavior on the basis of variable interval schedules of reinforcement which minimize

the tendency toward extinction. Such an explanation, however, does not touch the fuller ramifications of the patient's experience which may involve specific fantasies and motivations that contribute to the fixation but play no role in the understanding provided by the behavioral explanation. An adequate understanding needs to keep both approaches clearly in focus. Both may add to a more integrated explanation of the phenomenon, but a unified formulation which does not adequately conceptualize and respect the differences between the approaches can tend seductively toward reductive explanations. It strikes me that Greenspan's thesis works best when he deals with points of conjunction, but he tends to lose necessarily complex perspectives when issues of difference must be maintained.

A second problem in this attempt at synthesis may be that the stimulus-response reinforcement paradigm may not be the best or the most useful for potential integration with an analytic approach. More recent approaches to learning theory have evolved concepts of behavioral modification based on central representational contingencies, which are derived from the integration of situational (external) stimulus contingencies and incentive stimuli. Such stimuli do not operate on the basis of extrinsic reinforcements or drive-need reduction. They shift the emphasis from drive states to more complex and autonomous motivational states relatively independent of response contingencies, e.g., curiosity versus hunger. Such motivational states tend to reorganize certain selective situational stimuli as conditioned incentive-discriminative stimuli which thus elicit and regulate behavior patterns. Approaches which recognize the operation of central motivational states and incentive stimuli may thus prove more amenable to integration with psychoanalytic theory than the extrinsic reinforcement approaches.

There are also problems with the approach to structure in the present monograph. For example, internal psychic structures are redefined as "superordinate classes" which can be organized and maintained by various reinforcement schedules. Such response classes enjoy a slow rate of change and can function in the short run without dependence on internal or external stimulation, and can in the long run be maintained on a schedule of variable noncontinuous reinforcement in accord with the stage of maturation. The way to this formulation was opened by Rapaport's definition of structure in terms of the slow rate of change. Here again, the logic limps, since

the definition of structure is reductive, even though it allows for integration with behavioral variables. The formulation follows in the footsteps of Rapaport's notion of "stimulus nutriment," but the whole formulation of structure in Rapaport's terms needs radical reconsideration. A second aspect of the problem of structure formation has to do with internalization. No amount of reinforcement by extrinsic modifiers can provide an explanation for the analytic concept of internalization. The substitution of a behavioral paradigm, which focuses on behavioral level consistencies between variable reinforcement schedules and stimulus nutriment, serves neither to substitute for nor to explain internalization.

With these basic objections in mind, I can heartily recommend Greenspan's monograph as a stimulating and provocative treatment which probes into extremely valuable areas of theory. The importance of such explorations for the increasing vitality and utility of psychoanalytic concepts cannot be underestimated.

W. W. MEISSNER (CAMBRIDGE, MASS.)

ASSESSMENT OF EARLY CHILD DEVELOPMENT. By Dorothy Flapan and Peter B. Neubauer. New York: Jason Aronson, Inc., 1975. 151 pp.

This book admirably lives up to its aim of providing a standardized "screening" device which can be easily used in nonclinical settings by professionals and paraprofessionals in the fields of day care, early childhood education, and community health. The purpose is not to make these workers therapists or counselors; rather, it is to help them become aware of developing problems, to be able to present their observations in a form that can be used by clinical consultants and other educators, and, thus, to find ways to enhance each child's development.

In order to arrive at a short assessment procedure, "normal" middle class and working class children were studied at three to four years, four to five years, and five to six years of age, utilizing the usual clinical methods of data gathering. The research study occurred over a period of ten years, requiring about twenty-five hours for each child each year. It was decided early in the study that development represents the major task in childhood and that the capacity to maintain development could serve as a yardstick by

which to assess children and differentiate among them.

The aspects and areas of development selected for assessment were based both on the research findings and on a theoretical model derived from psychoanalytic developmental psychology. For example, it was found in the research study that conflicts were most likely to show up in the child's relationships with others or in the expression or lack of expression of feelings. These two, therefore, are the first aspects of development reported on in the first chapter dealing with assessment. There follow chapters on ego development, phase development (both libidinal and aggressive), and superego development.

The authors have presented their findings and their suggestions for assessment in two ways. First, they state in each chapter, in broad, general terms, the expected development within each area, translating theoretical concepts and propositions into observable behaviors. Second, they prepared approximately fifty charts describing normal and pathological behavior in areas under the five categories mentioned. Each chart is clear and concise and should be readily usable by anyone working with young children. Although each is interesting to read in its own right, the charts probably will be more useful as brief and up-to-date references for professionals and paraprofessionals working with young children. In each area there are three charts. The first presents the characteristic, expected, typical behavior of the child in the phase of development he or she happens to be in. The next two charts present the uncharacteristic, unexpected, atypical, pathological behaviors of children in each phase, ranging from one extreme to the other. For example, under "Relationship with Mother in Infancy" (the oral phase), "ranging from" describes a predominantly clinging relationship, whereas "ranging to" describes infants who have given up trying to get what they want and turn away from their mothers with a lack of trust.

Working with these charts and assessments, the worker can fill out a form which allows both ratings and impressionistic statements and requires only about twenty to thirty minutes to complete. It can be used as an initial assessment, a year-end summary, a report for others who will have contacts with the child, or as a means for conferring with the child's parents. In addition, the assessment serves as a basis for differentiating between groups of children. In Group I, progression in development has been maintained (a) without accompanying pathology or (b) with significant accompanying pathological fea-

tures. In Group II, progression in development has been interfered with in significant areas. In Group III, progression in development has been interfered with in significant areas, but is again proceeding.

This book should be of invaluable aid for anyone working with young children. It addresses itself to one of today's most important issues: primary prevention and intervention early in life, when so much can be done by so many people to prevent, or at least ameliorate, emotional, mental, and educational problems that can occur later in life, at which time the task becomes much more formidable.

JOHN B. MCDEVITT (NEW YORK)

EXPLORATIONS IN CHILD PSYCHIATRY. Edited by E. James Anthony. New York and London: Plenum Press, 1975. 500 pp.

This book is a natural outgrowth of Anthony's long-standing enthusiastic devotion to the development of research in child psychiatry. Here he attempts to bridge "the gap between research as formally reported and research as informally lived and experienced, so as to provide a more authentic portrayal of the process of investigation as it actually exists." His sixteen co-authors, all practicing child psychiatrists, most of them psychoanalysts, were invited to join him in presenting their scientific autobiographies, indicating the influences that led them into research and the development of their research interests and philosophies, including summaries of their findings.

Almost all of the authors took the formidable invitation seriously; this plus Anthony's excellent articles and editing have produced an interesting, frequently stimulating volume. Anthony's four-part General Introduction is a most refreshing treatment of the subject. He defines what is and what is not research, emphasizing the rich diversity of possibilities rather than the constraints imposed by research. Sensitive consideration is given to the needs of the child as research subject. Clinicians, he says, should not be deterred by the lack of research training, as they explore the research potentials of their hunches.

Most of the contributions are grouped under the type of research described: "Organically Based Research" with contributions by Dennis P. Cantwell, L. Eugene Arnold, and M. W. Laufer; "Developmental Research" with contributions by Louis W. Sander,

Justin D. Call, and Stella Chess; "Psychosomatic Research" with contributions by Donald J. Cohen, Joseph Fischoff, Ake Mattson, and Hilde Bruch; "Clinically Oriented Research" with contributions by Leon Cytryn, Edward H. Futterman, Theodore Shapiro, and Gaston E. Blom; "Naturalistic Research," exemplified by Anthony's "Naturalistic Studies of Disturbed Families"; and "Experimental Research," exemplified by Anthony's "The Use of 'Serious' Experiment in Child Psychiatric Research." A special group, "The Ontogenesis of the Investigator," consists of two substantial scientific autobiographies by Lauretta Bender and Reginald S. Lourie.

Although this volume is addressed to child psychiatrists, it offers much of personal and scientific interest to psychoanalysts. I recommend it particularly to the many analysts engaged in the training of child psychiatrists.

H. ROBERT BLANK (WHITE PLAINS, N.Y.)

FEMALE SEXUALITY AND THE OEDIPUS COMPLEX. By Humberto Nagera. New York: Jason Aronson, Inc., 1975. 143 pp.

In this economically and clearly written book, Nagera has summarized part of the psychoanalytic theory of the development of the oedipus complex in the female. This topic has been a difficult and a complex one and the subject of important dispute from the early days of psychoanalysis.

The author begins with a historical review of the evolution of the concept of oedipal development, dwelling particularly on the complicated ways in which the attachment of the girl to the mother has been designated, including, of course, both the attachment that is part of the oedipus complex proper as well as that of the preoedipal phases. Several chapters are devoted to a systematic presentation of the stages of the oedipus complex; in these, Nagera clarifies the distinction between the first, or phallic-oedipal stage, and the second, or oedipal stage. Following Freud, he considers the girl to be "masculine" in the phallic-oedipal phase, taking the mother as her object and believing that all humans possess penises. He sees the change from this first stage to the second, or true oedipal stage, as requiring several important steps: a change of object, the abandonment of the clitoris as essential erotogenic zone, a change from masculine posi-

tion to feminine and from active to passive, giving up the idea that everyone has a penis and also the wish for one, accepting substitutes for the penis, and developing appropriate feminine identifications.

Using this classical theory as his base, Nagera systematically analyzes a number of variations from the normal course of development, in terms of miscarriages of one or another of these currents. A particularly useful section is devoted to clarification of the meaning of the terms "active" and "passive," especially as they relate to "masculine" and "feminine," a rather confused issue in analytic literature.

Nagera concludes his presentation with a fairly long section that includes both adult and child analytic material exemplifying many of the currents outlined earlier and illustrating the complexity of the phenomena and the influences that combine to produce them. The presentation is admirably clear and succinct throughout, which allows some of the difficulties with the theory to appear.

It seems regrettable to this reviewer that at this late date the core of the author's outline of female sexual development still appears to have been extracted essentially unchanged from the pages of Freud. The work of major analytic authors representing significant differences of opinion—for instance, Horney and Jones—are only footnoted in passing, and their points of view are not really addressed.

In no other science would it be possible to write and publish a work on an important issue which did not fully discuss all the relevant data and theories in the field. From Nagera's account, for example, it would be difficult to know that there had ever been or was now a significant difference of opinion concerning the factors leading to the phenomenon of penis envy. A second example of omission is in his outline of the changes that the girl must normally undergo to pass from the phallic-oedipal to the oedipal stage: Nagera states simply that she must suppress or abandon the clitoris as an erotogenic zone, as if no subsequent evidence had been offered indicating the continued importance of the clitoris and, indeed, suggesting that the suppression of the clitoris, far from being normal, is an important cause of frigidity. In a later section, Nagera does take somewhat into account the work of Masters and Johnson, but he appears nevertheless to believe that normal development still requires a considerable suppression of clitoral sensitivity. And he virtually dismisses the important question of when the vagina becomes known to the child and becomes important as a source of erogenous stimuli. The field

in general suffers from an excess of theorizing and a deficiency of observation, and the author, a child analyst, should have provided us with ample observations on some of these points. The case material presented does not elucidate the actual bodily experiences in question, although it richly shows the changes in and the flowering of the different stages of oedipal object relationships, in particular the important shift from mother to father.

This book is one of a number of valuable summaries and compilations of psychoanalytic theory which Nagera has produced over several years. As a systematization, it is quite successful, but as a comprehensive review of the subject, it must be faulted because of the obvious interest of the author in supporting a particular point of view.

ADRIENNE APPLEGARTH (SAN FRANCISCO)

THE AGE OF SENSATION. By Herbert Hendin. New York: W. W. Norton & Co., Inc., 1975. 354 pp.

Psychoanalysis has long had trouble with Freud's indictment of our society, the firmest statement of which was perhaps conveyed in *The Future of an Illusion:* "It goes without saying that a civilization which leaves so large a number of its participants unsatisfied and drives them into revolt neither has nor deserves the prospect of a lasting existence."[1] In their implication, remarks such as this call upon the psychoanalyst to engage in culture criticism as well as in psychotherapy (since the analytic method is particularly suited to describe the tension between individual and society)—a task toward which few seem inclined. At another level, the insight that society cripples the individual places a burden upon analytic theory to give social content to ego structure. If the "average expectable environment" produces unhappiness, then this fact should be registered theoretically. Again, analytic thinkers, perhaps out of a need to emulate the so-called value-free models of established science, have shied away from the task. As a result, the prevailing construction of the theory of the ego seems to fit in with pluralist liberal-democratic ideology: a fundamentally harmonious organization, like a well-ordered suburban house, fully equipped with its playroom set aside for a little disorder.

[1] Freud: *The Future of an Illusion*. Standard Edition, XXI, p. 12.

Herbert Hendin, who is Director of Psychosocial Studies at the Center for Policy Research and a psychoanalyst, has studied a fair number of the youngsters who grew up in well-ordered middle-class homes and finds them to be as miserable a lot as Freud could have predicted, albeit with a contemporary style. As he describes them, the people of today's generation have despaired of fulfillment. Their energies are expended in the "active pursuit of disengagement, detachment, fragmentation and emotional numbness" (p. 6). Beyond numbness lies a rage which occasionally breaks through, especially in the relations between the sexes. For the most part, however, the inner life is frozen, while outwardly a purposeless craving for stimulation dominates their behavior. And as might be expected, this stunted inner life is rooted in family relations of a matching coldness—parents who live through the children while abandoning them in the name of permissiveness, the mothers intrusive, the fathers distant, and so on and on: the litany is perhaps too familiar.

Hendin's sample consisted of about four hundred students at Columbia University: one hundred paid volunteers chosen at random, the rest, a mixed lot of students in academic trouble, those who attempted suicide, drug takers, homosexuals, impotent men, and "revolutionaries." Each student was given a battery of psychological tests. Some, in addition, received psychotherapy. The results reveal uniformity of distress and confirm the essential continuity between normal and disturbed behavior. These features may be exaggerated by Hendin's mode of presenting a conglomeration of vignettes and brief case histories, without analyzing his categories into any systematic set of factors. But despite this methodological flaw (which could have been corrected with an appendix), despite the limits in the size of sample (about as big as possible for a single investigator—indeed it reveals an extraordinary degree of energy), despite the fact that university students do not make a generation, and even given the element of bias necessarily introduced by a single investigator using interviews—despite all these caveats, it would seem that Hendin has at least made his case that a prevalent deep malaise affects todays youth. Indeed, he has convincingly documented what most, if not all, analysts see in clinical work and general experience, ignore it as they may. Whatever its flaws, the empirical solidity of *The Age of Sensation* puts the burden of proof on those who would hold that prevailing social conditions offer the developing person

a decent chance for wholeness.

Unhappily, the flaws in this work cut deeper than suggested in the previous paragraph and reduce it, for all of Hendin's energy and better intentions, to a kind of gloomy journalism. What is missing from these pages is, essentially, theory. Without a theoretical structure, the riches of the interview as a source of evidence for the study of society become squandered. In order to permit generalizations about social factors, interview data tends to focus upon the more conscious elements of mind; without a steady hold on depth-psychological theory, that which is unconscious slips away into darkness. Similarly, from the social end, critical distinctions within society tend to blur together when filtered through the egocentric consciousness of the individual; and unless the investigator keeps social structures firmly in mind, his analysis will surely reproduce the individual's subjectivist fallacy.

Hendin's study stumbles at both ends, leaving us with an ironically numbing collection of facts instead of real illumination. Psychologically, his chronicles are often marked by one-dimensionality, presenting us with victims instead of people who also have both complicity in their alienation and the capacity to resist it. These qualities can only be conveyed by a more penetrating insistence upon unconscious processes than appears in sociopsychological studies such as this, which emphasize what the environment does to people at the expense of their inner mediation. Note, for example, the presentation of the inhibition of aggression which characterizes normal male subjects: "Even Freud, whose anger toward his father was conscious, let his father win because he was 'too pathetic' when he lost. The message these students get from their fathers is that their manhood will be their father's downfall" (p. 98). When the oedipus complex becomes a matter of "messages" from father, then the edge of psychoanalytic critique is seriously dulled. It is not that Hendin does not know better; only that the mode of sociopsychological discourse all too often succumbs to a flattening environmentalism.

Furthermore, the environment itself is presented as a static, undifferentiated mass without any dynamism of its own. There is, for example, a rather shocking lack of historical perspective in this book, nothing, really, beyond the unfelicitous comparison between today's youth and "me and my generation, which prized commitment and

involvement as the source of pleasure and satisfaction in life" (p. 6). Are we to conclude that things only began to get unstuck in the last twenty years; that bourgeois civilization had it all sewed up before then? If so, then what of Freud's insight, or indeed the entire history of modernism with its loss of faith and delegitimization of authority?

Hendin locates the difficulty in "society." This is fair enough. But for him society seems to be nothing more than a vague climate of opinion which "institutionalizes lack of commitment" (p. 337). He would like to institutionalize commitment—and for the good of society. In other words, culture, in its laxness, has missed "entirely the stake all of us have in the harmony between the sexes and in the family as the irreplaceable necessity of society" (p. 339). But this is nothing but sloganeering if it is not grounded in a working analysis of what makes society move. Lacking such, Hendin's pronouncements amount to little more than leaden moralizing against social experimentation and for the "old-fashioned" intimacy of the nuclear family. But without defining just what this is and how it relates to the larger whole, Hendin leaves us nowhere. In truth, if one accepts his goal of better human relations, one cannot rest with the dreary sermonizing offered here: one would have to work toward a fundamental restructuring of the political and economic arrangements that make our present society what it is. Such a prospect might not be pleasant, but it would be preferable to Hendin's. For by failing to indicate the social roots of alienation, Hendin also fails to indicate any ground for overcoming alienation through concerted political effort. In so doing, he unwittingly tends to reinforce the very atomization against which he testifies.

JOEL KOVEL (NEW YORK)

UNDERSTANDING OTHER PERSONS. Edited by Theodore Mischel. Totowa, New Jersey: Rowman and Littlefield, 1974. 266 pp.

To read from time to time a volume of psychologically oriented essays which have no relation to the psychoanalytic point of view can be enlightening. It is in this spirit—that is, as an opportunity to explore "how the other half thinks"—that the present volume can be recommended. Not the least of its virtues, in this regard, is its underscoring of the depth and persistence of the behavioristic/phenomenalistic/positivistic point of view among the philosophers

and academic psychologists even of today. Apparently, it is only in the relatively recent past that this orientation has been seriously questioned by large numbers of students of behavior. For this reviewer, at least, it comes as a sobering discovery that many thinkers in psychology still do not find it possible to deal comfortably with the fact of intrapsychic processes.

How to account for this "psychic amaurosis" among obviously intelligent, thoughtful people is a question the analyst reading such essays as these cannot avoid. A cognitive factor which may have some explanatory significance is the lack on the part of any of the authors of direct personal experience in the clinical management of disturbed individuals. These writers are academic psychologists and educators. For the clinician their cogitations have the quality of armchair speculations without the corrective modulation of exposure to problems of the real world. It is of more than passing interest that for them the point of departure—the origins of the impetus which has belatedly led them to consider such issues as how to account for empathic capacity and the operation of internalized representations—does not include a consideration of the findings of psychoanalysis. Of the contributors to the volume only the editor, Mischel, deals significantly with psychoanalytic theory and then only in the relatively limited context of its contribution to understanding of neurotic behavior. Object relations theory and the studies of narcissism which have so large a place in current psychoanalytic literature go virtually unnoticed.

If one were to attempt to identify a single worker whose influence can be said to have contributed in a major way to the origins of these essays, it would be Jean Piaget. It seems apparent that his studies of the development of cognitive structures have had a palatability for these nonclinician psychologists and epistemologists which the psychoanalytic version of psychic structure formation and function has yet to achieve.

On the plus side it can be said that these essays indicate a change in times. The *Zeitgeist* now demands serious consideration of the nature of the intrapsychic structures which determine the quality of interpersonal relations and, however ponderously, these contributors are addressing themselves to this task. For analysts whose day to day professional activities are predicated on their assumption of the existence of drives and psychic structures, reading these essays is

somewhat akin to the rediscovery of the wheel. The effort, however, is not entirely unrewarding. One is left with the hope that at some time in the not too distant future, the grounds for a dialogue will be found; it may yet be possible to establish communication with the average expectable philosopher and epistemologist.

DAVID A. FREEDMAN (HOUSTON, TEXAS)

PSYCHOTHERAPY AND MULTIPLE PERSONALITY: SELECTED ESSAYS. By Morton Prince. Edited by Nathan G. Hale, Jr. Cambridge, Mass.: Harvard University Press, 1975. 328 pp.

Morton Prince, a contemporary of Freud, was a prominent Boston neurologist and psychiatrist. He was the founder of the *Journal of Abnormal Psychology* in 1906, the American Psychopathological Association in 1910, and the Harvard Psychological Clinic in 1927. He is best known today for his studies in hypnosis and multiple personality and chiefly for his book *The Dissociation of a Personality* (1906), an account of his work with the Radcliffe student, Christine Beauchamp.

The present volume includes a brief but informative introductory essay by Nathan Hale, known to psychoanalysts for his valuable studies in the history of psychoanalysis in America, and a selection of papers by Prince that span his professional output.

Although the papers are of historical interest, I cannot agree with the editor that they "remain important . . . chiefly because they help explain phenomena which still defy final solution" (p. 1). Hypnosis and multiple personality do defy solution, but it is not true that Prince's writings are still significant in understanding them. His views on hypnosis and multiple personality do not take adequate account of the crucial role of transference in these phenomena, nor was he aware of the iatrogenic factor in multiple personality.

Closer to Janet than to Freud, Prince did not understand psychoanalysis. As late as 1926 he wrote, "After as critical study as I have ever given to anything, the reasoning by which hypnotic phenomena are induced on this theory of 'transference' seems to me a mere hodge-podge of logic. It is useless to discuss it here; yet I think that this sexual theory may be modified and restated in a form to give it a certain plausibility, though it would no longer be Freudian" (p. 304).

Hale gives us a fascinating hint of the meaning of multiple personality for Prince himself by noting that in a letter in 1910 he adopted a feminine pen name in writing to James Jackson Putnam of "the depth of his affection for him as well as the depth of his anger and depression at the growth of a militant psychoanalytic movement" (p. 10). Unfortunately, the hint is not followed up.

The book includes some of the discussions of Prince's papers by opponents and proponents of psychoanalysis. They have a gossipy interest, but they also underscore once again the futility of debating these issues by way of the clinical accounts of observers with different premises. Without original data in common to provide a basis for argument, one is left with nothing but a reiteration of the views with which one begins.

MERTON M. GILL (CHICAGO)

THE LEADER IN THE GROUP. IN HONOR OF ALEXANDER WOLF, M.D., FOR HIS THIRTY-FIVE YEARS OF OUTSTANDING TEACHING, SUPERVISION, WRITING, AND CLINICAL PRACTICE. Edited by Zanvel A. Liff, Ph.D. New York: Jason Aronson, Inc., 1975. 329 pp.

The Leader in the Group, edited by Zanvel Liff, is a collection of complete and partial articles and essays on the role and function of the leader, assembled in honor of the retirement of Alexander Wolf, a pioneer in "psychoanalytic group therapy." On the whole, it is a disappointing book that could have provided an important service.

The first of four sections is a sampling of Wolf's thoughts through the years on the role, function, and comportment of the small group leader and on the group techniques he helped develop. It is difficult to read because of the rambling style and repetitious treatment of issues. The content, too, is disappointing. Where we might have hoped for a well-balanced evaluation of psychoanalytic group therapy that illuminated its relationship to other treatment modalities, we are presented with a selection of pedantic opinions misrepresenting psychoanalysis, individual psychotherapy, and group dynamic psychotherapy in turn, rejecting each in favor of Wolf's own approach. Some of the later chapters achieve a higher plane of discourse. For instance, "The Role of the Leader as Psychoanalyst," written with Emanuel K. Schwartz, successfully rises above the adversary approach found in the rest of this section and presents Wolf's

ideas in a well-balanced and useful summary that does him more credit.

In the remaining three sections, the editor has failed to select contributions that would give a balanced, comprehensive treatment of the subject. Some topics, like the "charismatic leader," are overrepresented, while other basic topics have no paper devoted to them at all. The issue of the responsibilities of the group leader is dispatched within a half-page section, while no paper dealing with the theories underpinning the leader's role in relation to the group is to be found. The basis for grouping many of the articles under particular sections is often obscure, and the relationship of some articles to the book's theme appears at best strained. The editor seems to have appended the words "the leader" to the title to provide an illusion of compatibility with the book's theme. For example, "The Leader Using Audio-Visual Methods" and "The Leader's Role in Focusing" are really general discussions of particular treatment techniques, rather than a consideration of the leader who happens to apply them.

There are some worthwhile and interesting contributions included in the book. In Part II, entitled "The Group Leader: Psychoanalytic Functions and Objectives," problems of transference, countertransference, and resistance are discussed. Liff writes well about the particular transference-countertransference binds created by the charismatic approach so often found in many splinter movements. Henriette T. Glatzer presents a knowledgeable and well-balanced approach for dealing with countertransference problems in group supervision, describing the particular difficulties created by orally regressed group patients.

In Part III, "Newer Psychoanalytic Applications," I found "The Leader in Group, Couples and Family Therapy" by Harriet Strachstein interesting. There is also a long but stimulating and scholarly article by Jerome W. Kosseff entitled "The Leader Using Object Relations Theory." While this paper does not deal with the leader as its title implies, it is an interesting attempt to define a technique which conceptualizes the group as a whole as a symbolic transitional object utilized by its members to resolve schizoid conflicts.

The articles in Part IV, "The Group Leader: Outside the Psychoanalytic Group," examine the relationship between groups, leaders, and the surrounding community and include a description by Serge

Lebovici of the problems faced by psychoanalysts involved in a community program in Paris.

In summary, *The Leader in the Group* does not bring together a comprehensive, well-balanced collection of past or present knowledge about its chosen topic. Except for an occasional article of general interest, the book will primarily appeal to colleagues and admirers of Alexander Wolf.

STEPHEN M. SARAVAY (NEW HYDE PARK, N.Y.)

PSYCHOLOGICAL CARE OF THE MEDICALLY ILL: A PRIMER IN LIAISON PSYCHIATRY. By James J. Strain, M.D. and Stanley Grossman, M.D. New York: Appleton-Century-Crofts, 1975. 223 pp.

In the past ten years or so there has been a resurgence of interest in the psychiatric problems of the medical patient, and much attention is now being given to this area. Psychosomatic medicine, which gradually lost its popularity in the late fifties, has recently re-emerged under a new name, liaison psychiatry. Liaison psychiatry, however, is not only a different name; its emphases are different as well. Its outlook is self-consciously eclectic—psychobiological and somatopsychic as well as psychosomatic. Moreover, while psychosomatic medicine concerned itself mainly with the problems of the individual patient and with the psychology of particular disease entities, liaison psychiatry also contends with institutional forces that shape the working relationship ("liaison") between psychiatry and the other clinical services.

This book attempts to introduce the medical student and the psychiatric resident to this "new" field. The orientation is down-to-earth and pragmatic. Obviously, the subject is so vast and complex that it would have been extremely difficult to do justice to it in its entirety. The authors, James J. Strain and Stanley Grossman from Montefiore Hospital in New York, have wisely directed their book to practical issues and have emphasized how this discipline is actually practiced. The book thus refers not only to specific patients, but also to a variety of clinical situations as they occurred in Montefiore Hospital. Some readers may gain the impression that one hears more than is necessary about Montefiore and its circumstances. This impression, however, will be tempered by the growing realization, as one reads on, that it is precisely this concrete information that con-

veys a "feel" for the issues that absorb much of the time and resourcefulness of the liaison psychiatrist; he is not only a clinician but also an ambassador (and, therefore, ideally something of a diplomat).

The book is divided into three parts. The first, "The Conceptual Framework," deals with the fact that the patients under consideration are medically ill as well as suffering from psychologic dysfunction. Part II, "Specific Clinical Issues," treats assorted topics of clinical relevance, such as depression, hypochondriasis, the problem of pain, the dying patient, etc. Part III, "The Evolution of a Liaison Program: A Teaching and Clinical Model," deals with administrative problems in the hospital and with questions of territoriality, specialization, and philosophical outlook, which influence both training and patient care. The book's co-authors are responsible for the larger part of the book; approximately one third of the chapters are by other members of the Montefiore psychiatry staff, again attesting to the strength of commitment to liaison psychiatry at that institution. A fine chapter on organic brain syndromes gives appropriate emphasis to these entities which, blatantly or in disguise, make up a large segment of the liaison psychiatrist's case load. An excellent chapter on the use of psychopharmacologic agents with medically ill patients offers information not readily found in most psychopharmacological treatises, which assume that the psychiatric patient is physically healthy. Also valuable are chapters on "The Surgical Patient," "The Physician's Response to the Dying Patient" and "The Current Status of Psychosomatic Medicine."

Although they address themselves to matters of clinical importance, such as depression, hypochondriasis, and pain, the authors have chosen not to deal with specific disease entities. This was done, apparently, both to keep the book compact and perhaps also to sidestep the difficult question of specificity, which in the last few years has existed under a dark cloud of skepticism. Curiously, also, little is said about the problem of conversion or about psychophysiologic reactions. The chapter on psychiatric assessment in a medical setting stresses the importance of evaluating the referral and its milieu, but is sketchy on how to interview the patient and arrive at diagnosis, dynamic formulation, and treatment plan. Treatment is dealt with in conjunction with other matters and is not accorded a chapter of its own. One senses a tendency to rely more on psychopharmacological agents and supportive management than on psychotherapy as a

specific and structured psychological intervention. Psychoanalytic contributions are acknowledged but not given particular prominence.

The book will prove useful to beginners and to their teachers as an entrée into liaison psychiatry.

PIETRO CASTELNUOVO-TEDESCO (NASHVILLE, TENN.)

PSYCHOLOGICAL ANTHROPOLOGY. Edited by Thomas R. Williams. The Hague and Paris: Mouton Publishers, 1975. 655 pp.

Any reader who expects that this book will coherently outline the relationship of anthropological thinking to the subdiscipline of culture and personality and that it will provide a critical look at current viewpoints and orientations is likely to be profoundly disappointed.

The book consists of a melange of twenty-eight papers chosen from over three hundred which were submitted to the Ninth International Congress of Anthropological and Ethnological Sciences, held in Chicago in 1973. Selected for inclusion without any statement by the editor as to why *these* articles were chosen, they are arranged in six untitled groups. Professor Williams, with perhaps undue modesty, has eschewed the obligatory challenge to state clearly some unifying theme and critical purpose and to draft a coherent perspective. Instead, he has opted for a questionable and ultimately contradictory approach to his chore.

> I decided that I would proceed in my tasks through emphasizing the general doctrine of THE UNITY OF SCIENCE. This doctrine notes that all of the separate activities of scientists, however disparate their immediate purposes and aims may be, eventually do mutually support and sustain each other. I concluded . . . that I would not attempt to become . . . a judge of what does and does not constitute the contemporary field and "acceptable" research. Rather, I chose to proceed from a general philosophical position that given some minimal criteria for selecting papers my choices would finally support and sustain each other (p. 26).

Unfortunately, given the current state of the philosophy of the social sciences, which includes startlingly contradictory viewpoints, this "cumulative theory" of knowledge constitutes merely a "profession of faith" and the orientations of many of the chapters are latently or overtly contradictory.

Although LaBarre and Singer[1] noted that the influence of psychoanalytic thinking on modern studies of socialization and personality development is increasing, the articles in this volume are, with few exceptions, devoted to social organizational explanations for the products of expressive culture; essentially, they follow the questionable doctrine of Radcliffe-Brown.[2] No doubt this reflects the personal bias of the editor. The psychoanalyst who seeks to validate and modify theoretical thinking through the use of cross-cultural data will find only a few articles useful. Of these, three merit special attention.

The question of whether the oedipus complex is universal, which led to the famous Malinowski-Jones debate,[3] has regularly been considered from the side of the psychological development of the male. Manisha Roy, using the Bengali family in India as his resource material, studies the oedipus complex as it affects father-daughter relationships and the psychological development of the female.

John and Donna Bushnell reconsider the value of projective doll play in research in socialization processes, a study method which was introduced by Róheim[4] in the study of children of Australia and Melanesia and systematized by Jules and Zunia Henry[5] in their work with the Pilagá of Brazil. The Bushnells' use of this technique with rural Mexican children has led to interesting inferential conclusions.

[1] LaBarre, Weston: *The Influence of Freud on Anthropology*. Amer. Imago, XV, 1958, pp. 275-328; Singer, Milton: A Survey of Culture and Personality Theory and Research. In: *Studying Personality Cross-Culturally*. Edited by B. Kaplan. Evanston, Ill. and Elmsford, N.Y.: Row, Peterson & Co., 1961, pp. 9-90.

[2] Radcliffe-Brown, A.: *The Andaman Islanders*. Cambridge: Cambridge University Press, 1922.

[3] *Cf.*, Parsons, Anne: Is the Oedipus Complex Universal? The Jones-Malinowski Debate Revisited and a South Italian "Nuclear Complex." In: *The Psychoanalytic Study of Society, Vol. III*. Edited by W. Muensterberger and S. Axelrad. New York: International Universities Press, Inc., 1964, pp. 278-328.

[4] Róheim, Géza: Play Analysis with Normanby Island Children. *Amer. J. Orthopsychiat.*, XI, 1941, pp. 524-530; The Western Tribes of Central Australia: Childhood. In: *The Psychoanalytic Study of Society, Vol. II*. Edited by W. Muensterberger and S. Axelrad. New York: International Universities Press, Inc., 1962, pp. 195-232.

[5] Henry, Jules and Henry, Zunia: *Doll Play of Pilagá Indian Children. An Experimental and Field Analysis of the Behavior of the Pilagá Indian Children*. New York: American Orthopsychiatric Association, 1944.

Many social scientists still question the role of the dream in influencing the evolution of folklore and religion. Vittorio Lantenari, whose works are unknown to most psychoanalysts because they are published almost solely in Italian, contributes a brilliant chapter on dreams as charismatic significants, based on material from Ghana.

L. BRYCE BOYER (BERKELEY, CALIF.)

THE DON JUAN LEGEND. By Otto Rank. Translated and edited by David G. Winter. Princeton: Princeton University Press, 1975. 144 pp.

The editor of this slim volume has made Otto Rank's monograph of 1924 available in English in the hope that study of this work would throw light on Rank's defection from psychoanalysis which took place shortly after its publication. He has written a scholarly Introduction, provided a list of Rank's several versions of this material, and added copious footnotes clarifying and expanding many of the author's source references. This meticulous treatment of a historical curio may, in fact, be too pedantic an approach to a fragile piece of work.

Winter seems to look upon Rank's interpretation of the Don Juan theme as currently viable, a judgment that this reviewer cannot share. To be sure, the monograph is exemplary in its methodology, and this fact makes it a rarity in the field of applied analysis. Rank carefully considered all of the extant versions of Don Juan in arriving at his interpretation, and he traced the theme back to its mythic antecedents. He did not fall into the error of equating each character in the drama with a real person; he saw clearly that these personages symbolize various aspects of a psychological constellation. Specifically, the protagonist, his servant, and the "stone guest" (i.e. the statue of the man he murdered which ultimately punishes him) stand for various attitudes which never exist in isolation but have to be understood as the elements of one intrapsychic world.

In spite of these merits, the book is no longer satisfactory. Rank begins by viewing compulsive womanizing in the context of Freud's theory of the primal crime in *Totem and Taboo*. Then in midstream, he abandons this interpretation, substituting one related to problems in the relationship with the mother, only to return again to a stress on Don Juan's downfall as evidence of oedipal guilt. It is

not entirely clear how Rank conceptualized difficulties in the pre-oedipal relationship to the mother; his 1924 theory of birth trauma is not used in any discernible manner in this work. In summary, his interpretation of the legend seems to be both muddled and superficial.

As for the historical question the editor wishes to illuminate, this monograph provides no answers. Winter suggests that in Leporello's relationship to the Mozartean Don Giovanni, Rank had found a prototype for his own role vis-à-vis Freud. This arbitrary suggestion repudiates Rank's explicit understanding of Leporello as the hero's devalued conscience. One suspects that in 1922, when Rank did most of his work on Don Juan, the process of his disaffiliation from psychoanalysis had not yet begun.

The historical judgment we *are* enabled to make as a result of Winter's labors is that Otto Rank was a cultivated man with no special gift for apprehending novel psychological configurations.

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ABSTRACTS

Psyche. XXX, 1976.

The following abstracts are edited versions of the English summaries that appeared in Psyche and are published with the permission of the editor of the journal.

The Microscope of Comparative Psychoanalysis and the "Macrosociety." Paul Parin. Pp. 1-25.

The author describes the theoretical foundation and the paradigms of comparative psychoanalysis (or ethnopsychoanalysis), which was developed through the psychoanalytic investigation of subjects in nations outside the western cultural area. The scope, the results, and the pitfalls of this approach are illustrated by means of vignettes from the work of others as well as from the author's own research, which was partly drawn from observations made in Europe and the United States. Ethnopsychoanalysis provides insight into the relationship between inner conflicts and the contradictions and tensions in the social structure. Inner conflicts cannot be elucidated by the analysis of individuals only, according to the author. While its most important method of investigation is individual psychoanalysis, comparative psychoanalysis views the origin and the result of inner conflicts within the context of social conditions and historical processes.

Psychoanalysis and Social Contradictions. Klaus Horn. Pp. 26-49.

The traditional problem of the relationship between sociology and psychology appears, in this presentation, as the question concerning the relation between a sociostructural theory of crisis and a political-psychological theory of conflict. Insofar as psychoanalysis is an enlightened social science, it makes a unique contribution to a nonsubjectivist theory of the subject. Horn contrasts the psychoanalytic resolution of psychic conflicts with their "social legitimization": when a neurosis is rendered functional in a socially recognized form, it becomes unresponsive to psychoanalytic treatment. If psychoanalysis fails to understand this correlation, it becomes conformist. Insofar as the libidinal economics of "repressive desublimation" predominate under "organized capitalism," it becomes plausible that personality defects preponderate over traditional unconscious conflicts among the symptoms of psychic disturbance.

Truth—A Design. A New Study of Alfred Lorenzer and the Current Discussion of Psychoanalysis. Hans-Jürgen Heinrichs. Pp. 50-80.

Heinrichs delineates the framework within which the social sciences are currently developing. In this way he makes Alfred Lorenzer's work understandable as both a reaction and an attempt at self-assertion by psychoanalysis. For too

long, psychoanalytic theory and practice have been bandied about as evidence or as booty in the struggle around the theory of science in which only would-be victors are to be seen so far. Now that psychoanalysis has been reformulated as a nonsubjectivistic theory of the subject, it gives up its erstwhile particularism and completes the arc from the deformation of subjects to the deformative objectivity of the social structures themselves. Heinrichs carries out a critical retracing of Lorenzer's argument.

Birth Envy. Remarks on the Psychodynamics of Birth from the Man's Viewpoint. Walter Bräutigam. Pp. 217-227.

Bräutigam presents the history of a man who grew up among women and for a long time could not get over having been denied permission to witness the delivery of his child. The case provides the author with an opportunity for wide-ranging deliberations, among them how the traditional definition of sex roles may cover up the male problem of "birth envy" and what attitude changes may be entailed by any redefinition of the social roles of the sexes.

Psychoanalysis of an Epileptic Patient with Hysterical Character: A Case Presentation. Hans Geigenmüller. Pp. 228-251.

The author describes the successful psychotherapy of a patient who suffered from near psychotic epileptic twilight states. A cerebrally conditioned maturational arrest brought about an ego weakness which permitted only epileptic and hysterical forms of defense and discharge whenever stress situations occurred, as, for instance, in defending against archaic aggression. In the course of therapy the patient went from a negative oedipal inclination through a phase of phallic expansion to mature genital object relations.

Flight into Fantasy. From the History of a Pubertal Girl. Livia Nemes. Pp. 405-417.

Nemes reports the case of a thirteen-year-old girl who attempted to cope with her sexual identity through a flight into fantasy and through dress-up games. The disturbance derived from early childhood experiences with her parents, especially with her disturbed father, who first made excessive demands on the child and then turned away from her abruptly, devoting himself to her later born siblings.

Drive as a Specifically Human Category. Alfred Lorenzer's Problematic Contribution to the Relationship between Interaction and Drive. Karola Brede. Pp. 473-502.

The author criticizes the interaction theory of deviant behavior (the so-called "labelling approach") as well as A. Lorenzer's conceptualization of neurotic behavior as "cliché determined." The interaction theory ignores the life-historically acquired secondary damages to the "deviant" subjects who are socially "labelled" and thus fixated, and it reduces social domination to *direct* social control. Lorenzer develops a dichotomy between symbol formation and symptom-formation

at the expense of the unity of psychoanalytic theory. Neurotic behavior is a special case of symbolically mediated behavior, not its antipode. Freud's drive and id theories give a better account of the indissoluble compounding of society and "inner nature."

Symbol, Representation, Primary Process. Critical Considerations Concerning Alfred Lorenzer's Proposed Revisions. Emma Moersch. Pp. 503-533.

For some time, psychoanalytic authors have been discussing the possibility of connecting the specifically psychoanalytic concept of symbol (as formulated by Ferenczi and Jones) with the more general concept in the philosophy of language. The author discerns a strong tendency to declare symbolization an ego function at the expense of unconscious processes of figuration. Primarily, she criticizes Lorenzer's concept of the dichotomy between symbolically mediated "normal" activity and cliché-bound neurotic behavior.

Understanding the Unconscious? Concerning Alfred Lorenzer's Concept of "Scenic Understanding." Klaus Menne. Pp. 534-553.

Menne's critique is directed against Alfred Lorenzer's definition of the repressed unconscious as something that has been excommunicated from (public) language, something extralinguistic, desymbolized. This presupposition, argues Menne, leads to insoluble contradictions when one attempts to reformulate the psychoanalytic method. Understanding, in the context of daily discourse, refers to the public as well as to the unconscious meanings communicated and eliminates distortions. Accordingly, psychoanalysis is an analysis of *language* which includes the understanding of unconscious material.

Panel on Sociotherapy with Delinquents. Armand Hustinx, et al. Pp. 569-617.

A. Hustinx traces the genesis of delinquent behavior and emphasizes damages sustained in the process of socialization. These result in an incapacity for satisfying object relations. The therapeutic prison community is designed with this deficit in mind. A. Rengelink describes the transformation of the traditional penal institution with cells into a psychiatric hospital for young delinquents. Here graduated attempts are made to eliminate the patients' difficulties regarding relationships within a practice-field offering different opportunities. P. Brinkman sketches the administrative organization of the hospital, the training of staff, problems of security, and the planning of new building construction. A. A. Warmerdam presents the principles according to which the intensive care sections of the clinic approach their sociotherapeutic work: activation of patients toward cooperation and independence; assignment to each patient of a "companion" whose interventions are addressed to the current situation. H. Harders reports on the typical day of a sociotherapist in an open ward—from surveillance to therapy. J. W. Reicher characterizes "developmental psychopathy" as a narcissistic disturbance in the transitional phase between pleasure and reality principle. The therapy begins with the acknowledgment of the patient's subjective reality and leads to "confrontation."

In a Walk-In Interview with Freud: Technical Considerations Concerning Freud's Case "Katharina." Hermann Argelander. Pp. 665-702.

Argelander discerns the first recorded "walk-in interview" in Freud's case "Katharina. . ." which appeared in *Studies on Hysteria*. By secondary analysis he traces how Freud succeeded in uncovering the incident which had triggered the patient's hysterical symptoms—namely, in the framework of an interview situation which permitted a partial scenic reproduction of that very incident. Argelander's main interest is in the conditions that are favorable for the technique of evoking memories, which Freud applied here for the first time without any auxiliary means of suggestion.

Social Tasks of Psychotherapy. Carl Nedelmann and Klaus Horn. Pp. 827-853.

The authors discuss the problems which the tendency toward a social integration of psychoanalytic therapy creates for psychoanalysis as a whole. The proliferation of its "application," the claim of psychoanalysis to offer a causal therapy, and the competition with other psychotherapeutic schools bring about altered professional political conditions (for instance, health laws) which equate psychoanalysis with other methods of cure. In this way, the essentials of psychoanalytic training are called in question. The establishment of psychoanalysis as a medical specialty will strengthen a trend which Freud and Ferenczi sought to resist as long as fifty years ago with their plea for lay analysis—namely, a trend toward psychoanalysis becoming a mere medical specialty. In distinction to rival therapies, psychoanalysis insists on the primacy of its exploration of the unconscious, that is, on being a causal therapy of neurosis. It does not aim at the repression of symptoms through a strengthening of defense mechanisms, but at a "subversive" and Socratic expansion of consciousness. It protects damaged subjectivity against its mere utilization. As a theory of neurosis and, at the same time, a theory of culture, its competence is transdisciplinary. To what extent the compromises implied by the imminent integration of psychoanalysis will jeopardize its substance is an open question.

Psychoanalysis and Truth. Wolfgang Loch. Pp. 866-898.

Loch shows that in essence the psychoanalytic dialogue is not a search for an objective historical truth and that its results are therefore not the faithful replica of that truth in recollection. Rather, it is a pragmatic, interactional, and consensual endeavor to create a new meaning of life for the present and the future. The psychic reality of memories and fantasies consists primarily in their generation of meaning, regardless of how realistic they may otherwise be in the sense of containing objective reality.

The Psychoanalytic Investigation of Functionally Sterile Couples: A Pilot Study. By Otto Goldschmidt and Clemens de Boor. Pp. 899-923.

Within the framework of an interdisciplinary research project, ten functionally

sterile couples were subjected to a psychoanalytic investigation, including individual interviews, joint examinations, couple interviews, and consensus tests. These investigations substantiated the fact that such an examination should be undertaken prior to instituting organic treatment. The available material corroborates the hypothesis that functional sterility is the result of a secondary repression, mediated through the selection of a partner—that is, a somatization, a defensive symptom commonly sustained by the dyad.

The Classical and the Ego-Psychological Theory of Depression. René Fischer. Pp. 924-946.

Fischer recapitulates the classical theory of melancholy (Freud, Abraham) and its ego psychological supplementation and more precise definition (Jacobson, et al.). As to the pattern of depression (neurotic, borderline or psychotic), it seems decisive which intrapsychic structure reacts in a compensatory way upon the traumatic narcissistic injury. In conclusion, depression-specific modifications of technique are discussed and open questions formulated.

Metapsychology as Hermeneutic Organon. Piet C. Kuiper. Pp. 961-977.

With reference to certain metapsychological categories Kuiper demonstrates that a rigid separation into explanatory and understanding approaches is not possible for psychoanalysis if it is to achieve its objectives. In the metapsychological viewpoints, which are formulated in the language of a hydraulic model, life-historical meanings are always implicated in psychoanalytic usage. For instance, one could speak of the viewpoint of relationship and communication instead of the "adaptive" viewpoint; of various intensities instead of the "economical" viewpoint; or of the life-historical instead of the genetic, and so forth.

The Consensus Problem in Psychoanalysis. H. Thomä, et al. Pp. 978-1027.

Following a discussion of methodological questions concerning the problem of consensus in psychoanalysis (with special consideration of the arguments of Ricoeur and Lorenzer) and a critical survey of the literature, two relevant empirical investigations are reported. In the first of these, the protocols of fifty-five sessions of a psychoanalytic treatment case were rated by means of rating scales constructed to gauge the operation of anxiety concepts (shame anxiety, castration anxiety, guilt anxiety, separation anxiety). Three raters achieved average inter-rater agreement in line with values reported in the literature. In the second investigation, the session protocols were divided into separate patient utterances. After a careful selection procedure, forty such utterances crystallized. These were presented to twenty-five psychoanalysts and to forty-five laymen for evaluation with reference to concepts of anxiety. The fact that experts and laymen attained high inter- and intragroup agreement suggests that the operation of these concepts in the evaluation procedure makes preconceptions related to theory dispensable. It may be noted that the selection of text units was confirmed by

various groups; this may be viewed as an essential condition for the successful validation of concepts of anxiety.

Typical Differences between Swiss and Southern German Members of the Educated Lower Middle Class. Paul Parin and Goldy Parin-Matthèy. Pp. 1028-1048.

Utilizing the methods of comparative psychoanalysis (ethnopsychoanalysis), the authors compare three corresponding personality traits of patients who were analyzed in private practice in Zürich. The Germans showed fluency of speech, an internalized sadistic superego, and an ego prone to efficient performance, whereas the Swiss pattern was inhibition of speech, an externalized "persecuting" superego, and inhibition of ego performance. The triad was traced back to the vicissitudes and the outcome of the anal stage of development, especially to educational attitudes of the mothers displayed during the fourth phase of the individuation process. The typical and determining child-rearing practices can be traced back to different historical situations of the same social class in the adjoining countries and to differing economic and social pressures acting on the families.

The Motif of Intrusion in Henry James. Peter Dettmering. Pp. 1057-1080.

Dettmering shows that a leit-motif in the novels and stories of Henry James was the elaboration of the identity conflicts of many of his characters, whose concealed and feared "true self" was either provoked or represented by certain antagonists, while its realization was, for the most part, anxiously avoided by them. The author points out the peculiar role that communication apparently played for James and demonstrates his vaciilation between Europe and America.

Rainer Maria Rilke in the Psychoanalytic View. Erich Simenauer. Pp. 1081-1112.

The author traces the lifelong unresolved psychic conflicts which are represented and mobilized in Rilke's poetry. Wishes for oral independence are prominent among the motifs, as are envy of pregnancy and birth (in the myths of the artist-god, the hermaphrodite, and the innocent virgin). The author's interpretive attempt is interlaced with remarks on the contribution of psychoanalytic id and ego psychology to the understanding of aesthetic products. He refers especially to the role of the body schema in certain productions by Rilke and by others.

Musical Experience in Puberty. Ruth-Gisela Klausmeier. Pp. 1113-1136.

The author presents the history of a youth who attempted to master his conflicts with the aid of "rock" music during prepuberty and the music of Wagner during puberty. The "benign regression" in the safety of musical experience—of hearing—permitted him the anxiety-free exploration of new life possibilities in the reality of seeing.

Psychoanalytic Review. LXIII, 1976.

New Considerations on the Infantile Acquisition of Language and Symbolic Thought. David Bleich. Pp. 49-71.

The acquisition of language occurs in a certain definite order in all cultures. At about eighteen months, a change takes place in which the child moves from one-word usage to two or more words. The consistency of this change indicates a maturational step in the development of the child. Piaget's work shows this change to be more general, occurring in language, conceptions of causality, time and space; i.e., a stage of symbolic or representational intelligence which begins at about eighteen months. Piaget's work also shows the precursors of this change. Bleich attempts to correlate this cognitive development with psychoanalytic understanding of affective development. The cognitive component of the ability to recognize mother is goaded into existence by mother's absence. Thus both affective loss of mother, leading to the concept mother, and affective presence of mother and material objects, leading to concepts of permanent objects, motivate the formation of cognitive schemata. The capacity to represent a lost object and the capacity to call for the object lead to the linguistic ability to "predicate." When "Mommy gone" states current absence and also indicates future presence based on past experience, the child has developed the ability to "predicate" and has created a dependence between the two words *as symbols,* which enables him to be independent of the immediate real experience of the objects. Thus this cognitive development meets a need for separation and individuation. Children's toilet training—their separation from their feces—is dependent on this conceptual ability. Bleich illustrates the usefulness of the conceptualization with data from the life of Helen Keller.

Sigmund Freud and "The Case History of Berganza." Freud's Psychoanalytic Beginnings. S. B. Vranich. Pp. 73-82.

Freud learned Castilian and read Cervantes' *Coloquio de los Perros* (*The Colloquy of the Dogs*) during his adolescence. The two characters in this picaresque novel are two dogs, Berganza and Cipion. In the novel, Berganza tells his life story to Cipion, who acts as listener, asks a few questions to direct the flow of associations, and presents a more objective view of reality than Berganza. Throughout adolescence, Freud and his friend Silberstein played games in which Freud assumed the name Cipion, while Silberstein took the name of Berganza. As late as 1874, during his first year at the University, Freud signed a letter "*Dein Getreuster Don Cipion*," and in the body of the letter, the phrase "*Ich, Don Cipion*" appears. Vranich suggests that this adolescent interest and identification with Don Cipion in games bears a striking resemblance to the attitude of the analyst and must have been a contribution to Freud's later development into an analyst.

The Extramarital Affair: A Psychoanalytic View. Herbert Strean. Pp. 101-113.

Strean delineates and demonstrates with clinical case material four dynamic

constellations which may underlie extramarital affairs. In the first, the spouse's importance as a parent figure causes sexual relations to be experienced as incestuous, and the extramarital affair provides an apparently nonincestuous object choice. The extramarital relationship, however, also fails when the partner begins to take on parental aspects and becomes a prohibited object. In the second case, a primitive superego-ego conflict is externalized by finding an extramarital object to defy the spouse and often arranging for the spouse to discover the infidelity. The conflict is then between the spouse (externalized superego) and the patient. The third type of extramarital affair allows the expression of bisexual conflicts. A patient who, in his marriage, takes a dominant or masculine role, can in an affair take the opposite role. Strean notes that these patients, despite many complaints about spouses, cling to their marriages because of the need for two partners in order to express the bisexual conflict. The fourth type involves symbiosis as the dynamic force. The patient resents his dependence on his spouse (parent) and uses an affair to declare independence. Current social values provide an atmosphere for the acting out of these conflicts. These affairs, however, are unstable and fail to resolve the conflicts. The relevant developmental stages are pregenital and, in object relations, preoedipal.

New Developments in the Psychoanalytic Study of Religion: A Bibliographical Review of the Literature Since 1960. William Saffady. Pp. 291-299.

Saffady contends that the psychoanalytic study of religion has suffered because of failure to broaden its theoretical base to include more modern psychoanalytic knowledge. The early studies until the late 1950's tended to be based on the id and oedipal themes. At that time it began to be recognized that increased understanding could result if the base were broadened to include preoedipal themes and structural theory. The paper, in a series of very brief vignettes, reviews the recent literature and contains a bibliography of fifty-two entries.

HOWARD F. STOCK

British Journal of Medical Psychology. XLIX, 1976.

The Effects of Therapeutic Conditions: Positive Results Revisited. D. A. Shapiro. Pp. 315-323.

Research in client-oriented psychotherapy on the effect of "accurate empathy," "non-possessive warmth," and "genuineness" in therapists relates these variables ("therapeutic conditions") to the outcome of treatment. This paper is a critical review of a number of such studies. Two types of experimental designs were used. In the first, patients treated by therapists who were rated high in the "therapeutic conditions" were compared with untreated control groups. In the second, a correlation design was used relating high and low levels of the "conditions" to outcome. Truax and Mitchell had earlier reviewed many of these same studies and had concluded that the therapists who were rated high in the three "therapeutic conditions" were more effective regardless of their training or theoretic orientation. The present author disagrees with this conclusion, finding

only a weak association between the "therapeutic conditions" and positive outcome and noting that the most effective experimental design has not yet been utilized.

Training in Feminine Skills in a Male Transsexual: A Pre-Operative Procedure. Krysia M. Yardley. Pp. 329-339.

In this interesting though controversial paper, the author describes a case of a twenty-year-old male transsexual who was given training in feminine behavior prior to sex-change surgery. The approach was a modification of a social skills training program and utilized coaching, modeling, video-feedback, and behavior rehearsal. There was also concurrent psychotherapy with a psychiatrist. Ten raters judged the subject's behavior as significantly more appropriate and more effectively feminine after treatment than before. Results of psychometric testing were more equivocal. The patient reported better adaptation and greater social ease. The author concluded that behavioral intervention before surgery can help a male transsexual with the acquisition of feminine skills and identity.

The Relationship of Reported Sleep Characteristics to Psychiatric Diagnosis and Mood. Edward Stonehill; A. H. Crisp; J. Koval. Pp. 381-391.

This study examined the relationship of sleep characteristics to psychiatric diagnosis and mood in three hundred and seventy-five new referrals to a psychiatric clinic in London. Anger was associated with the greatest amount of sleep disturbance throughout the night. Sadness was associated with going to bed early with some delayed onset of sleep and early awakening; anxious mood with initial insomnia and delayed awakening; tension with going to bed late but sleeping well. The greatest amount of over-all sleep disturbance was found in neurotic depression when compared to endogenous depression and anxiety state. In neurotic depression, there was reduced sleep with both delayed sleep onset and early awakening. In contrast, there was no significant sleep reduction in endogenous depression which was associated with going to sleep early and waking early. Anxiety state was characterized by delayed sleep and late waking without a significant sleep reduction.

JOAN TOLCHIN

The Journal of Psychiatry and Law. IV, 1976.

The following abstracts appeared in the Journal of Psychiatry and Law and are reprinted with the permission of the publisher.

Bad or Mad: The Psychiatrist in the Sentencing Process. Carol E. R. Bohmer. Pp. 23-48.

Circumstances in which presentence psychiatric reports are requested, and their use and influence on judicial sentencing, are examined through both the histories of men convicted for sex offenses and interviews with judges. Offenders for whom a report was ordered and those sentenced without a report were compared. The

seriousness of the offense, previous record, and age of victim were among the factors significantly related to ordering a report. The presence of a report did not generally affect the type or length of the sentence. The recommendation of the psychiatrist and the sentence corresponded in only half the cases, a finding lower than that expected from research with probation reports and some scholarly opinion.

Recidivism, Crime, and Delinquency: A Psychoanalyst's Perspective. Eugene H. Kaplan. Pp. 61-104.

A comprehensive review of the subject of recidivism is presented. It is found that sociological and simplistic psychological theories of crime and delinquency fail to explain variations in individual outcome under similar social conditions. It seems that severely deprived and traumatized children from disorganized multi-problem families commonly develop ego pathology typical of the borderline disorders; the children contribute disproportionately to the numbers of recidivist delinquents. In a classification of adult criminal behavior based on the nature and severity of disturbances in the three mental agencies, it is found that the less the ego pathology, the more is criminal behavior attributable to disturbances of superego development.

Report from Colorado: The New Commitment Law. Jeffrey Steingarten. Pp. 105-124.

A month after Colorado's new commitment statute was on the books, psychiatrists and social workers were puzzled by the new procedures and by a "gravely disabled" standard common to ten other jurisdictions. Patients lacking the advice of counsel in the state hospital were confused about their rights. The new law was drafted without sensitivity to the strict due process requirements imposed by federal courts in six or seven jurisdictions around the country. An example of the problems that can arise under the new law is shown by examining the case of the first patient at Colorado State Hospital to request a hearing. Indications are that mental health and legal officials are now moving with all deliberate speed to bring a greater measure of due process to the workings of the new law.

Behavior Modification and the Law: Implications of Recent Judicial Decisions. Karen Schlueter Budd and Donald M. Baer. Pp. 171-244.

This paper examines the intersection of behavior modification and recent court litigation dealing with prisoners and mentally handicapped persons. The courts have displayed an unprecedented interest in articulating the rights of institutionalized residents and establishing specific standards to insure that these rights are protected. While many of the court-ordered reforms are clearly beneficial, some of the emerging standards might, and indeed do, limit the use of certain behavior modification techniques, with the very real possibility that important therapeutic interventions could be delayed or even prohibited for some persons. The authors present a comprehensive review of the court decisions relating to

behavior modification procedures. They outline some of the complex and largely unresolved issues raised by the decisions and suggest some solutions to these problems from the viewpoint of the behavioral psychologist.

An Analysis of the Views of Thomas S. Szasz. C. G. Schoenfeld. Pp. 245-263.

Szasz's thesis that there is no such thing as mental illness, that psychiatrists are persecutors, oppressors, and torturers, and that the so-called mentally ill should be treated like everybody else is analyzed in detail. The analysis reveals that Szasz fails to support his views with appropriate evidence, ignores crucial evidence contrary to these views, makes egregious mistakes of logic, engages in various forms of "word magic," and commits blatant factual and legal errors.

The Sign-Out Letter: Civil Right and/or Therapeutic Issue. H. Clay Mallard and Eugene B. Feigelson. Pp. 265-276.

Sixteen consecutive hospitalized psychiatric patients who submitted "sign-out letters" were examined by an impartial psychiatrist in an attempt to discern the motivation for the sign-out letter. [Sign-out letters are requests for discharge against medical advice, as permitted by the Mental Hygiene Law of New York State as of January 1973.] In addition, the treating physicians and staff were also examined by the same impartial observer. The authors found that the use of the sign-out letter was determined more by unidentified and unresolved therapeutic issues than by primary concerns with civil rights. On the other hand, the sign-out letter can clearly be viewed as a statement of civil rights if the civil rights issue is understood to refer to a patient's right to refuse treatment if he or she feels the treatment is inadequate or injurious. A therapeutic approach to problems posed by the sign-out letters is suggested.

The Due Process Rights of Minors "Voluntarily Admitted" to Mental Institutions. Robert M. Rolfe and Anne U. MacClintock. Pp. 333-375.

In *Bartley v. Kremens,* a Pennsylvania three-judge court required that all children, before admission by their parents to state mental hospitals, receive a full-blown due process hearing as protection against parental abuse. This article takes a critical look at the *Bartley* court's belief that traditional adversary procedures, essentially modeled after the criminal system, can provide a panacea for children in the mental health area. In outlining a proposal to protect the legal rights of juveniles and at the same time ensure prompt and efficient attention to serious mental problems, the article recognizes that interdisciplinary cooperation is mandatory and that decision making must be shared by the medical and the legal professions.

The Child's Right to Object to Hospitalization: Some Empirical Data. Alan Meisel and Loren H. Roth. Pp. 377-392.

This paper reports the implementation of a 1973 Pennsylvania ruling granting adolescents the right to receive a court hearing to determine the necessity of their

psychiatric hospitalization. Over a ten-month period, nine of forty-three adolescents objected to hospitalization. Only once was an adolescent actually released because of the new procedures. The Pennsylvania ruling granted partial rights to adolescents, rights later expanded in the Pennsylvania case, *Bartley v. Kremens*. The authors note that, whatever has been the case in the past, psychiatric treatment of adolescents is unlikely to continue to be a private matter between parents and doctors.

Training Lawyers in Behavioral Science and Its Applications. Leila M. Foster. Pp. 403-413.

Behavioral science can be of assistance to the legal profession in 1) substantive development of the law from interdisciplinary contributions and 2) improvement of professional skills. A questionnaire sent to law professors teaching courses in law and psychiatry and in law and society reveals some of the innovative programs offered to some law students. Bar associations also are becoming interested in providing continuing education in this area. Professionals of both behavioral science and law should be encouraged to increase areas of communication between the disciplines.

Ego States and the Problem of Responsibility: A Psychological Analysis of the Patty Hearst Case. John G. Watkins. Pp. 471-489.

Legal responsibility is assigned on the psychological assumption that a given body has within it a single "person." Recent clinical and research studies throw considerable doubt on the validity of that position. An ego state is a body of behaviors and experiences bound together by a common identity and separated by a boundary from other such states. It is like a "part-person" or "covert multiple personality." Such structuring of personality may be common to many people not considered mentally ill. This paper applies ego-state theory in a psychological analysis of the Patty Hearst case.

The Courts and the Lallapaluza Rule. Walter S. Feldman. Pp. 535-550.

With regard to medicine, conformity to the community standard no longer always satisfies the courts. Now they sometimes insist that an even higher standard be utilized. In some instances this is a standard that is not followed by the best practitioners in the community. As a result, a physician who practices his art in conformity with the highest standards of his medical community still has cause to fear a successful malpractice suit.

Szasz and the Law: An Alternative View. Lee S. Weinberg and Richard E. Vatz. Pp. 551-558.

In a previous issue C. G. Schoenfeld attempted to disprove Thomas Szasz's theory that mental illness is a "myth" and to dispute Szasz's contention that current views of "mental illness" promote violent subjugation of human freedom in institutional and legal settings. This article argues that Schoenfeld, typical of

many who criticize Szasz, misunderstands and misrepresents Szasz's rich theoretical arguments concerning "mental illness" and the prevalent use in law and institutional psychiatry of medical models for analyzing human behavior. Additionally, the authors urge responsible researchers to further pursue the implications of an accurate understanding of Szasz's arguments for legal theory and practice.

Journal of the History of the Behavioral Sciences. XII, 1976.

The Empiricist as Rebel: Jung, Freud and the Burdens of Discipleship. Paul E. Stepansky. Pp. 216-239.

A careful examination of Jung's so-called "rebel" works does not sustain the critics' contention that Jung fostered a split with Freud. Stepansky argues that Jung had a sincere belief that his limited acceptance of certain psychoanalytic mechanisms and his suggested modifications still constituted full-fledged loyalty to psychoanalysis as he understood it. Moreover, the Freud-Jung letters show Jung's clear allegiance to psychoanalysis and Freud's acceptance and approval of Jung's reservations.

Psychosomatic Concepts in the Works of Shakespeare. C. E. McMahon. Pp. 275-282.

Quotations from Shakespeare demonstrate medical theories of his era such as the cardiovascular involvement in emotion, experiential origins of psychosomatic illnesses, and the role of repression as pathogenic. A plea is made to return to the premodern holistic approach of organismic functioning which is a better base for the consideration of mind-body relationships.

Essay Review. Michel Foucault, An Historian of the Sciences Humaines. David E. Leary. Pp. 286-293.

This critical review of Foucault's four books, *Madness and Civilization, The Birth of the Clinic, The Order of Things,* and *The Archeology of Knowledge,* does much to clear up the obtundities and confusions which are likely to bother the reader of Foucault's special brand of philosophy, linguistics, history, and structural analysis. Leary does a splendid job of elucidating Foucault's place as a thinker in regard to the humanistic sciences.

Beard's Concept of Neurasthenia and Freud's Concept of the Actual Neuroses. M. B. MacMillan. Pp. 376-390.

Beard and Freud have important formal and logical similarities in their theories, although Freud did not seem to have been influenced by Beard. Central mechanisms of both theories are similar: Freud's neurasthenics were drained of somatic sexual excitement, Beard's of nerve force. They differ in the evaluation of causal factors, especially in the role of sexuality. The inadequacies of both theories are examined and criticized from clinical and methodological points of view.

NORMAN REIDER

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Meetings of the New York Psychoanalytic Society

Joaquim Puig-Antich & Sherwood Waldron

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NOTES

MEETINGS OF THE NEW YORK PSYCHOANALYTIC SOCIETY

April 27, 1976. SEPARATION PROCESSES AND PHOBIC CHARACTER FORMATION WITH A CASE ILLUSTRATION. Dr. Maria V. Bergmann.

Dr. Bergmann suggested that the appearance of phobic symptoms is related to residual defects in an unsatisfactory separation-individuation process, with an incomplete unification of the good and bad mental representations of the object. After reviewing the differentiation between psychopathology stemming from the oedipal period, which requires sufficient psychic structuralization for internalized conflict to be present, and psychopathology stemming from preoedipal stages of development at the time of structure formation, which results in pathogenic developmental arrest, Dr. Bergmann delineated three different phobic patterns. Certain early stress responses to a noncomforting internalized maternal representation are related to actual inadequate mothering that took place before internalization. Somatic stress responses, avoidance behavior, or rage toward the mother are typical examples. Later phobic character formation is believed to begin during the rapprochement subphase, whenever the mother does not adequately support and enjoy the emergence of the child's independent activities. Because the child equates independence with object loss, there will be inhibition of independent functioning (locomotor, curiosity) and a clinging, close, and hostile relationship with the mother. The residual defects in the separation-individuation process, as they become part of the patient's character, result in the phobic character. Phobia as a symptom proper appears only after the phallic phase and must be based on repression, displacement, and symbolization, as described by Freud. A partial failure of repression, threatening the emergence into consciousness of unacceptable oedipal fantasies, is necessary for phobia formation to occur. Dr. Bergmann felt that early factors determine the choice of a phobic symptom and that such factors are related to faulty development of self- and object representations, failure to unify good and bad mental representations, failure to achieve object constancy, failure of fusion of aggressive and libidinal cathexes of the object, and failure to develop the capacity to use anxiety as a signal; in summary, a faulty separation-individuation process.

In support of these observations, Dr. Bergmann presented a detailed report of an analysis in which preoedipal themes predominated during the first period. Phobic reactions to separation from the analyst and hostility-induced fears of loss of the analyst were related to the unpredictability of the patient's parents, "forced" feeding, and other preoedipal traumata. Later, as a consequence of the analysis of the preoedipal factors, the traumata which caused phobia formation at the phallic level became available. Primal scene experiences and her father's exhibitionism were recalled. An infantile animal phobia and her frigidity were understood to relate to her wish to merge with her mother's body. Only then did oedipal conflicts come to the fore, the analysis of which allowed the patient to separate completely from her mother. Dr. Bergmann questioned the idea that preoedipal traumata only become available to analysis after oedipal conflicts have

been worked through. The case presented and possibly other narcissistic personality disorders were not thought to follow such a timetable.

DISCUSSION: Noting that this approach to phobia formation was based on a developmental point of view, Dr. Peter Blos pointed out the universality and normality of phobic reactions in early childhood, making prediction difficult. He focused on the patient's inadequately consolidated adolescent development and expressed surprise at the absence of homosexual strivings, regularly seen in similar patients. Dr. Burness Moore pointed out that the same preoedipal factors are also related to a wide variety of adult clinical pictures. The different outcomes might be attributed to the child's constitution, to the developmental stage at which poor mothering occurs, or to the "quantity" and "quality" of poor mothering (the mother might be depressed, a child abuser, rigid, etc., or she might have specific unconscious fantasies involving the child).

JOAQUIM PUIG-ANTICH

October 26, 1976. TOWARD A GENERAL SCHEMA OF PREOEDIPAL DEVELOPMENT. Herman Roiphe, M.D.

Dr. Roiphe proposed that preoedipal development has a far-reaching impact on the organization of the ego and on the form and outline of the oedipal constellation. The "personal birth of the human" at six, eight, or ten months of age, with the dawning awareness that the maternal object is external to the self, initiates a major disequilibrium that is resolved only in the course of the next two years. The smiling response and stranger anxiety are milestones in the development of the object relationship with the mother (Spitz), representing, first, symbiosis and, then, differentiation of self from mother, with the attainment of self and object constancy. The development of the transitional object and other transitional phenomena help to stabilize the child's sense of control and contact with the maternal object, which helps to restore the narcissistic balance. The trauma to the infant's primary narcissism seems to cause an upsurge in aggression directed toward the maternal object; the wish to destroy the loved object leads, in turn, to the need to contain this destructive force. Dr. Roiphe suggested that the usual absence of overt object-directed aggression in the six- to ten-month-old child results from a "moratorium" that is maintained by rapid transient loss of the sense of separateness—a dedifferentiation. In the second year, aggression toward the mother is stimulated by the increasing sense of separateness; the danger then arises that the aggressive drive will appear to threaten the global annihilation of the self and object schema. The splitting of the ambivalence between the anal and genital zones has a particular adaptive value at this age. The anal zone is well suited as the predominant channel for the aggressive feelings connected with separation, because of the anal function characteristics of fullness and loss. The genital zone expresses the libidinal attachment to the mother, enhanced by the good feelings associated with genital manipulation.

Early genital arousal and its related fantasy of closeness with the maternal object follows a different course in little boys and girls after their discovery of the anatomical differences. Almost without exception, girls show distinctly rec-

ognizable castration reactions of varying severity in the second year; boys usually do not. The typical castration reaction begins with a shock-like response, followed by various behaviors designed to deny the genital difference. This is accompanied by an upsurge of anxiety about being left by the mother, frequent marked sleep disturbances, hypochondria, and constipation. During this phase, object loss anxiety and castration anxiety are not clearly distinct from one another. In the more severe castration reactions, there is a more profound ambivalence toward the mother, with severe defensive splitting of the maternal image. The projection of the child's destructive rage onto the mother leads to hostile dependence, a tendency toward a preponderance of negative oedipal derivatives, the development of fetishistic features, and difficulty in developing object constancy.

DISCUSSION: Dr. Charles Brenner felt that the author's interpretations of behavior in early childhood, such as the smiling response and stranger anxiety, attribute mental activities to infants which are not possible until considerably later. In addition, Dr. Brenner considered the concept of primary early fear of total annihilation to be a radical revision of the psychoanalytic theory of anxiety, with misleading therapeutic implications for the analysis of such fears in adults. Dr. John B. McDevitt stated that object-directed aggression does not appear very much in the first year because self-object differentiation evolves slowly and incompletely in the first year. Only with the rapprochement subphase (thirteen months) does the child ordinarily experience feelings of sharp and traumatic separateness.

SHERWOOD WALDRON

MEETING OF THE PSYCHOANALYTIC ASSOCIATION OF NEW YORK

April 19, 1976. CHILDHOOD SEDUCTION, PARENTAL PATHOLOGY AND HYSTERICAL SYMPTOMATOLOGY—THE GENESIS OF AN ALTERED STATE OF CONSCIOUSNESS. Austin Silber, M.D.

Dr. Silber described a patient who was taken to bed with his mother for naps between the ages of three and four, during which his body and face were rubbed against the maternal body and genital orifice, the patient being used as a masturbatory object. In addition, the entire pattern of maternal influence was out of phase with the reality of the different stages of his development, with the mother being unreasonably demanding of performance, harsh, rejecting, and destructive. The pathogenic effects of these traumata included extensive use of the mechanism of denial, with a far-reaching turning away from reality, and a reliance on a special type of fantasy combined with a hypnoid state. Resembling a hysterical symptom, this complex was originally of aid in discharging the excitement of the overstimulated state and later became the nucleus of gratifying masturbatory fantasies. These fantasies were repeated during the analysis to deny the reality of the content uncovered as the symptom was explored and to provide a pleasurable refuge from and substitute for active participation in the object world. When the analyst was seen as a replica

of the destructive mother, interpretations were actively appropriated and manipulated through subtle rewording to the degree that the distinctions between the reality of the intervention and fantasy was effectively blurred. Such "denial" fantasies, combined with the altered state of consciousness, prevented the integration of the significance and meaningfulness of the analytic discoveries.

DISCUSSION: Dr. Robert Dickes discussed a variety of altered states of consciousness, including the hypnoid state. He stressed their function as a defense against unacceptable sexual and aggressive impulses, especially when repression fails. Dr. Richard Drooz called attention to the complication of the mother transference in this situation by noting the "antitransference" role of the analyst, providing the negative of the blissful state which the patient achieved in his sexual experience with his mother. This conception of the opposition of the analyst to the union of patient and mother led to a complete ignoring of the analyst by the use of this defensive and hostile maneuver. Dr. Daniel Papernik related an instance of the use of the hypnoid state for defensive purposes, which was abetted by the conflicted patient's removal of her eyeglasses, thereby reducing the clarity of visual stimuli. Combining this with a diminishing of alertness and a monotonous tone of voice, she effectively "tuned out," repeating a maneuver that harked back to her reaction to a tonsillectomy at two and a half and to instances of the aborting of hostility toward her father. Dr. Jerome Silverman spoke of the technical problems occasioned by the degree to which identification with the aggressor interfered with the ability to use the analysis, something he felt could possibly have warranted treating the patient sitting up, more wakeful and more directly oriented toward reality. In general, the discussants referred to the ubiquitousness of the use of hypnoid states as a defense, although several different meanings and contexts were shown to warrant consideration in a number of illustrative clinical vignettes. Dr. Silber, in his summary, focused on the combination of defensive and gratifying functions served by this symptom and on the damage done by so primitive a parent-child interaction.

ALLAN JONG

At the Annual Meeting of the AMERICAN PSYCHOANALYTIC ASSOCIATION, April 1977, the following officers were elected: Kenneth T. Calder, M.D., President; Alex H. Kaplan, M.D., President-Elect; Rebecca Z. Solomon, M.D., Secretary; William S. Robbins, M.D., Treasurer.

The Annual Meeting of the AMERICAN PSYCHOSOMATIC SOCIETY will be held March 31-April 2, 1978, at the Shoreham Americana, Washington, D.C.

The ASSOCIATION FOR PSYCHOANALYTIC MEDICINE has announced the establishment of the David M. Levy Lectureship on Child Development in honor of one of the

founders of the Columbia University Psychoanalytic Clinic for Training and Research. The first lecture will be given in 1977-1978.

The Library of Congress has received several cartons of valuable manuscripts, documents, and photographs that belonged to the late Dr. Otto Isakower. Dr. Isakower and his wife and associate, Dr. Salomea Isakower, left their estate to the Hadassah Medical Organization, which has donated the collection to the Library of Congress.

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NAME INDEX

KEY: (N)—Note of paper presented at scientific meeting
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SUBJECT INDEX

KEY: (A) Abstract from other journal
(N) Note of paper presented at scientific meeting
(R) Book Review